

Critical Edge Issues in Social Work and Social Policy

Comparative Research Perspectives

Edited by

SHULAMIT RAMON AND DARJA ZAVIRŠEK

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Last but not least, we wish to thank Indosow students and academic colleagues who made us reflect on the nature of comparative research in our shared workshops over the past three years. We look forward to the continuation of this productive process.

Shulamit Ramon and Darja Zaviršek

August 2009

Prologue

We live in an era of accelerated globalisation, which entails accelerated inequality. The negative impact on the economic and human rights of social work clients has taken its toll in many forms, such as the loss of paid work, housing, and/or a healthy environment and increased fundamentalism accompanied by interpersonal, inter-group and transnational violence.

At the same time, globalisation has enabled greater access to information, increasing our thirst for knowledge and making us more aware than ever of forms of inequality, discrimination and exploitation. Yet barriers to sharing knowledge exist, reflecting inequality not only in economic power, but also in political and cultural power. For example, the cultural hegemony of the English language in today's world prevents quality research published in other languages from making the impact it deserves. The assumption that because formal social work has a longer history in the Anglo-Saxon world the rest of the world should imitate it, is not only unjustified, but also negates the logic of the discipline and the profession. However, the assumption that the indigenisation of social work *per se* is necessarily better than adopting an Anglo-Saxon approach is equally concerning, as it not only undermines the universality of social work, but also runs the risk of condoning the neglect and abuse of human rights which a specific culture or political regime might favour.

The comparative perspective applied by the contributors to this book shows that human dignity is a privilege of certain people living in more open societies. For many others – poor people throughout the world, poor children, women, ethnic minorities, unemployed and disabled people – it is an illusive right at best.

The responses of social work and social policy towards these worrying developments in the world are twofold: as professionals, social workers support those in need mostly within the existing national legislations and rarely outside their frameworks. Social work and social policy researchers reflect the world we live in, but as those contributors who have examined social work education have pointed out, only rarely do they emphasise inequalities or the abuse of human rights and critically strive for a better quality of life for everyone.

This book focuses on responses to the many facets of inequality within social work and social policy research, which also resides in this conflicting context and for which there has been an increased demand. A focus on understanding the background of the current context and assessing the value of proposed solutions to specific dilemmas characterises most social work and social policy research. While not forgetting these elements, a number of the contributors to this book also use participatory action research as a preferred mode of doing research because it constitutes an attempt to reduce power inequalities arising from the research process and makes it possible to uncover the lessons to be learned from the lived experiences of service users and practitioners.

The quest for comparative research in our field derives not only from globalisation, but also from a number of diverse factors. Some researchers have a genuine interest in comparative research in social work as a tool for learning among equals, while others have used it in a manner similar to that of the early anthropologists, whose research into 'exotic others' allowed them to learn about themselves. The existence of international funding for research – whether it be sponsored by the EU, the UN, or the World Bank – has led to some good quality, innovative research which would otherwise have not been possible. This has also generated considerable competition and, in many cases, produced research aimed primarily at meeting the wishes of the sponsors rather than research which would provide a more sound, critically reflective knowledge aimed at meeting the needs and wishes of the clients of social work and social policy.

Taking into account the reservations expressed above, the editors of this book believe that comparative research has the potential to provide an opportunity to analyse local contexts from a context-specific perspective. It does so by bringing less known contexts into the centre of social work academic and research discourse, while at the same time not neglecting critical analysis which provides a more universalist light on a given situation, offered by the comparative dimension. Often research of this kind is based on qualitative methodological approaches or a mixed qualitative-quantitative approach, which are conducive to less top-down, more participatory power relations within the research process. This is why we invited researchers from both the 'developed' and 'developing' countries to contribute to the book. The decision to publish it in English was dictated by the realisation that this would secure a wider, more powerful dissemination. But we would be very happy to see it translated into other languages.

As comparative researchers are well aware, this type of research is difficult to obtain funding for and operationally manage. The move in social science, social work and social policy research from being a one-paradigm affair to including a variety of interpretative approaches represents an additional complexity. Furthermore, the ability of specific research paradigms and methods

to provide data which would be good enough to shed new light on the questions asked has been, and continues to be, a hotly debated issue. This is the case because the choices made depend on beliefs, scientific principles, and feasibility within a given study, and are therefore often a compromise which is open to doubt.

The increased emphasis on cross-cultural, cross-society research presents additional complexities and uncertainties in terms of the triangle of beliefs, scientific principles of research and feasibility. Some of these are explored in this book. The dimension of comparative research relates to the degree of coherence in bringing together different sets of beliefs and feasibility issues, even if the scientific principles remain a constant. At times even these principles may be subject to somewhat different interpretations.

The relatively recent recognition of the significance of the different power positions and stances that different stakeholders bring to the research endeavour is one of the dimensions this book takes account of, in particular because it is a neglected issue within much of the existing comparative research in our field. We feel that one cannot assume that service users and their informal carers, professionals in social work and social policy, policy makers, research funding bodies and researchers will represent the same position in any given research topic or project.

Differences apply to understandings of the aims of the research, the way the methodology and methods are perceived, and the use of the findings. Therefore, the initial idea of the book was to explore a number of questions, including:

- How were content and methodological choices negotiated between the researchers from different societies?
- How does a sole researcher construct comparative research?
- What role does reflexive analysis play in the researchers' choice of the comparative approach?
- What are the underlying political reasons for the use of comparative research for national and international research with different participants and related stakeholders?
- How have differences affected the research process?
- What kind of impact has interpretation made on the findings?
- What kind of impact has the comparative approach made on the use of the findings?
- How were disagreements resolved during the duration of the project?
- What are some possible pitfalls of comparative research (ideological, methodological, feasibility issues)?

The authors share with the readers a number of cutting edge examples of comparative research from different parts of the world, including Australia, Austria, Bosnia and Herzegovina, Brazil, Hong Kong, Slovenia, South Africa and the UK. These examples of research work and its impact highlight some

of the dimensions listed above. The editors have opted to place a discussion of methodological issues within the context of a specific research focus in order to enable a contextualised understanding. This choice reflects our interest in research as a 'live' issue which can have an impact on policy and practice.

The book explores the logic and the values underlying comparative research in social work and social policy. **John Douglas Whyte and Jacynta M. Krakouer** use their long-term research on social work with Indigenous people in Australia to uncover the stark differences between the worldviews of this group and those of the white majority. They ask themselves how their methodology can facilitate an in-depth investigation while at the same time providing a way to harness the differences involved in order to produce a creative methodology which respects differences and enables the building of a shared methodology. Issues of relative power and powerlessness prevail in their discussion, alongside considerations of what each group could potentially offer to the other and to itself.

Nino Rode illustrates the paucity and tentativeness of methodological research options in social science in light of the basic issues that comparative research raises for social work researchers. He not only identifies some of the more common pitfalls, but also proceeds to offer some – tentative – solutions to them.

Lena Dominelli focuses on the impact of the new globalised world, where, despite the achievements of the feminist and black movement, poverty continues to be differentiated according to ethnicity, class, gender, age and geographic location. The focus of her contribution is on the critical stance and action of social workers around the world. In today's world, members of ethnic minorities, women, children, and old and disabled people bear a disproportionate burden in conflicts over the distribution of wealth and the world's resources and the accompanying forms of social exclusion.

Looking at the history of welfare in Eastern Europe from a gender perspective, **Vesna Leskošek** continues the debate begun by Lena Dominelli. She illustrates the value of taking a historical approach to this issue in a part of the world which has experienced considerable change in the last twenty years. Furthermore, because of the feminist perspective of the author and other members of the research network described in the article, this is a history that was in fact retold through the inter-subjective perspective of the women researchers who were active in creating it.

The book presents number of examples of the application of specific methodologies to cutting edge issues within social work and social policy.

Shulamit Ramon outlines the breadth of comparative research within the field of mental health, an area that impacts the lives of many users of social work and social policy in every country. She provides examples of methodologies from the macro level of policy and from the meso level of research on groups experiencing the radical policy and system shift that was

de-institutionalisation in the UK, and also shares her reflections on participant observation in an EU multi-country action research project focused on social inclusion in mental health. The chapter also highlights the changing positions within research as a result of the power shift: from the qualified researchers' monopoly on research knowledge, to shared ownership of research featuring service users as co-researchers.

The transfer of knowledge and skills for work with street children is presented by **Vishanthie Sewpaul** and **Ingrid Scharer Osthus**. Their article provides the reader with a unique and moving example of how comparative work encompassing two countries with similar social problems – South Africa and India – can help to positively transform the lives of children. The action research discussed in the article highlights the value of openness to new – one might even say 'strange'- ways of intellectual and emotional understanding. It also looks at ways to bring about necessary, vital change in the small details of the everyday life of street children.

Joana Garcia describes the tremendous efforts being made to change the lives of poor families in Brazil through a comprehensive secured income programme, the *Programa Bolsa Família*, or Family Grant Programme. Her well-documented analysis demonstrates the merits of the programme as well as gaps which seem to stem from an ideological base which is not shared by the families included in the programme and, to an extent, not in line with the values of social policy.

Lucie Prochazhova and **Tom Schmid** look at another facet of the rapidly changing construction of the socio-economic relationships prevailing in all of our societies, namely the move from family care for older people and younger disabled citizens to paid care provided by migrant care workers from poorer nearby countries. Although their focus is on Austria, the authors underline that the ramifications of recent developments there extend well beyond its borders in a phenomenon known as the 'chain of care'. They highlight the key advantages and disadvantages of this semi-legal system of care that is partly unburdening the state of its financial responsibility, with a particular focus on the impact it has had on social policy in Austria. The chapter also features an in-depth discussion of the difficulties involved in carrying out good quantitative research when the data is largely hidden. It illustrates the value of persisting against the odds in carrying out research on a key issue which has already affected a large number of people in many countries and which is set to grow in size and significance, both in Austria and throughout Europe.

Some authors have looked at key issues within social work education and related methodologies in an international, globalised, and yet, at the same time, localised world.

Angelina Yuen-Tsang and **David Ip** focus on the indigenisation of social work education in the context of the development of social work in mainland China. This is an important issue for any country wishing to set out on the

road to introducing social work by establishing social work education with a culturally sensitive content and format. The process of indigenisation raises a number of issues for which there are no easy solutions. A key challenge is matching the universal values of social work to culturally sensitive adaptations without giving up on the essence of those values in the process. Several interesting and – not surprisingly – problematic options emerge. The issues are researched from the perspective of social work students and educators and the government.

Reima Ana Maglajlic-Holicek presents an example of the use of participatory action research as a tool to research key stakeholders in social work education in two different contexts: Cambridge in England and Sarajevo in Bosnia and Herzegovina. Lecturers were excluded as a group from the co-researched stakeholders, as their voices dominate the debate on social work education. Instead, the research included those who rarely have a chance to be heard – students, service users and practitioners. The chapter demonstrates the value of applying co-operative inquiry within a comparative study focused on enabling a dialogue to unfold and bringing about some tangible changes.

Petra Videmšek and Joanna Fox examine concept mapping within the context of Ph.D. research conducted by students of the Indosow programme. Each author represents not only a different country (Slovenia and England) and study/research focus, but also a different approach to preparing and using concept maps. Both authors illustrate how this didactic tool has helped them develop their thinking and enabled them to reflect on the core concepts of their studies. With time, not only did their concept maps gain depth and meaning, but also their skills as Ph.D. students. The visual impact of the tool and an easy-to-use software programme for concept mapping furnish additional attractive dimensions for its creative use. Grounded in theories that highlight the value of meaningful, enduring learning and knowledge, concept mapping offers skills which the authors – and all of us – can apply to a wide range of activities and fields as researchers, teachers, or students.

Darja Zaviršek has used the comparative perspective to elucidate the historical barriers to academisation and research work in social work. Her article takes a critical look at these processes, and is also critical of the fact that, although many schools of social work throughout the world have established doctoral studies over the past decade, this academisation does not guarantee more critical and politicised thinking among social workers. Recent changes within higher education, together with the neo-liberal conditions of the world's societies, constitute obstacles that often transform academisation in social work into a production of a new, often too descriptive knowledge which is too distanced from social work practice.

Although the recent interest in comparative research is a welcome development, it risks going out of fashion. The reduction of international funds for critical academic research, the ideology of risk avoidance and its reality

(health epidemics, airplane accidents, terrorism), the pauperisation of universities and academics in many parts of the world, and the decline in opportunities for reflective, critical debate: these are all factors which dictate a degree of caution. Against these odds, the editors of the book wish to emphasise the important contribution critical comparative research has made – and is making – to critical social work and social policy knowledge and to advocate its future continuation.

We hope that you, the reader, will find the book both stimulating and enjoyable, and that it will lead to further reflection and dialogue about the central issues it raises for social work and social policy knowledge.

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Darja Zaviršek and Shulamit Ramon

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PART I

The logic and the values
underlying comparative research

Chapter 1

Researching Social Work with Indigenous People in Australia: Across Worldviews, across Time, across the Table

John Douglass Whyte and Jacynta Krakouer

Introduction

The use of comparative research by social work dates back to the profession's origins. However, its nature has changed over time, reflecting the profession's changing contexts. With the globalisation of social work, professional practice has expanded outside of the profession's western origins to encompass cross-worldview settings. Each contextual expansion has meant a greater complexity of the comparative research factors to be considered. In this chapter, the key conceptual and process challenges encountered while conducting the Australian Research Council-funded project *From Colonisation to Conciliation: A Collaborative Examination of Social Work Practice with Indigenous Populations* will be examined. This overview will explore the myriad complexities encountered in a project that endeavoured not only to compare characteristics, attitudes and positions of populations from different cultural worldviews, but also to explore the legacy and dynamics of the sometimes contentious relationship between their members: western-trained social work professionals and the social work academics responsible for their training on the one hand and Indigenous recipients of social work services on the other.

Background: Shaping initial conceptualisations

Comparative research has been shown to be an effective approach to examining similarities and differences across differing societal and cultural contexts. Analysing the features of differing structures and institutions and traditions and artefacts, it is a perspective that facilitates the identification of similarities and differences (Hantrais 1995). The project discussed here differs from more conventional comparative research due to the presence of two overlapping challenges pertaining to its conceptualisation and operationalisation. The first of these is the need to understand the ontological and epistemological degrees of difference between the groups involved. Unlike cross-cultural comparisons, where differences in language and customs between different populations are nonetheless expressed within a similar understanding of the underlying nature of reality, the differences between traditional Indigenous Australians

and western-trained non-Indigenous professionals often encompass different worldviews, that is, perceptions of the fundamentals of reality. Failing to recognise the degree of these differences could result in erroneous assumptions about the similarity of elements that are in fact incommensurable or the difference between elements that are in fact equivalent.

The second challenge pertains to recognising the complexity of cause and effect. Namely, it is not only important to understand expressed differences between the Indigenous and non-Indigenous Australian contexts, but also to address the fact that those factors were shaped and influenced by the historical dynamics between the two groups in question. Indeed, the characteristics were the result of the dynamic, and not the other way around. Failing to recognise this would compromise the project by mistakenly shifting its focus to the effects of characteristics, thereby neglecting dynamic causes and, by so doing, potentially perpetuating the highly oppressive practices it seeks to redress (Burke and Harrison 2002).

Beyond cross-cultural: Crossing worldviews

It is important that any attempt at comparative research involving social work and Indigenous populations take into consideration a more complex, more fundamental notion of cross-cultural practice – one which encompasses more than just differences of language or customs. This is the idea behind practice that spans worldviews, where understandings of what constitutes ‘reality’ can differ dramatically. Negotiating these differences lies at the core of social work because fundamental assumptions, presumed approaches and expected outcomes can be challenged by the practise of social work itself.

Building on Berger and Luckmann’s (1966) arguments for the social construction of reality, Kuhn’s (1996) and Bourdieu’s (1977) approaches to understanding the dynamics of change (whether within professions, disciplines, societies or cultures) and Smith’s (1999) and Gandhi’s (1998) demonstrations of the dynamics of colonialism on Indigenous peoples, comparative research must recognise the implications of conducting research or practice across worldviews. This recognition involves understanding the dynamics of the profession’s development and then applying this understanding to the conceptualisation and operationalisation of the proposed comparative research.

The concept of cross-worldview practice was incorporated into the conceptualisation process for this project by two team members who had previously researched its implications. While it is beyond the scope of this chapter to examine all of the differences between Indigenous and non-Indigenous perspectives, some should be mentioned. These include:

- The notion of conceptual incommensurables. Each worldview has several features and dynamics that simply do not ‘translate’ well into the other. These include ideas of spirituality, interpersonal dynamics and environmental

influence. This difficulty can have implications for both understanding and acceptance. In some instances, the misapplication of a notion from one worldview in attempting to explain the other has resulted in a 'bottleneck' around which further misunderstandings accumulate. Examples include expectations of the professional/client relationship and understandings of practitioner effectiveness. Similar to the acceptance of the features of one worldview by the other is the idea of cognitive dissonance – the dynamic which may be experienced by non-Indigenous practitioners when faced with assertions based on an Indigenous worldview (Festinger 1954). When faced with conflicting or mutually exclusive assertions, the normal reaction is to accept those which most readily fit into the larger body of existing understandings and to dismiss or minimise those which do not (Whyte 2005). The recognition of these differences and dynamics was essential during the conceptualisation and operationalisation of the project. How they influenced the breadth of the aims of the project and the formulation of the methodologies used will be discussed below.

- The locus of legitimacy. One difference that may emerge across paradigms – not exclusively across worldviews, but also across differing cultural and disciplinary contexts – pertains to the locus of perceived and ascribed legitimacy. Within western human service professions and academia, one's credentials and position confer undeniable legitimacy. They serve as a guarantee of one's level of competence and field of expertise. In contrast, different contexts, including traditional Indigenous Australian ones, give greater credence to perceptions of an individual's trustworthiness – independent of, and in some cases in spite of, credentials or position. These differences were to have a direct impact on the project, particularly in the formation of the research team and the ways potential participants were contacted and engaged.
- Process versus outcome. A number of theorists (Deloria et al. 1999, see also Nakata 2007, Peat 2002, Smith 1999) describe differing emphases related to processes versus outcomes, interactions versus entities and verb versus noun. One example is Indigenous oral traditions, where information is not merely transmitted, but shared through a direct, synchronous, interactive and inter-subjective dynamic. The classical western approach, in contrast, relies on the identification of terms, of things which facilitate a text-based written tradition which involves the indirect, asynchronous and non-inter-subjective transmission of information. Understanding the pre-eminence of process within the Indigenous context also allows for a greater appreciation of the implications and impact of the historical dynamics between Indigenous and non-Indigenous cultures in Australia. As described below, the dynamics of oppression and the legacy of distrust involved more than accounts of past events – they were in fact ongoing dynamics, continuing shared experiences that extend all the way to the present.

Considerations of these differences had a profound impact on the dynamics between Indigenous and non-Indigenous research team members and on the policies (both formal and informal) that governed how the research was conducted and how differences were resolved. They also fundamentally shaped the methodological approaches used.

A history of complex relationships and shifting historical contexts

There is an unfortunate irony in the social work profession's relationship with Indigenous Australian populations. On the one hand, the stated mission of the profession of social work is to promote 'social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being' (IASSW and International Federation of Social Workers 2004). And with social workers practising across the full spectrum of human service agencies and programmes – not only at the front line of these services, but also through longer-term casework, community development and social policy development – the profession is uniquely situated to respond to issues confronting Indigenous populations. It is a critical professional context in which competent and effective cross-paradigm understandings are essential. Their absence can result in a series of misunderstandings, misspent human service resources and the exacerbation of the client's disadvantage and suffering.

And yet, Indigenous populations are the most disadvantaged of all Australians, with significantly poorer opportunities for accessing the wide range of citizenship and well-being measures than non-Indigenous Australians (Jones 1996, see also AIHW 2003, Anderson *et al.* 2006). This disparity stems, in no small measure, from a history of dispossession, exclusion and control and is underpinned by attitudes that could be characterised at best as 'patronising and paternalist, at worst as harsh, moralist, unsympathetic and condemning' (Wearing and Berreen 1994: 27).

Both the National Deaths in Custody Program Annual Report (McCall 2003) and the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families (1997) describe episodes from throughout the history of colonisation – a process of colonisation and marginalisation carried out not only by the wider community and a succession of governments, but also by welfare departments and health service workers working with Indigenous populations, including social workers.

Certainly, a contributing factor has been the history of the development of the social work profession, for this development points to the myriad implications of practice across worldviews. As is the case elsewhere in the world, social work in Australia has drawn its informing theories and practice models from the western disciplines of sociology, anthropology and psychology and from centres of understanding, most often western universities. This intra-worldview locus has resulted in the imposition of parameters for what is legitimate (or

normal or possible) in terms of the psychological, behavioural, cultural, social structural and spiritual dimensions of the human condition (Smith 1999). As noted above, when the Indigenous worldview differed from the western worldview, it was often held to be inferior, spurious, or fantastic. This marginalisation and denial of an entire way of knowing was practiced at the 'ground level' through the efforts of 'social workers' and reinforced and legitimised through the mechanisms of the western-oriented institutions that educated and credentialed the practitioners (Bourdieu 1977, see also Duran and Duran 1995, Mi-hesuah 1998, Smith 1999).

So it happens that the three populations compared in this project have been ensnared in a long-term, sometimes contentious, dynamic in which western legitimising institutions, working through their sanctioned practitioners, introduced and administered policies and practices which have had a questionable degree of effectiveness in reducing disparities in citizenship opportunities and well-being. These shortcomings were to bring up questions of critical importance to the project being conceptualised: What can be said about the profession's attempts to critically reflect on its practises through engagement with Indigenous populations? Could these previous efforts inform the conceptualisation and operationalisation of the project being envisioned?

Limited studies, enduring results

Despite the fact that the Australian Association of Social Workers (AASW) and the International Federation of Social Workers (IFSW) strongly support a practice agenda based on a human rights framework (Ife 2001), few schools in Australia incorporate explicit Indigenous content or acknowledge Indigenous frameworks of understanding, values or attitudes. In light of this absence, Indigenous dimensions of practice tend to be relegated to issues relevant to particular fields or aspects of client behaviour rather than being understood as mainstream and closely related to everyday social work practice. Existing codes of ethics for professional social workers, including the Australian Code, require the competent, ethical practitioner to actively seek to redress these problematic relationships (Australian Association of Social Workers 2002), a process which must involve an examination of one's professional education. Nevertheless, the question of how to do this is still relatively unexamined within Australian social work.

This critical silence was noted by McMahon (2002) in his review of the presence of Indigenous issues in the major national social work journal, *Australian Social Work*. He found that only 1.71 percent of the 934 articles published over the past fifty years addressed Indigenous issues in any way (*op. cit.* 178). Both the Royal Commission's recommendations and McMahon's reflections highlight the fact that Indigenous issues continue to struggle to be given a voice within both social work practice and education. Given this

disjuncture, it is not surprising to find that not only are emerging practitioners often ill-prepared to understand or respond to Indigenous issues that arise across the breadth of professional practice, but also that Indigenous students are under-represented in Australian social work degree programmes, especially in the southern States (Quinn 2000, see also Commonwealth Department of Education, Science and Training 2003). In this regard, Australian Schools of Social Work lag behind both international schools of social work and other Australian professional groups, who have begun to tackle these critical issues.

Studies outside the profession

Notwithstanding the paucity of studies and projects originating within the social work profession, two reports from related fields of practice have revealed ways in which studies such as the one discussed here can be successfully undertaken. These are the Committee of Deans of Australian Medical Schools Indigenous Health Curriculum Framework (Phillips 2004) and the community report published by the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and the VicHealth Koori Health Research and Community Development Unit (2001) entitled *Teaching Koori Issues to Health Professionals and Health Students*. Both of these reports stress that unique guiding principles, subject areas, delivery and assessment and resource issues must be addressed in order to engender Indigenous perspectives into emerging professional practice. Both of the reports were to significantly influence the concepts and methods used in the project, and will be discussed below.

Interweaving background factors

All of the factors described above significantly impacted the researchers' understandings of the factors, dynamics, past professional approaches and potential means regarding this comparative study. Together, these factors form a more comprehensive picture of a practice context in which:

- The coloniser/colonised historical relationship between Indigenous Australian and western populations created a still-persisting legacy of social disadvantage, mistrust and resentment for many Indigenous Australians. This history would have to be considered when conceptualising the intent and potential consequences of the proposed study.
- The basis of this relationship was the presumption of the superiority of the western worldview, which effectively denied the validity of differing, Indigenous worldviews. The approaches used in the proposed study would have to be the result of careful consideration in order to ensure they fully recognise and perceive as legitimate features and tenets of both worldviews.

- The social work profession, itself conceived and developed within a predominant western worldview, engaged in practices with Indigenous populations which, while justifiable within the paradigm of the time, are increasingly understood to have been marginalising and oppressive. The persisting attitudes of Indigenous populations towards the profession, whether from direct or related experience, must be recognised when considering means for encouraging community involvement in the project and ensuring a full voice for those views.
- Australian schools of social work, as the sole accrediting institutions for the education of the profession, continue to engage in educational approaches which perpetuate the marginalisation of Indigenous peoples in Australia by failing to recognise the equality of mainstream and Indigenous contexts. Academia's relationship – directly with students/future practitioners and indirectly with Indigenous communities – must be recognised so that efforts made within the framework of the project specifically aim at breaking the perpetuation of this cycle.
- The implications of practising across worldviews, as distinct from practising across cultures, have been unrecognised or downplayed by both academia and practitioners. This shortcoming extends not only to 'degrees of difference' between Indigenous and western worldviews, but also to the mechanisms by which those differences are minimised by practitioners.
- There is a paucity of social work professional studies analysing ways in which all of the profession/client features described here can be redressed. There are, however, examples from related disciplines and professions which describe successful approaches.

Interweaving context with project conceptualisation

As noted above, the dynamics and relationships between western-trained social workers and social work academics and Indigenous Australian recipients of social services create a context which cannot be avoided by any kind of research undertaking looking to address the persistence of measures which result in Indigenous disadvantage. The catalyst for what would become the Colonisation to Conciliation Project was the attendance of key members of the research team at the launch of a programme that pointed towards a potentially viable and fruitful approach. This project, the Committee of Deans of Australian Medical Schools Indigenous Health Curriculum Framework report, outlined methods and outcomes that were recognised as potentially adaptable and applicable to social work.

Subsequent informal discussions also emphasised the need to address historical dynamics and their implications. In the course of these discussions, the unstated presumption that these factors would be addressed not only in the choice of methodology, but also through the modelling of full-voice dynamics

in the course of the project itself, emerged. This was to have a number of implications, not only for the conceptualisation and operationalisation of the project, but also for the dynamics between members of the research team.

The formation of the research team

When developing a research undertaking of any kind, situations where an established researcher, or team of researchers, identify and pursue a particular research topic can emerge. This sequence of team-then-project offers both advantages and disadvantages. Among the advantages is a known history of cooperation/collaboration between the researchers. In such a setting, issues of legitimacy will have been established, as will most issues pertaining to expectations of respective roles and duties. In short, issues of interpersonal dynamics are at least partially recognised, if not fully resolved.

Some of the disadvantages of this approach include the inadvertent partiality of the collective and expertise *apropos* the target undertaking – emphasis on or familiarity with a particular ontological, epistemological or methodological approach might mute or marginalise competing or potentially conflicting approaches. The perspectives of the researchers may only partially comprehend the dynamics of the research topic; in turn, a failure to understand the essential issues could produce approaches that may not be appropriate or relevant.

This project falls into a different category. Because the initial discussions led to a consensus that the research team should reflect the representation/perspective collaboration of each stakeholder group – Indigenous community, social work practitioners and social work educators – the formative sequence became project-then-team. Purpose, not convenience, was to drive the selection process. Likely team members would not be identified solely on the basis of past research history, but on the basis of their potential contributory standpoint. As a result, the formal research team consisted of Indigenous and non-Indigenous social work academics and Indigenous community workers and social work practitioners affiliated with major health service institutions. Even when changes to the initial team became necessary, this idea of full representation/contribution underpinned the selection of new research team members.

This approach offers a number of advantages in such a dynamically complex research context. Unlike the team-then-project approach described above, this approach explicitly engaged in a more comprehensive approach, one which actively incorporates the understandings, perspectives and expertise of a wide range of researchers. Thus the potential for a more complete comprehension of the conceptual and dynamic nuances and subtleties of the research topic was significantly enhanced. The resulting breadth of scope is evidenced by the research questions listed in the initial funding application:

- Given the current quality of life indicators for Indigenous Australians and their historical relationship with social work, questions about social work's practice effectiveness and academic preparations have arisen, including the following:
 - What perceptions of social work practice with Indigenous populations are held by Indigenous communities and by social work academics and practitioners?
 - How has current theorising of Indigenous experience, such as post-colonial theory, been incorporated into social work practice?
 - Given the cross-paradigm nature of mainstream social work practice with Indigenous clients, how are practitioners made aware of relevant cultural and structural differences?
 - What is the Indigenous component in tertiary social work curricula, and how, in turn, does this influence the nature of social work practice?
 - What should be national level accrediting standards for Indigenous curriculum content?

Just like its complement, the project-then-team approach does involve some challenges, particularly the ways in which the background context factors described above affect the dynamics among research team members. Examples include issues of locus of legitimacy, role expectation/attribution and purposes of the research.

Personal cross-worldview differences related to the locus of legitimacy do not dissipate simply because of one's involvement in a collaborative research project. For academics from related fields, positional legitimacy may be an appropriate criterion for collaboration with other academics from the same or similar fields. Similarly, for professional practitioners educated in academic institutions, the positional legitimacy of academics or other trained professionals may be the deciding factor. However, due to the historical tensions and mistrust surrounding the nexus of Indigenous and non-Indigenous worldviews in Australia, an Indigenous community member may rely more on direct personal experience with potential colleagues as a measure of legitimacy.

Over the course of the project, legitimacy was conferred by/upon team members on the basis of both positional and personal relationships. Prior to their involvement in this project, research team members had had no previous personal or professional experience with all of the other team members. On the other hand, each team member had personal or research experience with at least one other member. Particularly between members from differing worldviews, personal reassurances were important for either reinforcing positive positional perceptions or outweighing negative ones.

The issues of role and/or duty expectations and levels of recognition can also present a challenge when the entire cross-worldview research team comes together for the first time. In terms of role expectations, not only is it possible for expected uncertainties stemming from situational specifics to

come to the fore; indeed, much more fundamental differences pertaining to understandings, presumptions, and expectations about the contribution of individual team members can also arise. Whereas one worldview's context expectations might include active interactive engagement, another might view a more detached or periodic monitoring role as more appropriate. Differing expectations are not limited to interpersonal dynamics, but can also include project timelines and milestones. Similarly, notions of formal recognition or attribution – notions which tend to be more universally agreed upon within, for instance, a western academic setting – can differ dramatically across Indigenous/non-Indigenous contexts. Whereas in one setting, attribution or recognition can be related to manifest contribution, in another it can serve as a sign of recognition or respect regardless of one's input.

The purpose of the research can also be subject to differences in worldview. These can extend beyond the simple question of who the beneficiary of the project is, and can reflect differing emphases on process or outcome (VicHealth Koori Health Research Unit 2000).

Forming the reference committee

The role of reference committees (also known as guidance committees) can vary across project or organisational contexts. The range of possible functions for these committees includes those related to administrative oversight, regulatory or policy compliance, asset protection, risk management, network development, or general advice. Since this project's seat was an academic institution with established financial, procedural and compliance policies in place, functions related to the day-to-day management of the project were not included in the reference committee brief. Instead, its primary functions were to provide (1) general advice on the project's direction; (2) advice on protocols, procedures and processes, particularly in the engagement of culturally and geographically diverse populations; and (3) to champion the project in the committee members' respective areas of disciplinary expertise or geographic regions.

The philosophy behind the selection criteria for reference committee members was consistent with that behind the formation of the research team: membership composition should reflect the populations of the study. Accordingly, the reference committee would purposively consist of Indigenous community members, social work academics and social work practitioners. These members would be selected from each Australian state/territory.

A high degree of diversity certainly presents a number of advantages. The wide range of expertise and geographic origins provides a comprehensive range of perspectives and views, with all stakeholder groups being explicitly represented; geographic factors related to the complexity of Indigenous communities and to local social work practice considerations are provided for; all

voices have the opportunity to be heard; and, what is perhaps just as important, the symbolic breadth of the reference committee can help to alleviate mistrust stemming from motives, processes and uses of outcomes.

Certain disadvantages and challenges should also be noted. The same diversity that helps to ensure a wider range of views and perspectives can also make consensus-forming a more complex, even elusive, goal. This is particularly true when different members represent divergent or competing professional or community perspectives. In a larger reference committee, as in any group, philosophical factions can emerge, and with them the challenge of moderating contentions while at the same time considering the means for addressing issues that have arisen.

Two measures were taken in order to address this challenge. The first was to ensure that the implicit was made explicit. This meant ensuring ongoing transparency on the part of research team representatives in relating the purpose of the research and the expectations of the reference committee members and the acknowledgment of the potential for differences of opinion. All three points were discussed, presented and re-presented at every stage of committee formation and were periodically revisited during subsequent engagement. The second measure was recognising the importance of process through the continual modelling of an open, collaborative process. Whenever questions were raised by any committee members, they were immediately shared with all members of the research team and subsequently with all reference committee members.

Another challenge was the geographic location of reference committee members. Intentionally drawn from across the country, this dispersion meant that face-to-face meetings would be more difficult and would require coordination and travel-related resources – resources which were not readily available in the project's funding. This meant that other forms of communication and interaction would have to be used, ones that could accommodate the distances involved, even at the expense of real time convenience.

To deal with these geographic issues, two measures were incorporated. The first was the creation of a project website. Recognising the cross-worldview importance of process, this website was intended to create a 'virtual' community. Where distance prevented an in-person quorum, the website would provide a means for sharing information, presenting proposals and linking to broader academic and Indigenous community activities. The second measure was a regular research committee newsletter which was distributed via e-mail to all members. This newsletter kept members informed of ongoing developments, presented issues under consideration, piloted various survey instruments and gauged interest in presentations or publication opportunities.

The success of these means for addressing the process and content challenges of such a diverse reference committee could be seen in the finalisation of the means and methods to be used in conducting the research project,

particularly in the methodology used in accessing various professional and community members. The aims reflected a scope and depth sensitive to the historical cross-worldview tensions described above and the inclusion of differing process-versus-outcome dynamics. Recognising that no attempts had been made at the national level to contribute to Indigenous health and well-being through an examination of how the social work profession's understandings and practices comported with the needs and rights of Indigenous families and communities, the following aims were formulated:

- Collaboration with indigenous community representatives and elders regarding social work practice and education issues;
- Collaborations with social work practitioners regarding education needs in the case of Indigenous clients/issues;
- Collaboration with representatives from the Australian Association of Social Workers, the Australian Association of Social Work and Welfare Educators, and the International Federation of Social Workers on Indigenous practice and education issues;
- To provide a review of current social work education content and methods of delivery pertaining to Indigenous issues across the twenty-two schools of social work in Australia;
- To examine and contrast international best practices and trends in contemporary tertiary Indigenous education, particularly drawing upon experiences with the development of Indigenous curricula in the United States (Michigan State University);
- To develop, through an extensive consultative process with the key informants listed above, recommendations on social work education and practice for the Australian Association of Social Workers (AASW) and Australian schools of social work.

It can be noted that the aims of the project emphasise not only outcomes, but also the processes by which those outcomes would be pursued. The shaping of both processes and outcomes would require a complex, multi-method approach in order to ensure an undertaking that was consistent with and responsive to the dynamics of the multiple worldviews presented above.

Shaping and reshaping methodology

Against a backdrop of historical tensions between the groups involved, conceptual incommensurables and a multitude of aims which prescribed processes as well as outcomes and the potential for philosophically competing notions of validity, the challenges involved in shaping the methodology to be used in this comparative project extended beyond such questions as quantitative versus qualitative emphasis and the reliability of the data. They would also include identifying ways of negotiating a terrain of contesting paradigms so that the salient features and nuances of each could be incorporated in

order to ensure conceptual fidelity and interconnected with the others so as to create a larger relevant context.

In pursuit of this robust sensitivity, the use of a mixed methods approach was decided upon. The accurate and comprehensive capturing of the relevant factors from each of the groups being compared – Indigenous community members, social work practitioners and social work educators – would require the use of different, yet inter-relatable, approaches.

In light of the project's first mandate of collaboration amongst and between the researchers and each population, a participatory action research approach was deemed most consistent (Denzin and Giardina 2008). Given the historical silence, the next consideration was the accurate and comprehensive capturing of the understandings and experiences of Indigenous community members. Taking into account cross-worldview conceptual differences and incommensurables, a self-defining constructivist approach was identified as most appropriate. This would allow for the unfettered identification of key concepts and features. Acknowledging the value-based agenda driving the research and the historical power inequities between the study groups, this approach would need to be enveloped in a critical framework (Denzin and Lincoln 2008). This approach certainly offers potential advantages in identifying nuanced meaning across a number of themes, but the question of its operationalisation posed some fundamental challenges. As such, it led to a great deal of discussion among members of the research team.

A number of different means for collecting Indigenous community member information were considered, including written surveys, in-person interviews and focus groups. The primary challenge was combining methods that supported the most encouraging, least intimidating mode of response with ones which would enhance findings that could be generalised. Focus groups were determined to be the preferred means of accessing Indigenous participants. Indigenous research team and reference committee members were instrumental in identifying culturally preferable approaches. Focus groups with only a few key thematic prompts would be conducted in each Australian state/territory. Thematic and discourse analyses would then be conducted within and across focus groups. In this way, generalisability became an emergent consideration.

The use of focus groups incorporated a procedural sensitivity to Indigenous interpersonal and process sensitivities, while the insistence that these groups be identified and facilitated by Indigenous researchers helped to mitigate Indigenous distrust towards mainstream research. With mainstream research issues pertaining to the compatibility of findings from different focus groups in mind, researchers conducted pilot focus groups and attended other focus groups before facilitating their own.

The research team discussions concerning the methods to be used in accessing social work practitioners and social work academics were less fervent than in the case of Indigenous participants – despite the fact that the informa-

tion being gathered was more comprehensive and more complex. A major consideration in shaping the methods to be used was the contextualisation (backgrounding) of cross-worldview considerations of historical, cultural and interpersonal dynamics. Compounded with the fact that both groups shared common educational and professional backgrounds, the use of written surveys containing a combination of quantitative and qualitative questions was decided upon.

In line with the realisation that both groups of participants would have access to and be familiar with internet use, the surveys would be made available online in both downloadable and online completion versions. The quantitative questions would address issues of background education, practice history and social work programme characteristics. Qualitative questions would address issues of practice models used, perceived quality of education, and challenges/rewards encountered in practice.

Even though the survey method and the specific content of the surveys were fairly straightforward from the perspective of the researchers, some challenges, both foreseen and unforeseen, did arise. For instance, it was noted that a tremendous amount of information was being collected in the surveys, particularly those given to social work programme coordinators (a subset of the educator survey). This was the result of the decision to attempt to gather as much relevant information as possible so as to strengthen the potential for more complex analyses. An unfortunate side effect of this was the amount of time needed to complete the surveys. Even when made accessible through a number of media – and coupled with the option of only completing a portion at a time – the overall time needed to complete a survey was generally in excess of 30 to 40 minutes. This turned out to be too much to ask of academics and practitioners occupied with teaching and research responsibilities, and in fact discouraged the completion of the surveys. In response to feedback which pointed this out, some of the specifics of the surveys were collapsed or combined into broader categories. While additional analytical efforts would be needed to tease out the original details, this move resulted in completion time being reduced without compromising the information gathered.

Another challenge was unexpected and, in some ways, more telling. It came from the nature of some of the qualitative questions in the surveys, particularly those which asked respondents to evaluate the effectiveness of their practice, their ability to prepare students for professional practice or the specific practice approaches/theories/models employed in overall and Indigenous contexts. One respondent later described the surveys as 'confronting'. This forced further evaluation of how survey questions were framed.

Each of these aspects of the project required research team members to reconsider the implications of interactive dynamics and historical tensions between the different groups involved for the conceptualisation and execution of comparative research projects of this kind. They also dictated a re-

consideration of intra-research team dynamics and the processes needed to facilitate responsible, appropriate and accountable research.

Conclusion

This project is the first comprehensive effort to document and analyse the interface between social work practice, social work education and Indigenous populations within Australia. It is also the first comprehensive effort to do so using a collaborative methodology that brings together Indigenous communities and social work academics and practitioners, both nationally and internationally, and to build upon the expertise that can emerge when communities, academics and practitioners collaborate to find practice-based strategies.

At times, it has proven to be unexpectedly complex. For one, it extends beyond a mere comparison of Indigenous and non-Indigenous perceptions and agendas. It has involved the simultaneous examination and comparison of the Indigenous/non-Indigenous context in three 'populations'. To this must be added the fact that each of these populations has relationships with the others that involve inherent power inequities and asymmetries. Because of this, a simple comparison of characteristic similarities or differences is not sufficient. This is a clear example of how, in comparative research projects, the approaches and analyses must take into account broader relational contexts and historical trajectories, recognising that the manifest outcomes result from a myriad of complex dynamics.

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Chapter 2

Comparative Research between Description and Speculation: Some Pitfalls of Comparative Research and how to Deal with them

Nino Rode

Introduction

Due to processes of globalisation and liberalisation, conducting international comparative research is not only becoming increasingly popular, but also necessary. Enhanced communication opportunities, increased mobility, the growing influence of international associations and other processes are making it easier to find and use experiences and solutions from other environments to solve local problems (Quilgars *et al.* 2005:3). However, this is not as straightforward as it seems. Solutions from one environment were frequently proven to not be transferable to another without modification, mostly because the problem solved there differed in some subtle way. In short, problems and their solutions are context-dependent. This brings up the need for a more focused comparison of the situations in different environments that evokes the comparative perspective – the awareness that phenomena can't be characterised and conceptualised once and for all, without taking into consideration the contexts in which they are embedded. As such, the comparative perspective has become indispensable in contemporary social sciences as a whole and in social policy and social work in particular.

When one attempts to determine what is meant by 'good' comparative social work and social policy research, presenting examples of 'good practice' is insufficient, since this relies too much on descriptions of instances from existing research. While such descriptions are a necessary part of knowledge building, they only make possible a tentative replication of the methods used and learning from the mistakes made, a costly exercise to say the least.¹ Instead, the methods used must be subjected to reflection and compared with the methods available. This chapter is an attempt to take a step in that direction. It will discuss issues surrounding the making of social scientific knowledge, how com-



¹ Particularly in qualitative research, too many researchers are left to rely on replicating past instances of research, or on applying normative descriptions which aren't necessarily adequate. This situation is sometimes even elevated to the status of an 'art of qualitative research'.

parative research is defined and situated, issues of comparative methodology and some organisational issues pertaining to cross-national research.

Societal phenomena and scientific knowledge making

When discussing comparative methodology, one cannot proceed without a brief recapitulation of the problems of social research. The social world is complex, characterised by path dependence, tipping points, interaction effects, strategic interaction, and two-directional causality or feedback loops. Many different paths lead to the same outcome (equifinality), and many different outcomes may come from the same set of conditions, depending on their context (multifinality) (Bennett and Elman 2006). A further increase in complexity is due to the parallelism of social actions and processes. Actions in society as a whole take place parallel to one and other. They are reactions to interpretations of incomplete understandings of the situations actors are involved in. Most are responses to past situations and don't necessarily make sense in the present situation, either to an observer or to the actor himself/herself when he/she reflects on them. This is either because the actors use their own experiences of past situations to supplement the missing information in the present one, or because the situation has already changed due to the actions of other actors or processes, which elude the actor at that moment.

Reducing this complexity is one of the survival traits of human beings. People don't respond mechanically to immediate stimuli, but interpret them before they respond. The main process that emerges from these interpretations is the production of classes, types and categories of phenomena by prototyping, contemplating and instantiating when acting. Another approach to reducing complexity is verifying and equalising perceptions and meanings through communication. This is how habits are formed and customs and rules are made. To make them easier to grasp, perceptions and conceptions of reality are organised into narratives.

These strategies represent the basis for knowledge making, culture growing and life world building in society.² They also form the basis for scientific knowledge making.³ Science, however, can't stop at pragmatic simplifications



² As metaphors go, 'the social construction of reality' is quite an unfortunate choice for the term, as it implies conscious and rational activity. Most social phenomena and processes, and even most actions, are far from being conscious and rational. However this is not necessarily true of knowledge about them. It has to be constructed precisely because they aren't, in order to reduce their complexity to a humanly manageable level.

³ A distinction has to be made between science as an outcome, a system of knowledge and an institutional structure not unlike institutionalised religion on the one hand, and science as a process of knowledge building and know-how necessary for this task on the other. When we speak of science, the latter notion is meant.

as common sense can. All scientific research has to go through a research cycle consisting of three phases: the initial interpretation, the formal transformation of information and the final interpretation. In the phase of initial interpretation, decisions are made about what matters and what doesn't; what to search for and how information that matters can be collected; and how the concepts and models being studied are to be observed in the information collected.

In the next phase, some formal transformation of the collected information has to take place in order to separate important information from unimportant information and disentangle and thus make visible properties, circumstances, relations and processes, which are interlaced and fused together in the everyday world. It is this phase that distinguishes science from the everyday information processing of human beings.

In the phase of final interpretation, the results are given meaning and are reintegrated into the context of existing knowledge and theory on the one hand, and into the context of the empirical phenomena and their interrelations on the other.

To achieve its goals, science as a process relies on different mechanisms: iterative conceptualisation and the recursive process of knowledge making; peer review of researchers' work and findings, which leads to the formation of Kuhnian paradigms; and the concept of the fallibility of knowledge and the process of the iterative falsifying of hypotheses (preconceptions) about the phenomena being researched. In social sciences, this process is even more complex because the findings of social research are influenced by four hermeneutic circles. Actors in society act according to their interpretations of the situations they participate in, forming a first hermeneutic circle. When acting, they interpret their actions, forming a second hermeneutic circle. The researcher forms a third hermeneutic circle by interpreting the actions of the actors being researched. By being aware of the methods and interpretations used in the research and reflecting on them, he/she forms the fourth hermeneutic circle. Furthermore, all the hermeneutic circles are mutually interdependent; by considering them independently, one would run the risk of distorting the explanation. While the problem could be (and usually is) set aside by simplifying and neglecting one or more of the four hermeneutic circles, it can be solved by working in the opposite direction using Dervin's (2003) quadruple hermeneutics. This approach transcends classical dual hermeneutics, which acknowledges that methodology involves interpretations (hermeneutics #1) and that the study of human beings focuses on the interpretation of interpretations (hermeneutics #2). Dervin's approach focuses on interpretings – processes of researchers-interpreting interpretations (hermeneutics #3) and of human-beings-interpreting interpretations (hermeneutics #4) in search of regularities not in entities themselves, but in the process of their coming into being (*ibid.*)

Comparative research

Comparative methodology⁴ has its roots in case studies. However, it also has the potential to extend them and make a bridge between the case study methodology on one side and methods of statistical comparison on the other. In a case study, a case is a particular configuration of attributes (Ragin 2000: 66) in which the theoretically important attributes are intimately connected to other attributes, which act as a context and modify understanding of the case (Levi-Faur 2003: 53). A case is selected for study because of some privileged status in the general type it represents. It can be a 'typical' case, bearing all the theoretically important characteristics of the represented type, or a 'deviant', 'borderline' case with characteristics of the type barely sufficient for it to be categorised in it. A researcher tries to make explicit as many properties of the case being studied and their inter-relations as possible. Especially in social policy and social work research, it is not only facts and moves that are of interest; a picture of the various actors' understandings, intentions, norms and values and the reasons they had for acting, speaking or writing as they did must also be obtained (Siversind 1999: 363). The research should be conducted in sustained emphatic inquiry, in which empathy constitutes an intentional grasping of the other's meaning. As Yanow (2003) points out, studying the life world of research site members and the artefacts they embed with meaning requires giving them a voice, which results in the decentering of the researcher's expertise. 'Accessing local knowledge of local conditions shifts the researcher's expert role from technical-rational subject matter expertise to process expertise; it is a radically democratic move' (*op. cit.* par. 12). This should be done systematically and with a philosophical rigor – a rigor of logic and argumentation – as opposed to a merely procedural rigor (*op. cit.* par. 10) of experimental design and measurement. One of the drawbacks of case studies is the lack of generalisability and stability of the findings. One solution involves stepping out of the case study framework and proceeding with comparative analysis involving two or more cases.

At the other side of this continuum is quantitative variable-oriented research using statistical methods with great potential for generalisation. However, in multi-site and particularly in cross-national research, the comparability of the data collected in different settings is always debatable. Enormous efforts are put into the standardisation and control of the collection of quantitative data, with an uncertain effect. Statistical methods also need large



⁴ Here we are concentrating on the case-oriented comparative methodology. See Ragin (1987, 2000) for a discussion of the differences between the variable-oriented and case-oriented methods.

numbers of cases in order to achieve stability and accuracy of the results. Comparative methodology can avoid these problems by concentrating on determining types of cases instead of on the quantitative measurement of their traits. As Ragin (1987) points out, one of the most valuable advantages of the case-oriented comparative approach over the statistically variable-oriented one is the fact that it engenders an extensive dialogue between the investigator's ideas and the data (*op. cit.* 49). Each case is examined as a whole, as a total situation resulting from a combination of conditions, and cases are compared to each other as wholes. This makes it possible to address causal complexes – to examine the conjunctures in time and space that produce the important social changes and other phenomena that interest social scientists and their audiences.

The main difference between these approaches lies in their attitude toward the context of the study. In case studies the context is a part of the case itself. In statistics cases are either seen as all existing in and being influenced by the same context or every case is seen as having its own context as a sort of attribute. In comparative analysis cases are comprehended as embedded in a relatively small number of discernible types of contexts.

The comparative method is based on the disciplined comparison of two or more cases, with the aim of revealing the properties of each case by studying similarities and differences between them. Phenomena of interest to social science emerge on different levels of social reality and should be analysed accordingly. It is not only a question of choice, but also of the levels of processes themselves and the links between them, which have to be determined in order to make realistic comparison possible.⁵ The classical division in the social sciences is a micro/macro division, sometimes supplemented with a meso level (Wrede *et al.* 2006: 2987). However, (at least) in social work and social policy more levels need to be distinguished. A division proposed by Denters and Mossberger (2006) can be adapted for this purpose. According to these authors, at least four levels should be distinguished:

- The supra-institutional level, where, for example, jurisdiction, culture, customs and other supra-institutional factors and processes may set the stage for and affect the orientations and behaviours of institutional and other actors. In studies of mental health, for example, this level consists of cultural, social and political norms and values regarding mental health and mental illness in a particular community.



⁵ The issue of comparability has been discussed frequently (see Denters and Mossberger 2006: 564–5). However, this issue can usually be tackled by multilevel research design, since any two entities are comparable on a high enough level of abstraction and, at the same time, incomparable on a low enough level. Research should be designed to find those two levels and cover all the levels in between. Of course this span of levels has to be determined individually for every research undertaking.

- The institutional level, where, for example, different systems and patterns of organisational structure, organisational culture configurations or socio-economic structures affect budgetary and policy decisions or shape the individual political outlooks or behaviour of groups and individuals in the institution. Using the same example, these are mental health institutions and other organisations dealing with mental health problems, as well as their organisational structure and policy.
- The sub-institutional level, where characteristics of different social roles, professional statuses or groups and their actions may be used as explanatory variables. These would be doctors and nurses in mental hospitals and their patients, in contrast with helping and nursing staff in day centres and their users.
- The individual level, where characteristics of the individual users, professionals and carers, such as their attitudes or behaviour, or demographic variables, such as gender, socio-economic status, or age may be used to explain phenomena (*op. cit.* 554–5).

The multilevel approach allows for inferences about the interactions between two, three or more levels of analysis. The term 'levels of analysis' refers to units of analysis in their relation to broader or narrower social contexts (*op. cit.* 554). In this case, higher-level phenomena serve as a context for lower levels, while the latter constitute a basis for the emergence of higher-level phenomena, thus conditioning or at least informing them.

Comparative research can be categorised according to three criteria: level of phenomena studied, target of comparison, and intention of research or type of research question (*op. cit.* 552).

Regarding the target of a comparison, three levels can be distinguished:

1. Making sense of foreign situations (the ethnographic level). This is basically the pre-comparative level in which the existing knowledge and pre-conceptions of the researchers are compared with a new/foreign situation and interpretations of it on the part of the actors involved (a psychiatrist living in a mental health ward as a patient, a psychiatric nurse working in a day centre in a foreign country). This can be done in two ways: (a) by classifying and interpreting the observed phenomena exclusively on the basis of existing knowledge and preconceptions (theory) (the psychiatrist using his/her knowledge to explain the patient). While this is a common way of making sense of everyday situations, it is certainly insufficient for scientific research (the main problem being the power relations that determine the description of phenomena, which can be successfully countered with participative research that gives a voice to the researched, thus turning them into research participants instead of research objects); (b) by supplementing existing knowledge with new perceptions and concepts and reforming (deconstructing/reconstructing) existing preconceptions and their interrelations (explorative stance, creating knowledge and

theory building). This would occur if, for example, the psychiatrist were to use his/her experiences in the role of a patient⁶.

2. Pairwise comparing situations. These can be (a) the descriptive juxtaposition of compared situations by listing their similarities and differences (leaving the audience to draw their own conclusions about the reasons for the observed differences); (b) asymmetrical comparison where one of the situations is privileged before the other and is judged as more developed, more 'natural', more 'right', or 'better' in some other sense (while this is a typical reaction in common sense reasoning, it is many times wrong and ultimately disintegrates into interpreting on the basis of existing knowledge and preconceptions, for example in comparisons of the situation of women in western and Islamic societies); (c) using comparisons to build new concepts and categories.
3. Comparing existing situations with an ideal-type situation (determined in advance, for example human rights activism for the absolute universal equality of all human beings or the universal WHO definition of health) or dynamically and recursively building on a comparison of the existing situations and previous iterations of the ideal-type situation (the post-modern theory of family, for example).

Regarding the intention of the research or the scientific questions answered by comparative research, descriptive, explanatory and pragmatic research can be distinguished.

Descriptive questions ('what?') are aimed at providing knowledge about the characteristics of a particular case. Comparing may improve one's understanding of personal experiences within a broader context and can thus be considered an escape from ethnocentrism. Comparing may also reveal similarities that enable the researcher to describe more general trends, or dissimilarities that enable him/her to describe the conditions of uniqueness of the case.

Explanatory questions ('why?') are aimed at accounting for the occurrence of particular phenomena. Disciplined comparisons can help in developing and testing such theoretical propositions. Here comparison is a form of control that serves as a substitute for the experimental method. The logic of the comparative method is that by comparing units (countries, cities, or any other units) that are most similar in some aspects, the researcher is able to control variables that are similar and isolate other variables as the potential causes of observed differences. Likewise, most comparisons of different units control the variables by which systems differ, thus eliminating them as possible explanations for similar outcomes.



⁶ This was actually the case in Rosenham's experiment (1973), where pseudo patients were admitted to psychiatric hospitals to explain power relations in psychiatric institutions and their influence on psychiatric doctrine.

Pragmatic questions ('what to do?') support learning from the innovations or experience of others by comparison. By observing other cases, researchers can draw practical conclusions about what may or may not be implemented as a desirable policy or action in their particular case. Of course, before ideas and solutions can be adopted from other environments, they have to be evaluated for effect and context dependence, which is done by explanatory questions in comparative research (*op. cit.* 552).

The existing research literature repeatedly emphasises that explanation is superior to description when new theoretical or applicative knowledge is to be created⁷. This is particularly true in comparative research. Description does not create new knowledge. Instead, it exploits the 'obviousness' of existing preconceptions – whether informed by theory, experience, or myth – either to gain legitimacy from their similarity or to use them to show how the case being researched is different and therefore unique. This kind of theory utilisation is necessary in pragmatic use, but it doesn't contribute to theory. To enhance theory, the comparisons made have to be grouped inductively and conceptualised. This is a task performed by comparative analysis.

Probably the most simple way out of description is avoiding the use of 'proper names' for units in theories, as proposed by Przeworski and Teune (1970): 'Whenever identification of particular social systems contributes to explanation, one must ask what it is about these systems that influences the phenomenon to be explained' (*op. cit.* 48). To use a rather obvious example from mental health, when a much lower count of people hospitalised for mental health problems is found in Italy than in other countries, some factor has to be found to account for it. Once a factor that explains this difference is found, the researcher is able to replace the proper names (Italy) with theoretical concepts that are applicable to all systems (Denters and Mossberger 2006: 559–60).

Methods of comparison

The stage for comparative analysis is set by selecting the cases to be compared. Rihoux and Ragin (2004: 2–3) present two strategies for identifying commonalities across a relatively small number of purposefully selected cases. The first is to examine cases sharing a given outcome, for instance low poverty rate, and then to attempt to identify their shared conditions or aspects relevant to an explanation of some important property exhibited; in the case of



⁷ This is important because description dominates qualitative research, so the main concern in qualitative methodology is data collection: problems pertaining to obtaining enough data, the credibility of data, the authenticity of information and other quality issues. Too little attention is paid to the transformation phase in the research process, as it itself is usually context dependent and hard to codify.

a low poverty rate, this could be a highly developed welfare state, tradition of charity, or certain historical advantages. The second is to examine cases sharing a specific combination of causal conditions, for instance countries with a well-developed welfare state and sound charity tradition, and assess whether or not these cases exhibit the same outcome, i.e. a low poverty rate. Both strategies are set-theoretic by nature, as they examine whether instances of a specific outcome constitute a subset of instances of one or more causes (first strategy) or whether instances of a specific causal condition or combination of causal conditions constitute a subset of instances of an outcome (second strategy). Neither strategy necessarily depends on perfect set-theoretic relations. Fuzziness can be introduced by regarding the attributes as being more or less present instead of using a simple present/absent dichotomy.

The five canons of inductive inference postulated by John Stuart Mill in the middle of the nineteenth century remain a basic tool of comparative analysis (Mill 1973). Direct method of agreement states that the one and only condition common to all the instances of a phenomenon is a sufficient condition for them. If one found that poor people, while different in terms of other traits, only had a low level of education in common, then he/she could conclude that low education is the reason for their poverty.

Method of difference postulates that if an instance of occurrence of the studied phenomenon and an instance of its non-occurrence differ in one and only one circumstance, then this condition is necessary for the occurrence of the phenomenon. So if one found that people with mental health problems included in a day centre have a lower hospitalisation rate than comparable people who are not included, he/she would conclude that inclusion in day centres reduces the hospitalisation rate of people with mental health problems.

Joint method of agreement and difference (indirect difference) combines the previous two methods into one, thus allowing induction when multiple circumstances are common to the instances of the studied phenomenon and multiple differences can be observed between the instances of occurrence of the studied phenomenon and the instances of its non-occurrence, as long as only one circumstance is both present in all the instances of occurrence of the phenomenon and absent in all the instances of its non-occurrence.

Method of residues states that when the explained parts of the phenomenon being studied are removed along with the circumstances that explain them, the remaining part of the phenomenon is connected to the remaining circumstances. Once the economic factors and peculiarities of their culture have been eliminated, the employment rate among Roma is still lower than among other groups; this residual difference can be attributed to historical processes of exclusion.

Method of concomitant variations states that if some phenomenon varies whenever some other phenomenon varies there is some kind of causal connection between them. For instance, people with additional education

enhance their chances of overcoming poverty. It is therefore possible to conclude that a better education is a way out of poverty.

However basic these five methods may seem, they are essential in any comparison. When applied in isolation, these methods are admittedly not very strong⁸. But when applied consecutively and combined with backtracking in the case of inferential dead ends, they provide a sufficiently strong inferential framework to enable a researcher to at least obtain credible conclusions.

Another question is that of context and its use as a basis for the selection of cases to be compared. Przeworski and Teune (1970) propose two designs or strategies of comparison for selecting cases to be compared: most similar system design and most different system design. In the first, cases that are as similar as possible are selected for comparison in the hope of controlling circumstances that are not of primary interest to the research and in this way reducing the number of differences competing as explanations for the studied phenomenon. In an evaluation of substitution maintenance treatment (SMT) in Slovenia (Trautmann *et al.* 2007), the organisation of SMT in Slovenia was compared with that of the Czech Republic, Lithuania, Germany and the Netherlands, 'all of which – like Slovenia – have a (relatively) long tradition and broad geographical coverage of SMT' (*op. cit.* 85). SMT in these countries was regarded as a similar system.

In the latter, different cases are compared in order to determine which circumstances, properties or relations remain the same, thus establishing their generality. This can be done very radically, with systems that have virtually nothing in common. For instance, the observation can be made that in cultures where people with mental health problems are considered sacred as well as in modern societies, where they are considered ill, they are prevented from participating in everyday affairs. This can also be done with more comparable settings. One can, for example, observe that mental health systems with very different organisational structures, such as those in the UK and Germany, are nevertheless dominated by the medical model of mental illness.

Levi-Faur (2003: 59) suggests combining these methods to get four strategies of case selection and inference in comparative studies. (i) Most similar system design combined with Mill's method of difference: variance of the control variables is minimised and variance in the dependent variables is maximised in the hope of *identifying* the few variables that may account for the difference in outcome. (ii) Most similar system design combined with Mill's method of agreement: variance of the control and in the dependent variables



⁸ For one, as Sekhon has pointed out (2003: 281), they presume that full information is available on the studied phenomena. This means no measurement or sampling error is present and that the relations between phenomena and their conditions are deterministic.

is minimised in the hope of *eliminating* the variables that are less likely to exert a causal effect on the similar outcome since they appear in one of the cases but not in the other. (iii) Most different system design combined with Mill's method of difference: variance is maximised in both the dependent and control variables in order to *eliminate* the variables that are less likely to exercise a causal effect on the different outcomes since they appear in both cases. (iv) Most different system design combined with Mill's method of agreement: variance is maximised in the control variables and minimised in the dependent variables, which allows for the *elimination* of a set of variables that differ across cases and are thus not likely to have a causal effect on the outcome of interest. Each of the four strategies is only a small step forward, but together they make it possible to progress in a more significant way (*op. cit.* 60).

Comparative analysis is an iterative procedure. Instead of a classical sequence of data collection-data analysis-interpretation, comparative research should proceed in cycles, where comparison and interpretation are interchangeable and conducted parallel to case selection and refinement or additional data collection when needed. The issue is not the description of the cases, but establishing relations between the phenomena, conditions and processes represented by the cases. To do this, Levi-Faur proposes a two-step heuristics for comparative analysis (*op. cit.* 62–4). The first step rests on comparative analysis where case selection is grounded in the most similar system design and either Mill's method of agreement or Mill's method of difference. The research goal in this stage is to apply in-depth analysis of the primary cases and to advance internal validity. It rests on the in-depth analysis of primary cases to generate theory and establish internal validity.

In the second step of the analysis, the focus moves from issues of internal validity to issues of external validity or generalisability across diverse sets of cases. The study now involves an analysis of secondary and tertiary cases. The focus is on the robustness of the previously established relations across cases that differ in kind. Comparative analysis in this step rests on most different system design, combined with either Mill's method of agreement or Mill's method of difference or both. In the case of the former, the inquiry is focused on the 'suspect' aspects that can explain the similarity in outcome, re-examining them to enhance external validity. In the case of the latter, the examination focuses on testing the validity of the relations found in the first stage against the new cases added to the analysis.

The iterative nature of comparative analysis and its focus on theory building is acknowledged to the extreme in Glaser's constant comparative method (Glaser and Strauss 1967). The constant comparative method is concerned with generating and plausibly suggesting hypotheses about general problems. Some of these properties may be causes, while others are conditions, consequences, dimensions, types, processes, etc. It progresses in four stages: (1) comparing incidents applicable to each category; (2) integrating categories

and their properties; (3) delimiting the theory; and (4) writing the theory. The process of generating theory is a continuously growing (in time, each stage is transformed into the next) and parallel (earlier stages remain in operation simultaneously with later ones until the analysis is terminated) process. No attempt is made by the constant comparative method to ascertain either the universality or proof of suggested causes or other properties. Constant comparative method requires only the saturation of data, and not the consideration of all available data or a restriction to one kind of clearly defined case (*op. cit.* 104). While it is by no means the one and only solution, any comparative analysis can benefit by adopting the notions of constancy of comparison and parallelism of stages of analysis proposed by Glaser.

Besides the iterative procedure, comparative analysis can improve its power through the formalisation of the comparison. This can be done by qualitative comparative analysis (QCA) (Ragin 1987) and its successor, fuzzy set qualitative comparative analysis (fsQCA) (Ragin 2000). These are set-theoretic methods applied to cross-case evidence. As Rihoux and Ragin (2004) stress, they mimic some of the basic analytic procedures that comparative researchers use when making sense of their cases and enable researchers to extend their examination to more than a handful of cases (*op. cit.* 2). They stress that there is no procedural limit to the number of cases that can be studied using QCA, but that this limit is set by the researcher's degree of interest in maintaining familiarity with each case and his/her ability to handle the number of conditions considered (which rapidly increases the number of possible combinations). QCA is based on procedures of truth table reduction and the determination of the coverage of the outcomes by the combinations of the conditions.

Through fsQCA, QCA is extended to include fuzzy set relations, where the partial membership of some phenomenon in a category is allowed. This helps to accommodate situations where a simple dichotomous yes/no classification would be insufficient. This is often the case in the social sciences, and many examples immediately come to mind. An obvious one is the simple question of determining the point at which a person can be considered rich or poor. There is no exact marker of affluence or poverty, as the recurring problem of determining the poverty line illustrates. On the other hand, it is not possible to deny that there are rich and poor people. The solution is partial, or fuzzy, membership in a category, in this case rich or poor. In contrast to the crisp sets used in QCA, which only allow membership of an element to be full or none (rich or not rich, poor or not poor), in fuzzy sets, membership in a set can assume intermediate values indicating partial membership.

These set-theoretic methods are useful in establishing the necessary or sufficient conditions of a certain outcome. However, Rihoux and Ragin (2004) point out that their use does not necessarily entail the use of the concepts of causation. They can be used to simply demonstrate explicit connections,

whether or not there is an interest in necessary or sufficient causation. According to Rihoux and Ragin (2004), establishing explicit connections is a central concern of qualitative analysis in the social sciences (*op. cit.* 4). Ragin (2008: 190–208) used them to reanalyse the National Longitudinal Survey on Youth conducted in the United States to refute the Herrnstein and Murray's conjecture that, in modern society, 'intelligence' has become the most important factor shaping life chances due to a change in work, which now demands high cognitive abilities. Ragin shows that, at least in the case of black males⁹, there are three basic 'recipes' for avoiding poverty: (a) being married without children; (b) having parents with high income and not having a low intelligence score; and (c) having completed college and not having a low intelligence score¹⁰ (*op. cit.* 201). It seems that, in combination with other conditions, it is low intelligence that hampers one's life chances, not high intelligence that enhances them.

Challenges of cross-national comparative research

Apart from methodological issues, the process of cross-national comparative research, which is usually multidisciplinary as well as multi-method, poses some significant organisational challenges to the research team. Three issues worth mentioning in this context are differences in culture, research control, and relations within the team.

One of the most visible issues in cross-national research is the problem of language. Apart from communication itself, a major linguistic issue pertains to translating key concepts and research tools.¹¹ Developing research tools raises issues pertaining to key concepts, interviewing etiquette, and ultimately the nature of the interviewing process (Quilgars *et al.* 2005:6). Terms used in research may have different meanings and connotations in different languages. Even relatively straightforward terms like 'work' or 'freedom' are open to different interpretations across nations, not to mention concepts that appear in social policy, welfare and social work. In spite of this, the research tools are usually produced and discussed in one language (usually English) and then translated by each national research team into their own language. Rarely is this process checked for quality, although simply translating the tools back



⁹ To produce a simple illustration, the analysis was limited to data on black males.

¹⁰ This is the most parsimonious combination of conditions; further analysis showed that education is an important contributing factor.

¹¹ Quilgars *et al.* (2005: 6) reported that in their project all team members, except the ones from UK, were bi-lingual in their own language and English. Furthermore, all materials were first produced and agreed upon in English and then translated by each research team into their language.

would suffice for this. Instead, the 'expertise of the researchers' is assumed (*op. cit.* 6). Of course, choosing one language as the language of communication is a pragmatic necessity. However, this puts the native speakers of the chosen language in an advantageous position. More importantly, it reduces the sensitivity of the research to idiosyncrasies of linguistic representation in research situations in different countries.

Apart from language, societal norms and values also influence cross-national research. Regarding interviewing, Quilgars *et al.* have reported dilemmas within the team concerning the proper extent of discussions on respondents' financial matters, ethnicity and religious background stemming from differing attitudes about the private nature of these topics in different countries (*op. cit.* 6). In their experience, even modes of data collection are subject to societal differences. The use of questionnaires within institutional settings may be perceived differently in different countries and perhaps even in different kinds of institutions. In some settings, they are accepted as an opportunity to express one's views and/or demonstrate knowledge, while in others they may be seen as an additional bureaucratic complication, or even as a tool of control used by superiors. Therefore the key concepts of interest have to be a topic of constant reflection, discussion and operationalising. They have to be checked constantly in terms of how they are passed between the cultures and languages involved in order to avoid overstretching them and consequently losing their original meaning.

Cross-country differences perceived as 'cultural differences' demand particular caution, because members of a research team assume a dual role when dealing with them. First, they are supposed to assume the role of representatives of their 'native culture', and as such are obliged to locate and communicate all the discrepancies between the intentions of the research and the effects of their implementation due to cultural factors (norms, customs, everyday presuppositions, culturally prescribed meanings). However, being members of an international research team, they also assume the role of members of an emerging international research culture, and may therefore become blind to certain peculiarities of their local culture and fail to fulfil their obligation to represent it and correct possible errors and biases stemming from cultural differences.

Due to inherent issues of comparability and its multilevel character, cross-national comparative research presents quite a complex problem. Therefore a call for better planning and consequent control of the research is often sounded. This mainly concerns the selection of cases for comparison and data collection. However, the very complexity of the situations that emerge in this kind of research renders any attempts at planning and prescribing ineffective. For instance, it is common knowledge that the criteria for determining a sampling frame have to be independent of the differences between countries. Nevertheless, Quilgars *et al.* describe the situation in Hungary, where:

...following the process of privatization an extremely high proportion of new owners live mortgage free but have low incomes and high utility arrears, making them in effect marginal home-owners. In addition, the mortgage market has only recently developed and households who are able to meet the criteria of the lenders normally are all but marginal home owners (although this too is the case in some other countries on entry into home ownership). (Op. cit. 9)

Contrary to expectations, a mortgage is a sign of desirable status in Hungary, and freedom from a mortgage is a sign of marginality. Determining such anomalies in advance is impossible.

The same can be said about the focus and objectives of research. It is inevitable that particular research objectives will be more relevant in some countries than in others. Even if the same key social processes are affecting the processes in different countries, they can differ in terms of timing and/or importance (*op. cit.* 5). However, in most research projects the objectives tend to be established at the beginning of the project and shaped through day-to-day necessities and negotiations, thus allowing different power structures to influence them beyond the research needs or the researchers' will. Neglecting this dynamic can distort the findings and diminish the will to use them in practice. These processes cannot be controlled in experiment-like fashion. They have to be dealt with in an iterative way by constant negotiation and reflection throughout the project.

Another characteristic of cross-national research teams that is not frequently mentioned is the different professional academic cultures of the research participants, each with its own pet theories, concepts, methodological preferences, research ethics, writing styles and publication strategies (Livingstone 2003: 481–2). These differences have to be taken into account and resolved within the cross-national research in order to make it sound. Superficial compromises and a disregard for these differences can lead to the 'lowest common denominator': the least sophisticated basis of the research that can be supported by all of the participants. This also blurs differences which could yield interesting insights into the phenomena being studied.

The issues described are never fully evident at the beginning of the research. They have to be checked and reflected upon constantly during the research. In short, the research process itself has to be placed under scrutiny *in situ*, while being conducted. In order to achieve this, research has to be iterative, collaborative and decentred, as termed by Wrede *et al.* (2006). All too often, the problems presented are neglected or avoided by limiting international collaborations to an exchange of insights and the compilation of results from individual projects that were executed separately. These projects may be prone to ethnocentrism, which hinders ethically sound and methodologically rigorous comparative work. In order to avoid this, lengthy intellectual exchanges before starting the project and resources conducive to team

interaction, including emotional investment and individual collaborative skills, are required (*op. cit.* 2987). As Livingstone noted, this is an intrinsic process of cross-national collaboration:

Researchers must reveal their difficulties with writing (including the crucial question of working in a foreign language and the inequalities introduced by the common resort to English as the *lingua franca*), they face inequities in funding, institutional support or ease of data collection, and they experience anxieties over the issues of data ownership and intellectual property that arise in collaboration. (Livingstone 2003: 482)

These effects should be addressed in order to help build the research team, support reflective research and enhance possibilities for establishing a comparative perspective within it. Last but not least, comparative research teams can benefit from respecting Habermas' five key processual requirements of discourse ethics in their work: (1) no party affected by what is being discussed should be excluded from the discourse (the requirement of generality); (2) all participants should have the equal possibility to present and criticise validity claims in the process of discourse (autonomy and equality); (3) participants must be willing and able to empathise with each other's validity claims (assuming the roles of ideal discussants); (4) existing power differences between participants must be neutralised so that these differences have no effect on the creation of consensus (power neutralisation); and (5) participants must openly explain their goals and intentions and in this connection desist from strategic action (transparency) (Habermas 1994: 31, see also Flyvbjerg 2000: 3). As Flyvbjerg (2000) has warned, this may take more time than usual procedures (*ibid.*); however, if adhered to, all the requirements for inclusive and equitable research are fulfilled. Research should also primarily focus on the processes shaping and making social phenomena rather than on their outcomes (Wrede *et al.* 2006: 2994). By doing so, researchers will be able to keep an open mind about conjunctive causation and path dependence in their comparisons, and consequently engage fully in the comparative perspective.

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Chapter 3

Women, Globalisation and Empowering Practice

Lena Dominelli

Introduction

The women's movement of the 1960s put gender relations on the map by insisting that women be treated as equal to men and that public spaces traditionally reserved for men be opened to them. Black activists in the West, especially in the United States, demanded equal rights for their fellow citizens and an end to racist social relations. After five decades of feminist and anti-racist social action, how are women and black men and women faring in a globalised world, and how can social work practitioners enhance their well-being?

In this chapter, I examine the gains made through feminist and black activist endeavours in social work practice in the context of globalisation, a system of organising social relations that has been gaining ascendancy in its neo-liberal form since the 1980s. I argue that the gains made by feminists and black activists are fragile, and that ensuring their sustainability in the long run is contingent upon changing the neo-liberal orientation of existing social relations.

Globalisation produces winners and losers

Globalisation, and particularly its neo-liberal form, emphasises individualism and self-sufficiency (Dominelli 2009). Monetarists like Milton Friedman sold it to ruling elites on the grounds that it was an economic system that would produce wealth that would cascade downwards to benefit all peoples in what was termed the 'trickle down' effect (Rayack 1987). As such, it was said to work to everyone's advantage. In contrast, I define globalisation as the insertion of capitalist social relations in the interstices of everyday life practices. This includes the commodification of social work relationships and finding ways of making a profit from meeting the needs of those requiring personal social services. I argue that as capitalist social relations become embedded in the social, political and economic relations of countries all over the world, globalisation is coming to imply more than the integration of national economies (Dominelli 2004). Neo-liberal globalisation formed the crux of George W. Bush's 'new world order'. Below, I will argue that this order has privileged the few at the expense of the many.

This claim is supported by the fact that globalisation produces winners and losers. The winners are a handful of rich people, namely the 946 individuals who, in 2007, held US\$ 3.5 trillion between them. They form an unaccountable elite that owns and controls the world's largest corporations; these corporations shape the social policies that are followed by internationalised nation states, each of which is keen to attract these firms to its shores in the hopes of acquiring jobs and investment opportunities. These billionaires follow neo-liberal ideologies, according to which the market is king (women are largely excluded from top positions). Neo-liberal ideologies and their adherents:

- Shape social policies within nation states;
- Distort development to make money (for themselves); and
- Assuage their guilt through philanthropy when they 'retire' from the moneymaking business, which carries on without them.

Of these 946 individuals, in 2006, only 63 were women, 58 percent of whom were from the US (Kroll and Fass 2007). The richest woman, the owner of L'Oréal, had US\$ 20.7 billion, roughly one-third as much as the richest man. In 2008, 58 percent of all women billionaires were American; most are white. The richest black or African American woman was Oprah Winfrey, with just over one billion dollars. Women from China and Russia are catching up rapidly. The richest Chinese woman in 2007 was worth US\$ 17.6 billion (Kroll and Fass 2008). In 2008, Warren Buffet replaced Bill Gates as the richest man on earth with US\$ 62 billion; Gates slipped to 3rd place with US\$ 58 billion; Carlos Slim Helu came in 2nd with US\$ 60 billion. The losers, on the other hand, are far too numerous to name – the majority of poor people, 2.8 billion of whom live on less than US\$ 2.00 a day. Another loser is the planet, as environmental degradation proceeds unchecked while profits accumulate (Ungar 2002).

Polarisation and differentiation in wealth

Wealth ownership has become increasingly polarised both within countries and between them. The top 20 percent of the world's population has accumulated 86 percent of the wealth in the last 30 years, while the lowest 20 percent controls only 1.3 percent. Additionally, differentials between countries in the Global North and Global South rose from 2 to 1 in the 18th century to 70 to 1 by 2002 (George 2003: 18–19). By 2005, this ratio had reached more than 100 to 1. This inequality is also evidenced by the fact that the 3 richest people have more than the total gross domestic product of the 48 poorest countries in the world. Class differentials have also been exacerbated: today, an employee at the top rung of the corporate ladder in the West earns 200 to 300 times more than the average employee, compared to 40 to 60 times more during the 1960s and 1970s (*op. cit.* 19).

Women and children fare the worst

Poverty is a form of institutional violence. It is also unnecessary. Social Watch argues that we could eradicate poverty if governments wished to commit resources to doing so. As it is, income inequalities in a globalising world are on the rise, and they intersect across gender, 'race', class, ability and age divides. Poor women are at the bottom of these hierarchies and make up most of the 1.6 billion people who are worse off under globalisation (particularly its neo-liberal form) than under past economic systems.

Women are at bottom of the income hierarchy wherever we start. In the West, women are increasingly being drawn into occupations once seen as the preserve of men. However, wage differentials still discriminate against women, even among professionals: in Sweden, for example, women earn 80 percent of what men earn; in the UK, only 6 percent of university professors are women, and women earn 14 percent less than men (EOC 2007). Even women who become prime ministers can never avoid unequal treatment due to sexist gendered norms. In an article written after Helen Clark lost the election for a third term as Prime Minister of New Zealand, Louise Chunn (2008) reported that:

...the election result [is due] to ingrained sexism. It was the men who just couldn't cope with the idea of being led by an intelligent, idealistic, free-spirited woman; the gutless, witless, passionless creatures of the barbecue pit and the sports bar (and the feckless females who put up with them) who voted Helen Clark out of office. (*Op. cit.* 42)

This white, woman Prime Minister was replaced by a white man, a millionaire merchant banker named John Key. In the US, a number of supporters of Hillary Clinton blamed sexist attitudes for her failure to win the Democratic nomination for President. When I asked an American academic why Barack Obama did not choose a black woman as his running mate, I was quickly told that the American public would not bear a black man as President and a black woman as Vice President. This shows how complex 'race' and gender politics are in practice. In the Global South, women are more likely to do the agricultural work, but much less likely to own the land: in Cameroon, for example, women do 75 percent of the agricultural work, but own only 10 percent of the land. On the other hand, in some African countries, such as Mozambique, women are well represented in the political power structures. Similar high levels of representation among the political elite in parliament are also evident in the Nordic countries, but not in the majority of western nations. In all countries, poor, working class people are the least represented group in political structures. Social workers and community workers could mobilise people to participate more fully in political processes, both locally and nationally.

On the health front, each year around half a million women die of preventable diseases while giving birth. Women and children are disproportionately affected by the HIV/AIDS pandemic in Africa. Many children are now looking after sick parents, often at the expense of their own health and personal development and education. About 50 percent of the world's population does not have access to basic sanitation facilities. Women and children, who do the cooking and care for others, including children and sick relatives, are disproportionately affected by this lack. Furthermore, around 600 million women throughout the world are unable to read or write. Environmental degradation and global warming also actively affect women by increasing the burden of work in agriculture, making it more difficult for them to feed their families, and forcing them to deal with the effects of natural disasters. Social workers, particularly those doing community work, have been involved in various poverty alleviation and health care initiatives aimed at reducing the burdens caused by a lack of access to health services and income. However, to achieve their objective of spreading wealth more equitably on a global basis, social workers have to argue for changes in the so-called new world order, which rests on a form of globalisation that produces winners and losers. They have to work with others to ensure that it is restructured to enhance the well-being of all, not just of the privileged few.

Race and gender are crucial in differentially experiencing poverty

The UK, one of the richest countries in the world, has significant numbers of people living in poverty. New Labour is committed to eradicating child poverty. The original deadline for this task, 2015, has now been extended to 2020; in either case, one in four children in the UK continues to live in a poor household. Poor health, obesity and malnutrition among children are also linked to poverty. Also, the introduction of user fees has meant that many women and men with low incomes have to do without needed medicine, health services or dental treatment.

The figures described above indicate that in a globalising world, capitalist social relations cause poverty to wear a black face that is differentiated according to ethnicity, class, gender, age and geographic location. Women, children and old people bear a disproportionate burden in conflicts over the distribution of wealth and the world's resources and the accompanying forms of social exclusion. Women are more likely to be assaulted by men. Most of their assailants will be men they know who assault them in their own home, and not strangers on the street. In the UK, two women a week are murdered by their partners. This picture resonates elsewhere. Furthermore, poor women are more likely to experience organised violence, particularly in the form of trafficking for the purposes of sexual and/or other exploitation. At the relational interface, most of these movements involve poor women being exploited by rich men.

Elder abuse can also be found throughout the world, with older women particularly vulnerable. For example, in Mozambique and Tanzania, older women can become objects of abuse if they are accused of being witches or practising witchcraft. They are often blamed for causing financial and health problems. At the same time, the contributions that grandmothers and some grandfathers are making in looking after their grandchildren are significant. In Tanzania, 64 percent of children orphaned by HIV/AIDS are cared for by their grandparents (Neville 2008: 10). Addressing the issues of low income and being valued regardless of age or status could result in substantial strides being made towards protecting older women's physical welfare. For instance, providing pensions that can be easily accessed by all older people could assist them in maintaining an independent position and being less reliant on care provided by family members, who may be struggling with their own difficulties. The issue of an adequate income in old age is relevant for older women in the West and elsewhere. Social workers can advocate against both child and elder abuse; they can lobby for pensions and guaranteed incomes for all people, regardless of age, and look for practical ways of making this a reality by mobilising both people and resources to ensure that political choices about how a nation's funds are spent will endorse human well-being for those who are poor and marginalized.

The prioritisation of improving the health and education of women and children in the United Nation Millennium Development Goals (MDGs) will not change this picture. In 2000, 189 countries signed this agreement, which covers poverty, health and education, with targets to be reached by 2015 for each Goal. With the exception of children's access to primary education, it is unlikely that these goals will be met (Correll 2008). Women were specifically selected because they were deemed to have the greatest impact on society. As one worker noted, 'by educating [women], you prepare a strong army to stop poverty, health problems, prevent infection and prepare food hygienically. If you educate girls, they will support other girls. It's a big, big change' (George 2008: 2).

Yet, more girl children than boy children remain uneducated and illiterate. And many girls and women who do pursue an education or seek paid employment are attacked and often savagely beaten for contravening patriarchal norms demanding that they remain within the confines of their homes and under male control (Ross 2008, see also Chassay 2008). The MDGs also ignore the violence that occurs within families, despite the fact that assaults against women exact a terrible toll in terms of their capacity to develop their talents to the full in a violence-free environment in the one place that they should feel safe, i.e. their homes.

Women's health is particularly vulnerable to vicissitudes in funding and political ideologies. In Africa, for instance, around 5 million unsafe abortions are conducted each year, resulting in the death of around 34,000 women. These are mainly women who are too poor to access expensive medical interventions

or who do not know what legal options are open to them (Holden 2008: 7). Western powers also play politics with women's lives. For example, in 2001, George W. Bush, as President of the United States, prohibited the allocation of funds to family planning groups that offer abortions or provide information and/or counselling about abortion. This policy is known as the 'global gag rule'. In late 2008, USAid stopped supplying contraceptives to Ghana, thereby endangering women's reproductive health (*op. cit.* 7).

Poor men are also adversely affected by poverty and globalisation. Employment opportunities for men in the Global South and the Global North are both limited and shaped by poverty. In the Global South, boys constitute the majority of child soldiers that are drafted into conflicts they should know nothing about. Adult men are the key decision-makers and the prime bearers of the arms that keep these conflicts going. In the West, excluded black and white working class men are disproportionately involved in (violent) crime, often in response to exclusion, and are over-represented in prison statistics. Women, children and older people also bear a disproportionate burden in these conflicts and forms of social exclusion. Social workers can become involved in reducing these hazards by promoting peaceful ways of resolving conflicts, and by encouraging the development of more nurturing forms of masculinity so that men can receive affirmation and gain self-esteem by relating to other people without aggression.

Social workers can both reproduce and challenge sexist and racist social relations in practice

The majority of those who require social workers' assistance are poor, so globalisation affects the practice of social work directly. In the UK, around 80 percent of service users are poor, a figure that has been consistent for the past forty years. This poverty is differentiated according to gender and 'race', alongside other divisions such as class. Black working class women claimants are therefore among the poorest people that practitioners encounter. Poverty shapes the lives of poor people and the services that they can access. It also determines the opportunities that they have to escape from its clutches, and constitutes one of the most important contexts that social workers encounter in their work. Poverty is a form of structural inequality, which means that individuals are limited in terms of what they can do to reduce its impact upon their lives. However, practitioners have failed to understand the structural nature of poverty and, as a result, they continue to see poverty as an individual failing or pathology which the individual living in poor conditions is expected to rectify. This is particularly evident in the case of those who use psychosocial methods of intervention in response to need, where the prime focus is the individual person and what he/she can or cannot do.

The Charity Organisation Society (COS) endorsed this individualising and victim-blaming approach to practice over 100 years ago. As a result, British

social workers seldom engage in campaigns or lobbying aimed at eradicating poverty at the structural level except as individuals who become involved in such activities in their spare time. The split between those who see poverty as an inadequacy of individual behaviour and those who see it as a structural failing persists today in the division between caseworkers and community workers, with the latter emphasising the significance of social action and policy changes in eradicating poverty.

The failure of social workers to make the connection between structural inequalities and practice has resulted in their ignoring the significance of social divisions such as class, 'race' and gender and consequently producing inequalities in and through practice. The role that class played in British social services was exposed in the 1960s, when social work practitioners and academics revealed that most service users were working class, while most professionals were middle-class. Magazines like *CASE CON* and scholarly works, for example Corrigan and Leonard (1978), emphasised this reality.

The issue of gender was considered irrelevant at the time because social work was staffed primarily by women, although Elisabeth Wilson (1977) highlighted how women were being used to control other women. This general lack of awareness meant that social workers overlooked the importance of the structure of a labour hierarchy that placed men as managers in charge of women, while women staffed the frontlines of practice. Even today in the UK, only one in five managers is a woman. The absence of women managers came to the fore when care services became large bureaucratic enterprises with substantial resources following the Seebohm-inspired reorganisation. Implemented in the 1970s, this reorganisation introduced modern bureaucratic services to the UK by bringing together hitherto disparate small-scale, client group-specific services under one roof (called the 'social services department') in each local authority (Seebohm 1968). This meant that one agency was now responsible for the provision of services to all client groups (now referred to as service user groups). The large departmental empires thus created became bureaucratic empires managed by men. Previously, the managers of the smaller agencies had been mainly women (Coyle and Skinner 1988). The social services departments were broken up in 2004, following recommendations from the Laming Enquiry into the death of Victoria Climbié (Laming 2003) for the formation of services for children and families (dealing primarily with children) and services for adults (dealing primarily with older people).

Issues of 'race' and racism continue to make an impact on the profession; despite three decades of anti-racist social work, only a handful of black men or women have made it to the top of the social work profession, including British social work education.

Women, black activists and disabled people also played a key role in shifting the focus of social work interventions away from expert professionals telling service users what to do and towards service user-controlled, empowered

engagement in deciding what services are relevant for meeting the needs of a specific service user in a particular situation. Additionally, they developed a number of their own services to address various issues including domestic violence, sexual abuse and mental ill health. These services developed by the new social movements were designed, controlled and delivered by the service users themselves. As a result, they put the following changes in practice on the social work agenda:

- Shifting the balance of power away from professionals, especially those in health, social services and education, and towards service users;
- Service user-controlled and directed services;
- Empowering forms of practice in place of oppressive ones;

Their demands led to the development of anti-oppressive practice, particularly in dealing with gender, 'race', age and disabling inequalities (Dominelli 2002a, b). Over time, these were incorporated into equalities legislation covering all these social divisions and served to mainstream many of the forms of practice that had begun in the voluntary sector under the auspices of the 'new' social movements. Although class inequalities had been addressed by the labour movement, the implications of these demands for social work practice were frequently ignored. Their impact was more the result of caucus groups being formed within the labour movement, especially the trade union movement to look after the interests of women and black people (men and women). Their activities focused primarily on workplace relations: equal pay for equal work (still not a reality for British women more than three decades after the Sex Discrimination Act of 1973); equal opportunities for training and promotion; the right to reproductive rights; and an end to sexual and racial harassment in the workplace.

Action occurred on the local, national and international level. For example, in the 1970s, women in the Global South organised to begin using the United Nations (UN) to demand equality in waged work and recognition for their domestic labour and the right to violence-free environments in their homes and workplaces on a global or international basis. This resulted in a number of international conferences and declarations of women's rights, including the Beijing Platform for Action, which came out of the Fourth World Conference on Women that was held in Beijing in 1995. The Platform articulated a series of demands that promoted the notion that 'women's rights were human rights' in order to encourage men to view gender inequalities that discriminated against women as something that concerns them as well. The Convention on the Elimination of Discrimination Against Women (CEDAW) has been developed to monitor the progress of the Beijing Platform for Action, and holds governments accountable for acting (or failing to act) on this front. The emphasis placed on women living in the Global South in the Millennium Development Goals, especially in the areas of health and education, is another response to this activism on the part of women across the planet. Sadly, it seems that even

the modest targets of the MDGs are unlikely to be met for either women or children, including disabled women and children.

Conclusion: What can social workers do?

Affirming human well-being has been a concern of the profession since its inception. However, it has been mired in debates about whether the target of change should be individuals, structural relationships or a combination of both. In this chapter, I have argued that social workers need to engage in transformative endeavours that seek to alter existing social relations, while at the same time facilitating changes in individual behaviour. To enhance women's well-being and target women as the subjects of change initiatives that work in their interests, social workers require skills and knowledge for:

- Delivering a nuanced gender analysis that does not treat women as a homogeneous group, but as diverse groups, each with different needs;
- Supporting women in expressing their voices and finding their own solutions to their problems;
- Targeting men as subjects of change and working with them to promote nurturing and life-sustaining forms of masculinity;
- Promoting socially responsible forms of economic development;
- Promoting ecological justice, as environmental degradation poses the greatest threat to the lives of poor women and children;
- Forming alliances with the 'new' social movements at the local, national and international levels.

In working towards the realisation of their objectives, social workers can use Article 23 of the Universal Declaration of Human Rights (UDHR) to enhance their arguments for poverty eradication strategies. It asserts that:

Everyone has the right to a standard of living adequate for...health and well-being...including food, clothing, housing and medical care and necessary social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood.
(George 2003: 17)

Its provisions are a powerful tool for practitioners who advocate for women and children and strive to uphold their entitlement to the share of resources required to enhance their well-being. In doing this, they will contribute to ending one of the most enduring forms of inequality that the world has known – gender inequalities. At the same time, practitioners will be addressing other social divisions that have a deleterious impact upon women's lives, including age, class, ethnicity, 'race', ability, sexual orientation and mental ill health.

Social workers can analyse the so-called new world order inaugurated by globalisation in terms of who benefits at the local (including neighbourhood), national and international levels. To make progress on these fronts,

social workers have to work with local communities and politicians to develop strategies for the development of alternative social, economic and political structures and to harness people's energies to work collectively to secure social justice, equality and the well-being of all. In other words, they have to work to put an end to neo-liberalism's preoccupation with a materialistic individualism that has excluded countless poor men, women and children across the globe and, through the degradation of the environment, taken an enormous toll on the sustenance of people, plants, and animals.

To engage more fully in these tasks, social workers have to:

- Help local communities mobilise and organise to enhance well-being and care for people, the environment and the planet;
- Develop links and alliances with other like-minded peoples across the world – the internet can facilitate this;
- Support demands for corporate accountability;
- Practice holistically to link personal attributes and structural inequalities in their change endeavours; and
- Use national and international legislation aimed at promoting human dignity and well-being.

Only by working together and acknowledging the interdependence of women, men and children, and of all people and the environment, can the well-being of all be assured.

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Chapter 4

Researching the History of Social Work from a Gender Perspective

Vesna Leskošek

Introduction

Recently, an increased interest in the history of social work has been noted among researchers of social work. This phenomenon can be attributed to global and local social changes (Lyons *et al.* 2006, see also Ferguson 2008) and their negative effects in terms of social inequalities and poverty. At the same time, the concept of the welfare state developed after the Second World War is going through a crisis. The welfare state has its roots in the labour and social movements of the nineteenth and twentieth centuries, and social work as a profession was created and developed in close connection with these movements (Hering and Waaldijk 2003). The focus of the women's movement was gender inequalities, together with other social injustices that are of central importance to social work. It is important that social work understand the primary mechanisms that produce and reproduce social inequalities, including gender inequality. The discourse on women is still trapped in a binary understanding of the difference between nature/culture, body/mind, private/public, civil/political, and emotional/rational, with women at one pole and men at the other. This matrix of thought is maintained by constant disconnection from the past. On the other hand, the past could offer a great deal of data for transcending this type of binary thinking.

This matrix has been the subject of public debate for centuries. At the beginning of the sixteenth century, the answer to the question of the nature of women within the European *querelle des sexes* was 'enemy of friendship, necessary evil, temptation by nature, threat to the house, delightful misfortune, nature of evil' (Bock 2004). Towards the end of the sixteenth century, the dispute flared up again with the publication of *Disputatio nova*, a work that pondered the question of whether or not women were human, and leaned towards a negative reply. The *querelle des sexes* gradually turned into the *querelle des femmes* and gained new momentum, with women gaining opponents as well as supporters. For several centuries, a number of authors have been arguing that the gender difference was constructed, and that women were humiliated so that men could monopolise power.

The controversy over women is not merely a theoretical discussion; its implications are far-reaching and affect the lives of women both past and present. For a long time, only four roles were recognised as respectable for women: virgin, wife, mother and widow. In all of these roles, a woman fully belonged to a man and was subordinated to him. As a virgin she was subordinated to her father, as a wife and mother to her husband, and as a widow to her sons. A substantial shift in gender relations was brought about by the French Revolution (*ibid.*). Women deliberated on it and participated as protagonists on all levels. On their march to Versailles, peasant women demanded bread instead of guns, and were ridiculed by members of the *ancien régime*. Here, too, were debates about whether *homme* included *femmes*: Does the term for 'human being', and consequently the declaration of human and citizen rights, apply to women, or does it refer to men alone? The growing support for the latter view led Olympe de Gouges to write the *Declaration of the Rights of Woman and the Female Citizen*, a work that was to cost her life due to her disregard for 'the virtues of her sex' (*ibid.*). Nonetheless, the participation of women in revolutionary events dismantled the classical boundary between the public and the private, and this process could not be stopped. Women simply appropriated public action and could no longer be expelled from public life, although this by no means brought them the final victory. The first attempts at constructing femininity came only at the end of the nineteenth century. These attempts changed from mockery and ridicule to more sophisticated strategies concerning the construction of gender roles, particularly those of mother, homemaker and wife.

The response was immense; women now began to form alliances in order to achieve more within a shorter time. Although the beginning of the women's movement can be traced to the time of the French Revolution, the first women's political associations were formed somewhat later. The women's movement was 'a conscious demand by women for their rights and a systematic effort towards winning these rights' (*op. cit.* 359). The women's issue was debated everywhere, including in Slovenia. 'What do women want?' is a question that is still asked today. The irreconcilability of career and family continues to be an issue, perpetuating the dichotomous image of the impassable dividing line between the public and private spheres, a division that in fact runs along gender lines.

Social work education often does not incorporate gender as an analytical category, despite the fact that the majority of those who use social work services as well as the majority of social workers are women, and women have had a significant role in establishing social work as a profession. It follows that social work education cannot neglect the issue of gender and the role of women in social work, even if, many times, they are not present in the collective memory of the profession. The superficial yet general conclusion is that women are omitted from the history of social work because they did not

contribute to it, or at least did not contribute enough to be recorded in the recognised historical memory.

This paper discusses research into the history of social work and the role of women in the establishment of social work as a profession and academic discipline. Three categories are considered: history, gender and social work. Each requires a specific kind of understanding.

History and gender

The process of creating knowledge about gender could be understood as a process of *planned forgetfulness*, an occurrence that resulted from the exclusion of women from historiography as the preserver of historical and collective memory (Lerner 1997, see also Le Goff 1992). Forgetting, like remembering, is a planned process. It is an efficient means of maintaining prejudices, stereotypes and beliefs which are based not on facts, but on ideas that can be maintained only by being kept separate from facts. Collective forgetfulness or selective memory has a special meaning for women, who are victims of stereotypes and prejudices precisely because they are constantly removed from the collective memory.

The large share of females whose contributions to the creation of human history have been overlooked serves to maintain the belief that sexual differences are of a natural origin, a belief which over time was transferred to knowledge about sexual differences and the relationship between men and women (Scott 1988). Such knowledge is not absolute, but relative; it was created in different epistemological frameworks, originating at different times and in different places. It comprises ideas, institutions, structures and everyday practices, as well as rituals and traditions, all of which merge to create social relationships. In this sense, gender needs to be understood as the social organisation of a biological difference based not on natural differences between men and women, but on knowledge about the significance of the social difference. It is not biological differences that are the cause of an actual social organisation of differences; on the contrary, the social construction of biological differences has established gender differences.

Perrot (1984) connects this idea with identity practices shaping the lives of people in the contemporary world. Due to a lack of their own history and their omission from the past, women can identify themselves only through prescribed notions about their identity, and not through who they really are. In this sense, history is identity, as it offers much data on – and evidence of – real life, capabilities, abilities and powers. To deny the significance of the public action of women is to deny the image revealed by their actions. As a result, women not only have to look for their own social position over and over again, but must also look much deeper. The creation of an incorrect picture of a time, with events not described as they actually happened or completely denied, is

another consequence of the same process. This is how a hierarchy of events as well as actors has been established. Therefore, research on women's past is not about revealing a special history, but about understanding the past in the complex intertwining of social and individual relationships and events that it represents. This can only be achieved through inclusive research practices which cover not only women, but all excluded people from whom history was taken away so that society could maintain the desired image of them, or who were not even included in history because of the image they had in society. Recent research has therefore been oriented towards physically handicapped or disabled people, people with mental health problems and learning disabilities, minorities and other socially excluded or discriminated groups. We are learning a great deal from their experiences, and everyday life is becoming a legitimate scientific field of research without being devalued as subjective and marginal.

History of social work

As Healy (2001) points out, it is difficult to affix a date to the beginning of professional social work (*op. cit.* 19). In the countries where social work was first developed, helping activities began under a variety of auspices. The question that Healy asks is at what point in time can this be labelled social work. Is the hallmark secularism, or is it professionalism (doing it regularly, and not voluntarily, from time to time)? Or is the introduction of professional training crucial (*ibid.*)? It is obvious that social work has a number of ideological origins (Lorenz 1994). Some suggest that it is the continuation of philanthropic and charitable traditions connected to the activities of various churches; others seek its roots in social movements, particularly in the labour movement and the women's movement. One must also keep in mind that social work was developed within different welfare regimes, in a variety of social and cultural environments.

There have always been people who need assistance from others, but that assistance has not always been called 'social work'¹ (Cree 2008: 291). Cree traces the origins of such assistance to poverty, and dates it to 1601, when the first Poor Law in England was passed. Churches and monasteries offered various forms of accommodation (almshouses, infirmaries and hospitals) to people without families who could not look after themselves. After the agrarian revolution, ecclesiastical institutions could no longer afford such forms of assistance and the responsibility was passed to the state. The state responded by



¹ The quotes indicate the relativity of usage. The author uses a particular term because she thinks that this kind of assistance could be categorized as social work, but also distances herself from that understanding.

dividing people into those who deserved help and those who did not ('good' and 'bad' poor). The undeserving were placed under supervision, punished, or imprisoned, while the 'good' poor (old people, the chronically ill, the blind, people with psychological health problems) received assistance from voluntary organisations. The author argues that these ideas significantly influenced the practices of social work, or became part of social work practice. The nineteenth century saw the flourishing of philanthropic voluntary organisations, including 'police court missionaries, rescue societies for "fallen women"; housing associations; university settlements; children's charities; hospital almoners; caseworkers from the Charity Organisation Society and other relief agencies; visitors on behalf of churches of all denominations ...' (*op. cit.* 294). Most of the work involving individuals and families was carried out by middle class women who brought their own ideas about class and gender, family and work, and old age and sexuality to their work. They believed that their middle class culture and beliefs were superior, and so endeavoured to elevate the working class to the level of the middle class. They also believed that the nature of women was different than that of men and that, consequently, their skills and abilities were different too. Their 'natural' role of carers was realised through the help they gave to the lower classes. They were called 'friendly visitors' and their reports to the Poor Law boards became the basis for decisions about help provisions. Philanthropic work therefore incorporated beliefs about people, and also socialised them into accepting specific ambitions. It provided a way of 'intervening in the lives of individuals and families to "fit" them for the new industrial society without undermining individual responsibility and the role of the family' (Parton 1994 in Cree 2008: 295). Nonetheless, the tendencies towards social change within the operation of certain secularised agencies should not be overlooked.

Lorenz (1994: 19–22) cites another kind of control. In 19th century Germany, the so-called Elberfeld system of providing personalised financial assistance to the poor was introduced. The town of Elberfeld was divided into 252 districts, and each was assigned a volunteer supervisor who took care of 4 families. The supervisor's task was to assess individual circumstances using a method that was prescribed in minute detail by the town authorities. This was an example of control over the poor carried out from below by middle class citizens (in this case mainly men, as the position was linked to voting rights) (*ibid.*). Lorenz also emphasises that various social policies emerged throughout the world at this stage, with relationships between citizenship and the state arranged in accordance to dominant political ideologies. This led to the establishment of control-based systems and controlling practices. Social work, which always develops within a particular socio-political context, is therefore also a product of ideologies transmitted through education in social work as well as other channels. Lorenz places social work in four ideological frameworks: Christianity, philanthropy, feminism and socialism

(*op. cit.* 41); but also categorises various types of training for charity and care as schools for social work.

From the above it follows that the predicament as to when social work began arises from the multiple meanings of this notion. Some classify every social activity relating to care and assistance as social work, regardless of its origin, protagonists and methods of implementation. Charity and philanthropy therefore appear as naturalised sources of social work. Here the notion of social work denotes only the emergence of the academic discipline, which conceptualised the field of care and assistance, even if it is the ideological assumptions behind charity and philanthropy that define this discipline. The second meaning is connected to the development of various services, organisations and other forms of care and assistance that some view as part of social work, even if they predate the academic discipline or were charity activities. In this case as well, social work is seen only as a somewhat more institutionalised form of charity. The third meaning is connected with secularisation and the establishment of welfare systems at a time when the field of care and assistance was beginning to be regulated through social policies as new services emerged; these were primarily volunteer organisations which did not necessarily arise from volunteer traditions. Such a lively history of care provides enough room for an ideological decision as to when social work actually emerged. According to Lorenz, such a decision is just as ideological as the beginnings of social work themselves (*ibid.*). Those who believe that social work primarily involves care for individuals and work with and for individuals will seek its roots in charity. Middle class morality as part of secularised philanthropy also individualises intervention, thus maintaining the existing social order. Only those who see its sources in political movements dating from the end of the nineteenth century and the beginning of the twentieth century place social work among the traditions of workers' and women's struggles against exploitation and social inequalities.

Gender and social work

Social work as a profession emerged early in the twentieth century, when the process of constructing femininity was at its height. In particular, this involved a woman's body and her appearance, as well as the roles she was supposed to play both in private and in public. Her morality, sexuality and motherhood were constructed, which in turn determined her social opportunities and, ultimately, her existence. From the very beginning, a significant part of these activities has been connected to work with women, who were treated within the framework of prevailing social relationships. Contemporary research (Schilde and Schulte 2005, see also Hering and Waaldijk 2006) shows that the role women played in establishing social work was greater than it was believed to have been in the past, when only provider and user

roles were attributed to them. Research has brought back memories of the work carried out by Alice Salomon, the founder of the first school of social work in Germany (Kuhlmann 2008). As early as the beginning of the last century, Alice Salomon was able to attract the attention of women (both activists and theoreticians) (*ibid.*). The Slovene women's press from that time is not an exception: an article on Alice Salomon was published in 1932 in the magazine *Ženski svet* [Women's World]². The article was a short biography that focused on her role in the development of social work. Alice Salomon was described as a social worker who dedicated her life to the education of women and advocated for the rights of employed women. The following elements of the profession can be identified in the description of Alice Salomon as a social worker (Leskošek 2005):

- Helping people in need;
- Diminishing the differences between the rich and the poor;
- Working in institutions for children, as well as with blind and poor children;
- Supporting working women by helping them in the household;
- Aiming to ensure that the goals of social work are collective and not individualistic;
- Protecting working women;
- Enabling women to be both educated and employed;
- Influencing social policy.

Recent works on Alice Salomon, and especially the Alice Salomon Archive³, emphasise her importance and influence on the development of social work. The same could be said for Jane Addams, who, according to *Women's World* (1930: 321–324), dedicated her life to the poor and other people in need. The author of the article described her as a social worker who founded Hull House, which was open to all people in need and provided education and training, with a focus on children, migrants, single mothers and others. She advocated for the oppressed and campaigned against social injustices. Although both biographical articles are short and do not refer to personal contacts between the author and Jane Addams or Alice Salomon, they are important because they constitute the first appearance of the term 'social work' (Slovene: *socialno delo*) in Slovene writings. It is used in a Slovene women's journal, and was written by the Slovene feminist activist Angela Vode. She described social work as being directed towards social change. It is not just about providing help to individuals in need, but also about collective action against the social injustice and inequalities that were one of the most important targets of the women's



² *Ženski svet*, 1932/11, p. 309–312.

³ The Alice Salomon Archive website offers a good collection of writings and information on Alice Salomon, available at: <http://www.alice-salomon-archiv.de/english/start.html> (January 7 2009).

movement. In both articles, she connected social work to the labour movement and to the development of social rights. She emphasised the issues of decent housing, education and employment for all; these were also the most significant demands of the women's movement.

There was also a clear distinction between charitable work and social work. The former was seen as private and individualistic, with no political claims or action against injustices. The latter was described as public, and was directed towards social change. Offering help both in kind and in the form of money was no longer seen as an act of good will or morality on the part of those who had resources; on the contrary, receiving help was defined as the right of those who did not. It became a right once social inequalities were acknowledged, whereas charitable work was often based on a belief in the individual failure of those in need.

When discussing social work as a profession or academic discipline, the fact that women are frequently mentioned as pioneers in this field cannot be overlooked. Besides Alice Salomon and Jane Addams, key women in the early history of social work include: Manon Luttichau of Denmark, Sybil Francis of Jamaica, Sattareh Farmanfarman of Iran, Ilse Arlt of Austria, Rayna Petkova of Bulgaria, Katalin Gëro and Ilona Földy of Hungary and Helena Radlinska of Poland (Schilde and Schulte 2005, see also Zaviršek 2008). Women inevitably appear in the history of social work once one turns to the emergence of the term itself, regardless of arbitrary and ideological decisions about the origins of social work (Leskošek 2005).

Comparative research on the history of social work

During the past decade, the history of social work became an important research field. One major international research study in this field was the project entitled *The History of Social Work in Eastern Europe 1900–1960*. The research was headed by Sabine Hering of the University of Siegen and Berteke Waaldijk of the University of Utrecht, and was conducted within the framework of the Network for Historical Studies on Gender and Social Work in Europe. The research covered eight countries: Bulgaria, Croatia, Hungary, Latvia, Poland, Romania, Russia and Slovenia. Each country had its own research team, which could choose how to divide research tasks, but in all countries the main sources used were archives, interviews and secondary sources such as various reports, newspaper announcements, books and articles⁴. During the project, which lasted two years, the entire research team met three times: for the kickoff meeting, for an interim meeting, and finally for the concluding conference. In addition to these meetings, each country organised a



⁴ Information on the project is available at <http://www.sweep.uni-siegen.de/>. (April 2 2009).

local conference (Schilde and Schulte 2005: 7–8). The project included three interim reports and an extensive final report.

It should be added that the research team was interdisciplinary, and included scholars from the fields of pedagogy, history, sociology and anthropology, who did not have a specialist knowledge of social work. The topics addressed in the interim reports reveal that it was easier to research the activity of churches and organisations and social policies than it was to search for traces of social work. To ensure a minimum consensus on what social work is (a requirement for any comparative study), participants had to answer the following questions:⁵

1. Questions concerning material histories of social work:
 - Who exactly did what?
 - Daily practice? – How did the working day look?
 - How were social workers dressed?
 - Were forms used?
 - Were files formed? How did they look?
 - Images, photographs;
 - Buildings, rooms, desks.
2. Definitions, meanings and concepts of 'social work' (also: social assistance, social service, social pedagogy):
 - Who defined 'social work'?
 - When was 'social work' defined?
 - Where was 'social work' defined? (In a journal, conference, parliament, party, book, article?)
 - What was the impact of attempts to define social work?
3. Questions about the location of social work:
 - Where is professional social work located:
 - In state-sponsored structures of relief?
 - In private charity?
 - In church-sponsored charity?
 - In state-sponsored structures of social security?
 - In local and municipal government?
 - Does the Bismarckian division of subsidiary systems of social security – state relief, private/church, charity – apply?
4. Hidden histories of social work:
 - Jewish social work, Jewish impact on professionalization?
 - Subversive social workers?
 - Social workers in resistance and opposition to dictatorship?



⁵ Available at http://www.sweep.uni-siegen.de/Sweep_PDF/3aquestions.PDF (April 2 2009). The list of issues was presented in 2004 at the research meeting in Budapest by Sabine Hering and Berteke Waaldijk.

- International contacts that went unnoticed in national histories?
 - Invisible clients in invisible places (asylums)?
 - Social workers and their role in eugenics?
5. Questions about the gender of social work:
- Is social work a form of cross-gender cooperation and/or of female solidarity?
 - What about the sexuality of clients and social workers?
 - Construction of male and female clients?
 - The gender of social workers?
 - Women as inventors of the welfare state?
 - Was the difference between paid and voluntary social work gendered?
 - What role did gender play in the professional hierarchy?
 - Meeting points between gender and ethnicity?
6. Ambiguities of Social Work:
- Empowerment and/or lack of power?
 - Control and/or help or both?
 - Adaptation of the client and/or emancipation of the client?
 - Care and/or education?
 - Social pedagogy and/or social service? (Does the German distinction between these two apply?)
 - Distinguishing between people:
 - Deserving and/or undeserving?
 - Social and/or antisocial?
 - Inclusion and/or exclusion?
 - Do social workers patrol the borders of the nation state? How? Is this positive, is this negative?
7. Prehistories of social work:
- Distinguish between two types of prehistory:
 - Prehistories written by the research teams (about social work between 1900–1960 that did not carry this name);
 - Prehistories written by social workers between 1900–1960, about the 'origins' of their profession.
 - Invention of tradition?
 - Who needed prehistories?
 - Who wrote them, when?
 - Social work before the first schools for social work?
8. Professional Identities in social work:
- Training and education?
 - Methodological reflection?
 - Different from other professions (nurses, doctors, police, mothers, party secretaries, priests, nuns, teachers)?
 - Administration or social casework?
 - Volunteer professionals and/or paid professionals?
 - Different hierarchical levels (who is directing whom)?

These questions are important because they reflect the multidisciplinary nature of the team. Furthermore, they point to various ways of understanding social work, i.e. as related to practices, services, organisations and religious activities on the one hand, and to social policies and the development of welfare systems on the other. The list of questions provides important points of departure for researching social work: target groups, social problems, methods of intervention, and methods and differences *vis-à-vis* other disciplines. The questions provided a good basis for a comparative study, but were very exhaustive, and therefore potentially insufficiently clear. This brought about the need to formulate the following main topics of the research:

- Important biographies in the field of welfare; national networks; membership of international networks;
- Social activities of the churches (including Jewish welfare) and smaller organisations (the Salvation Army, the Rockefeller Foundation, Quakers);
- Social policy and governmental structures of welfare (Which ministries had which responsibilities?); structure and contents of the welfare law;
- Theories and methods of welfare/education and professional structure.

In the above list, social work only appears in the last item, while the first three items refer to the welfare contexts in different countries. It is possible to conclude that the research leaders felt that it was important to analyse the nature of welfare systems and social policies, but that these cannot be used to infer when and how social work developed. The question of how much of the research would be dedicated to the history of social work was therefore left to the discretion of individual project teams. In Slovenia, the team decided to research the emergence of the term 'social work' and to contextualise the meanings of this term.

The women's movement in Slovenia and the development of social work

The term 'social work' was first introduced in Slovenia in the 1930s, when the Yugoslav Women's Union (*Jugoslovanska ženska zveza*) was founded. The Union was divided into different sections that covered issues such as political participation, international cooperation, peace work, etc. One of its sections was responsible for social work. It was led by the Slovene activists Angela Vode⁶



⁶ Angela Vode is one of the most important pre-war feminists in Slovenia. She wrote over 150 articles and several books, including *Spol in usoda* and *Ženske v sodobni družbi* [Gender and Destiny, Woman in Contemporary Society]. After the Second World War, she was prosecuted and was not allowed to publish. She died in 1983, forgotten and unknown. During her activism prior to the war, she worked in a number of organisations. She was a teacher by profession. Her biography was published in 1998, and since then her work has been reprinted in three volumes, the latest of which contains her memoirs and was published in 2004.

and Alojzija Štebi⁷. Initially it had two main areas of activity: the protection of children and youth and women's work and professions. There was no education for social work and the term was not used outside of the women's movement. Although social work in Slovenia was not developed as a profession before the Second World War, elements of it can be found within the women's movement. Their collective actions were directed at social change, and were aimed at helping those without the power to represent themselves. Women influenced the development of the welfare state and were also responsible for some of the services offered to people in need (Leskošek 2005: 156).

Within the movement as a whole, the most important topics were political rights (active and passive right to vote, membership in political parties), education (access to university) and employment (equal pay for equal work, social rights). Other equally important topics were brought up in order to facilitate their introduction into the public sphere. Some of these topics had been addressed as early as the end of the nineteenth century, while others came later. The three basic demands – two were voiced at the end of the nineteenth century, and the third in the 1920s – were civil marriage, divorce and abortion (Leskošek 2003). All three were defined as basic rights for the liberation of women. The movement viewed Catholic marriage as one of the key reasons for the subordination of women. It rested on a strict dichotomy, whereby women were the heart and men were the mind (Mahnič 1893: 317–321). Although only the union of the two could create the whole, a man was able to survive on his own, but a woman was not. She could only keep her decency in marriage, where she was controlled and guided by her husband. Catholic marriage was constructed as the only refuge, a place where a woman was protected from the dangers that lurked outside of the home. But for this protection she had to pay a price: she had to obey her husband simply because she was the weaker half of the whole.

Women understood that liberation was only possible if they escaped a marriage constructed in this way. They saw the solution in civil marriage that could be annulled through divorce, as opposed to mere separation. Separation was insufficient because it did not provide women with access to public life or opportunities to seek an education or employment or be active in any other field. Their third demand was the right to abortion. It came from women's labour organisations that wanted women to gain control over their own lives. This was one of the most difficult battles; it was certainly the longest and dirtiest. They were persecuted by the Church, called all kind of names, and often excluded from the communities they lived in. This was also the issue that



⁷ Alojzija Štebi was also a very important member of the women's movement. She was employed in the field of social security and also published many articles and a book entitled *Ženske in demokracija* [Women and Democracy].

brought together different women's organisations from the fields of academia and labour. It was closely connected to social rights, because by claiming the right to abortion these women brought up considerations of ensuring that it would not be the only method of birth control.

To prevent women from using abortion as a means of birth control, society has to assure basic rights:

- The right to decent housing;
- Equal pay for equal work;
- Minimum wages;
- Cash benefits in cases of disability, illness, old age;
- Maternity benefits and maternity leave.

They also demanded equality between married and unmarried mothers and between children born in and out of wedlock; they brought up the issue of domestic violence, and also demanded special treatment for women that killed their child at birth. This stemmed from the fact that they viewed moral double standards, that is, different standards for men and women, as the basic injustice that put women in a position to take action against their children. Once a woman was pregnant, she had to take full responsibility for the child. Men were not held responsible for alimony until the 1920s. The debate on abortion reflected these double standards, and even though women did not gain the right to abortion until 1946, it did contribute to some changes in legislation that improved the position of unmarried mothers and children.

Other fields of actions that women's organisations were engaged in include:

- Woman physicians for venereal disease;
- Women police officers for work with prostitutes and women who had committed crimes;
- Counselling service for couples and to inform women of their rights;
- A woman juvenile judge;
- Shelters for domestic servants and other women who could easily lose their jobs;
- Care for women who returned from prison;
- Preventative work against prostitution.

The actions listed above were by no means the only ones undertaken by the movement. In line with the aims of the project, they represent actions that pertain to an early understanding of social work and that had an impact on the development of the welfare state.

Comparative results of the research

An important result of the research was the biographies of women who contributed to the development of social work in various countries. Katalin Gerő was the superintendent of the Jewish girl's orphanage in Budapest, which operated under the auspices of the Pest Israelite Women's Association.

Iлона Földy was the head of the Kozma Street Settlement in Budapest, which may be considered part of the settlement movement which was widespread at the time. Helena Radlińska contributed to the professionalization of social care in Poland. She opposed children's institutions and promoted the idea of foster families. She worked closely with Emilia Manteufel-Szoego. Many other women in Poland were involved in the organisation and professionalization of social care, including Maria Roszkowska, Regina Rudzińska, Maria Uziemblo, Pelagia Wyszowska and Maria Kamila Korytowska. Rayna Petkova, who is considered the pioneer of social work in Bulgaria, studied in Germany. As a member of the Bulgarian Women's Union, she contributed to the establishment of a women's college for further education in social work. Tatjana Marinić from Croatia and Angela Vode and Alojzija Štebi from Slovenia also deserve mention.

Another important result is data on the early development of education for social work. In Romania, the Superior School for Social Assistance, which was financed by the Rockefeller Foundation, was established in 1929. Its students had the opportunity to study social work in the US at Johns Hopkins University. In Poland, the College of Social and Educational Work, a department of the Free Polish University, was established in 1925. The course initially lasted two years and was later extended to four years. In certain countries (Bulgaria, Hungary), social work was professionalised by women who had studied abroad. This generated many links and international cooperation that transcended the border between the West and the East. In the countries of the Eastern Bloc, education in social work was abolished after the Second World War; at roughly the same time, it was introduced in Yugoslavia.

One feature characteristic of social work in all of these countries was the inclusion of women who were primarily connected with the women's movement. However, this was not always the case. Early developments confirm the thesis that the origin of social work varied across countries. For example, in Slovenia social work developed within the women's movement, acting as a liberating experience that enabled women to invigorate other women and concentrate on activities that required active public involvement. Elsewhere, for example in Hungary and Bulgaria, women considered social work part of their natural role as mothers and wives, and consequently concentrated primarily on work with children, orphans, the blind and 'morally endangered' young women. However, the dividing line between these two approaches was not a sharp one because the ideologies of motherhood and feminine nature were ubiquitous. Not only did they influence the self-definition of women who could be considered early social workers; they were also frequently implemented as the dominant views on women and femininity. The research carried out in Hungary, Bulgaria and Russia testifies to this. Apart from gender ideologies, ethnic and class ideologies were also at work. The Hungarian researchers found that social work services were intended for white Christian

families, although this was never a subject of open debate. The records show that no members of the Jewish or Roma community, or other religious communities, were among social work's early clients, even though Hungary was a multiethnic and multicultural country.

Hungary is repeatedly mentioned primarily because the Hungarian researchers paid attention to intersectional issues, an analytical approach to the past that was not found in the other research reports. It should be emphasised that the diversity of the results was also the consequence of different notions of social work. The researchers were mainly historians and social scientists, and included only a small number of social workers. This further complicated the basic issue of an appropriate approach to the history of social work.

Conclusion

Comparative studies of the history of social work that include gender as an analytical category are more demanding than they may appear due to the three complex categories that they involve: history, social work and gender. Gender research is important and requires specific and innovative research approaches (Williams *et al.* 1999, see also Shaw 2007, Maynard and Purvis 1994). Taking into account the historical perspective, the sources primarily consist of verbal accounts, archive materials, photos and testimonies. The history of social work is short (approximately one hundred years) and undocumented in many countries; archives are poorly organised and the pioneers of social work are no longer alive. All these factors further aggravate the task of writing the history of social work. This could be a reason why writing the history of social work sooner or later turns into writing about the history of social policies and the development of welfare systems. Another reason why data about the development of various services and organisations that helped people in distress is used to draw conclusions about the history of social work is of an ideological nature. The historical traditions of different social institutions actually legitimise the present state of affairs and current tendencies and policies. If, for example, it were shown that Church traditions were the basis for what was to become social work, this could be used to justify current tendencies towards reducing the scope of the welfare state so that care for people in distress would again be left to ecclesiastical and volunteer organisations, while women would again be placed in the position of carers and nurses. Social work associated with these traditions is passive and oriented towards the transformation of individuals and the mitigation of their crises and problems. However, if a link is established between the emergence of social work and women's or workers' movements, a different picture of this profession and academic discipline emerges: that of an academic discipline and profession that must actively work towards the kind of social circumstances that would support human dignity not only for those directly affected by the practice of social work, but for all people.

The comparative study of social work in eastern Europe revealed the extent of the contribution made by women to the development of this field and services and organisations dealing with care, and also provided a partial answer to the question of the past development of social work. Although not explicitly listed as a goal of the project, in the end it turned out that it was possible to arrive at certain conclusions about the development of the welfare systems in eastern Europe and about the role of women. An important outcome of this research was the finding that the generally accepted view that the Eastern Bloc countries did not have welfare systems is wrong. While it is true that the profession of social work was unknown there, every country did support some form of care for people in distress. Another important finding is that in the majority of the countries studied, social work emerged in the early twentieth century. Various forms of education for social work existed, with various women or women's organisations closely linked to education. The third important finding is that differences between individual eastern European countries were even greater than between eastern and western European countries. This is true not only of the period before the Second World War, but also of the post-war period. The fourth important finding is that the development of the welfare system was complex, and the research material so rich and extensive that it exceeds the scope of a single research project.

Although it did not provide an answer to the key question of how social work developed, it did produce a number of other positive effects. Local conferences on the history of social work, social policies and the development of welfare systems were organised in each participating country. For most participating countries, these were the first conferences on these subjects, and they encouraged local research in this field. In some cases, they brought together researchers concerned with these topics whose work had been invisible or unrecognised. Another important development was the linking of researchers from across Europe and Russia, who published several books and addressed several sets of topics in important publications throughout the course of this two-year project. This cooperation has been extended to other research projects. Comparative research therefore also leads to linking and networking, thus multiplying its effects and expanding them beyond the final report.

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PART II

**Applications of specific methodologies
to cutting edge issues**

Chapter 5

Comparative Methodology in Mental Health Research: Its Relevance in Social Work and Social Policy

Shulamit Ramon

Mental health is an area of specialisation within professional social work as well as a prominent issue in all other aspects of social work (parents experiencing mental ill health and its effect on their children; mental health issues for people with disabilities, for offenders; depression among older people). It is also an area of social policy in all countries, although the emphasis differs depending on whether a society has a universal health service or relies on a federal structure for the dissemination of policy preferences.

Furthermore, it is an issue we often face in our personal lives, either through our own experience or through the experiences of family members, friends and colleagues. With an increasing number of people throughout the world living with mental ill health, it is highly likely that social workers will have a lived experience of it (usually mild disorders), and not only a professional one. Mental ill health is also encountered through the media's treatment of people to whom it is attributed and in various art forms. The media's treatment deserves mention because of the *othering quality* it assigns to users of mental health services: portrayals of them as 'the other' make them so different that they become a stereotype of a person, rather than a description of a real person with whom we have a lot in common. The othering effect relates to our fear of mental illness and the people who 'carry' it – of crossing the boundaries between the rational and the irrational, of bringing to the surface experiences that have been repressed because of social norms, pain, or rejection (Philo 1996). People with the lived experience of mental illness often cite stigmatisation as one of the main obstacles to their social inclusion (Repper and Perkins 2003). Comparing newspaper coverage of mental illness in England and Italy, Ramon and Savio (2000) have demonstrated significant differences in the approach of the media in the two countries to people experiencing mental illness and service providers. This comparison highlights the significance of the cultural and professional contexts in which empirical research is conducted, and will be discussed below.

For all these reasons, comparative research of mental health and illness merits the attention of social workers, policy makers, public opinion makers, and the general public.

Mental health research spans a wide range of approaches and issues, just as mental health and illness cover a vast variety of phenomena, stakeholders and approaches to understanding and intervening. Like social work and social policy, other disciplines involved depend on their society-specific mandate, which is often reflected in the legal obligations they have to meet, while at the same time claiming the universality of their knowledge and its application. However, unlike social work and social policy, mental health is a multidisciplinary area in which different disciplines and their practitioners compete for power and influence. These include psychiatrists, nurses, social workers, occupational therapists, psychotherapists, and a large, growing number of unqualified workers who often provide more direct support to the service users.

More recently, some countries (the UK, Scandinavia, the US, Slovenia, and Spain, to name a few) have enabled service users with lived experience of serious mental illness to work in mental health services and in NGOs within this field and to be co-researchers in conjunction with universities as part of a recovery policy which focuses on their strengths (Deegan 2001, see also Dean *et al.* 2003). This move leads to further changes of not only perceptions and attitudes, but also of the dynamics of the relationship between users and professionals in clinical practice and in research.

This considerable diversity is also expressed in the variety of research questions, methodologies, methods, and styles for presenting research findings.

As research evidence has come to be universally taken as the gold standard for evidence-based practice, the importance of research in the ongoing interaction between the wisdom of practice and of research has increased. Recently, an additional source of knowledge and evidence has appeared: knowledge coming from service users with lived experience of mental ill health, known as 'experts by experience' in some countries. Thus three types of formal knowledge are now competing in the field of mental health. Culture-specific beliefs about mental illness and health should also be added to this list, as they are likely to play a central role in concrete instances of mental health practice and research (for example, in the case of ethnic minorities whose set of beliefs may be at odds with those of the majority in their shared society, inasmuch as the majority's cultural beliefs inform practitioners and researchers).

This article will focus on the social sciences' contributions to mental health research, including social policy and social work research. Input will come from key examples in which research is playing a central role in changing the direction of the mental health field and the relationships between its different stakeholders. My background in social work, psychology and sociology qualifies me for this undertaking. I have also experienced life in two

very different societies (Israel and England); researched psychiatric reform in another after acquiring sufficient knowledge of its language (Italy); and worked in social work education projects in a number of post-Communist societies (Armenia, Azerbaijan, Russia and the Ukraine). Hopefully, this will enable me to be more open to issues of diversity and power in both mental health and research. Although my preference for interpretative and participatory research is clear (Ramon 2003), I am also able to critically value other types of mental health research.

Below, examples of research types will be presented, followed by an analysis of their impact on mental health, social work and social policy research both in terms of content and methodology.

However, it is important to note that the vast majority of current comparative research in psychiatry is based on a natural science positivistic research paradigm marked by the following characteristics: the effects of an intervention – usually a new drug – are measured by a reduction in symptomatology; randomised control trials are the sampling method of choice; the participants are named ‘subjects’ or ‘patients’ to denote their passivity and lack of choice as to whether or not to participate in the research and/or express their views about a specific intervention; and quantitative measurements are perceived as good, valid and reliable. Qualitative research is seen within mainstream psychiatric research as useful – at best – for generating research questions. Comparisons within this strand of mental health research usually compare the effects of an ‘old’ medication with those of a ‘new’ one; the impact of a new medication on people with different psychiatric diagnoses; and differences between populations that differ in terms of culture, with culture itself not being used as a research variable.

Within this approach, it is assumed that psychiatric knowledge and understanding is universal and applicable across different cultures, societies or social structures; the key variables are individual differences in the degree of (essentially) genetically and bio-chemically induced morbidity. The agency of the person is of little interest to researchers within this tradition, as it is assumed that the person is at the mercy of their physical attributes and has little to contribute to the process of either becoming ill or recovering from the illness, apart from conforming to professional advice.

Several issues to be kept in mind while reading the examples given below emerge from this introduction. They include:

- The centrality of the need to include the specific as well as the global context and their impact on the conceptual framework of research in mental health. The context itself is multifaceted, as it entails individual, group, community, culture, and social structural elements.
- The importance of a shared perspective on both research and mental health among the participants in comparative research;
- The significance of ethical issues in mental health research;

- Ensuring that the issues listed above do not get lost in the operationalisation process of a specific comparative research project.

These conceptual, ethical and methodological issues are not specific to mental health research, and have presented a challenge to comparative researchers in other health and social care areas.

In a recent article, Wrede *et al.* (2007) propose a *decentred* approach for their research on maternal care, by which they mean ensuring that the local and the shared comparative elements receive equal attention within large scale comparative research in high income countries.

Writing on cosmopolitan research, Beck (2002) expressed a wish for research that is simultaneously localised and globalised, but did not offer many clues as to how this could be put into practice. However, his own research (Beck 1998) on when neighbours become strangers in the case of early Nazi Germany illustrates the choice of a puzzling research question which resonates not only in that specific context. He proceeds to respond to the question with an analytical discourse rooted in social psychology and sociology and strewn with story-like snippets that explores the cognitive and emotional processes that enable neighbours to become strangers. Chamberlyne *et al.* (2002) provide an example of the use of a contextualised biographical approach to the issue of social exclusion and inclusion in their comparative European study of this issue.

The limitations of these examples should also be recognised. They mainly pertain to a lack of representation of the populations studied and the fact that they only evaluate specific social interventions from the participants' point of view, thus overlooking a number of outcomes of these interventions which may be significant for other stakeholders and thus for society at large.

These issues will be revisited in the evaluation of the contributions and shortcomings of the mental health research discussed below.

Social policy research

An example of comparative research from a policy perspective is Goodwin's comparative work on mental health policy in the field of de-institutionalisation and community care in North America and western Europe (1997). This issue is central to shaping current mental health policies and services, and represents a break with a two hundred-year tradition of focusing on the institutional location of madness and those experiencing it.

Using documentary data from the 1970s and the 1980s, the author critically examines orthodox and radical perspectives on the ideologies behind this policy shift and highlights themes in mental health policy in the period following the Second World War. In terms of methodological issues pertaining to comparative research, he indicates that records may not be equally available in different countries; for example, where office psychiatry is practised

many encounters are not statistically recorded. Political changes – such as the reunification of Germany – imply that the current mental health systems are the outcome of considerably different directions. The same word may mean different things in different countries, and different words may mean the same thing in different languages. However, he does not mention that more often than not official documents and writing in mental health represent either the perspective of the policy maker and/or dominant professional, and that only rarely are users' and carers' views recorded. Interestingly, the author looks at the impact of the changes on users at every stage (length of hospitalisation, service settings, number of admissions, involvement of lay people).

Furthermore, gaps between intended policy and practice and actual implementation are also unlikely to be revealed by documentary analysis, unless it includes the analysis of everyday files. The author does not mention the criteria he followed when selecting documents, books, and articles. For him, the value of comparative policy research lies in developing understanding of the relationships between agency and structure (*op. cit.* 5); highlighting the motivation for the policy shift; and elucidating commonalities and specifics among countries (Mangen 1994: 235).

A historical overview of developments in the period following 1945 outlines the context for the move to community care in the 1970s and 1980s. This is based on a superficial review which takes into account the number of psychiatric hospitals and the main trends in service structures in a large number of countries.

Accounts of the policy shift are divided into ideological categories ('orthodox' and 'radical'), and the analysis is based on the interpretation of selected key texts. For the orthodox position, Goodwin looks at publications on the positive effect of newly developed psychiatric medications and their impact on policy makers and politicians (Department of Health [UK] 1989, see also Department of Health and Welfare [Canada] 1990) in combination with publications which highlighted doubts about the usefulness of these medications or refuted the claim that their introduction has led to de-institutionalisation (McGlashan 1989, see also Pilgrim and Rogers 1993: 146).

The orthodox accounts include professional accounts from the perspectives of social psychiatry and anti-psychiatry, both of which are criticised for attributing the change to factors not supported by empirical evidence (Goodwin 1997: 50). According to Goodwin, the only factor which affects the pace of de-institutionalisation and community care is whether the health system in question is insurance-based or not.

The radical accounts (defined as Marxists and other radical writers) (*op. cit.* 51) focus on broad analytical themes related to social and economic arrangements. They argue that the policy shift can be accounted for by financial motives and is little more than a cost-cutting exercise (Scull 1984). Goodwin, alongside a number of other authors before him such as Busfield (1986) and Ra-

mon (1985), highlights that the evidence of the interaction between financial pressures and investment in hospitals or in the community does not support this argument, as statistical data reveal diverse trends in countries facing economic difficulties. A different analysis is therefore needed. Warner's (1985) position that financial incentives do matter but are impacted mainly by changes in the demand for labour (when demand is high, community care facilities are developed; when it is low, hospital facilities reign) is largely accepted by Goodwin as a more sophisticated perspective than that of Scull. On the whole, however, he finds that the radical position also lacks evidence in support of its arguments.

Instead, Goodwin argues that all current systems of mental health policy are based on providing answers to governments' concerns rather than on meeting the needs of people experiencing mental ill health; this is why they are unsatisfactory and even lead to re-institutionalisation in some cases. Differences are explained by the nature of the political welfare regime in clusters of countries using Esping-Anderson's (1990) typology of liberal and conservative welfare regimes.

Goodwin's study provides an example of comparative policy research that remains at the political and professional levels of official documentation and literature and does not attempt to look at the perspectives of the different stakeholders involved in policy making or impacted by it. The study does have an ethical dimension in so far as it looks at what actually benefits people with lived experience of severe mental ill health.

Social workers' perspectives on a policy shift

Although the closing of psychiatric hospitals was an integral component of de-institutionalisation in several countries, including Australia, Italy, the UK and the US, in many others, such as Brazil, France, Germany, Japan and Spain, this was not the case. While there are a few studies on the closure and resettlement process and its outcomes (Leff 1997), little attention has been paid to the role of professionals (including social workers) in this process. When applying for funding from a social work organisation, the author of the research discussed here was told that the theme was 'too inward looking' and that she should not focus on one professional group.

Ramon (1992) conducted the only study to focus on how social workers experienced the closing of a psychiatric institution. The study examined the closing of a large psychiatric hospital in North London, where the closure process took ten years. Even though it inevitably involved comparing social workers' reactions and roles in this process with those of other professionals, the study did not explicitly include such a comparison (key professionals from other disciplines were interviewed about their views on the closure and on the involvement of social workers in it). Nor did it include a comparison with other social work teams in the UK or elsewhere.

The North London study looked at how three teams of social workers (a total of 30 workers) made sense of their role and its limitations within the process of closure using a mixed methods approach which included observation of team meetings, interviews with individual social workers and key professionals from other disciplines, and conducting parallel anthropological research on a resettled group of service users over a period of eighteen months (McCourt Perring 1993).

The findings highlighted the marginal position of social workers within the multidisciplinary team, which consisted mostly of nurses and psychiatrists. Because they favoured community over institutional living for the service users and consequently clearly supported the closure, social workers were perceived as traitors by the other professions, who opposed the closure. Furthermore, although social workers supported the closure, the de-institutionalisation process was led by health staff who did not include social workers in the transition teams responsible for managing the closure; all assessments of people due to leave were carried out without social workers and without taking into account the patients' original community and family background. The social workers' response was highly passive: they withdrew their minimal collaboration in the closure process while continuing to work with individual clients to implement community living, and later collaborated with the voluntary organisations that run the group homes to which most users moved. As the institution's end drew near, the belief in the value of community living was more and more on the defensive ('the hospital has beautiful grounds which will not be available to those moving outside'), professing belief in the strengths approach yet not applying it in the analysis of people's histories and their future trajectories. Research carried out between 2000 and 2007 by Jane Shears focusing on the 'integration' of mental health social workers into health-dominated multidisciplinary teams in the community highlights that they are pleased/relieved to be part of these teams, but seem to be unaware that the integration has not led to any change in work with service users (Ph.D. dissertation, Anglia Ruskin University). A marginalised group that feels unable and/or is unwilling to fight for a leadership role in a change it endorses is unlikely to make a valuable contribution to this demanding change.

This small-scale research begs the question of why professional perspectives were not perceived as worthy of research in a multidisciplinary field in which professionals wield considerable power and influence.

The concerns and hopes of long-term hospitalised service users being resettled in the community (Dean et al. 2003)

This small-scale study (n=50) focused on the hopes and fears of long-term residents of a psychiatric hospital in Cambridge, England prior to moving out

into the community. It incorporated service users as co-researchers for the first time in their lives. The study aimed to:

1. Provide the link nursing staff responsible for preparing the move to community living and the interviewees themselves with a profile of the hopes and fears of this group of institutionalised patients;
2. Involve users as co-researchers; all of the interviewees were mental health service users with experiences of hospitalisation, mostly at this hospital, who had been trained to carry out the interviews;
3. Demonstrate the individuality of each interviewee and highlight to the link staff the need to treat them as individuals with dignity.

The study was conducted as the Masters dissertation of the first author and as the first foray into research for the second author, who was/is also a service user. Eight service users with repeated experiences of hospitalisation, but living in the community at the time of the study, volunteered to participate in the training, which addressed such things as how to respond to reliving experiences during an interview, what (not) to tell the interviewees, how to encourage the interviewees to respond and how to turn the experience into a positive one. In addition, the training included skills for listening, asking questions, recording, approaching the link staff and managing issues of power, and an explanation of what research is and how a research interview differs from an ordinary conversation. For the interviewees, it inevitably included a comparison of the person they were when in hospital, the person they were before any hospitalisation took place, and the person they are now. At the same time, for the interviewees it meant comparing the person they were prior to hospitalisation, the person they are now, and the person they would like to be when living in the community. After the interviews, individualised profiles were prepared and a letter written in an informal, friendly manner was sent to each interviewee detailing their hopes and fears, strengths and problematic areas as distilled from the interview. The link staff were positively surprised with how ready patients were to be interviewed, how the interviews seemed to lift their morale, and how much the staff learned from this study. The user co-researchers were proud of the skills they learned and the payment they received for their work; none of them felt worse about their past life than they did prior to this project. Since this project, they have also participated in a number of dissemination opportunities. This research project provides a useful example of how a sensitive approach to what was a painful comparison for each group of users and the fears of the link staff can result in a positive self-evaluation and be a growth experience for all involved. The study paid considerable attention to ethical issues by securing debriefing options for both interviewees and interviewers and also by ensuring that participants will benefit directly from the study.

The lived experience of the actual move from institutional to group home living
(McCourt Perring 1993)

Carried out with a sample of resettled inpatients from the same North London hospital as the one in which the research on social workers' perspectives was conducted, this study took an anthropological approach to research. This meant attempting to be immersed in the life of the inpatients prior to their leaving the hospital and especially after their resettlement in a group home in the community for a period of eighteen months. Conceptually, the issue was perceived as one of a major life transition, and the researcher was interested in the lived experience of the move from the perspective of the residents and the staff group; in the threats and opportunities the change has exposed them to; in the rituals used in the process; and in the individual and collective responses to it. In addition to the unstructured immersion – being there at different times for a couple of hours, being available so that anyone could approach the researcher, asking people general questions – the researcher also put some specific questions to both residents and staff.

Of particular interest for this chapter are her observations of the model of the group home as a substitute family. However, it is a family in which ordinary age-related relationships are inverted because of the differences in the social roles of the residents and the staff. Thus issues of dependency and independence, choice, kinship and adulthood are more central to understanding life in the group home than the residue of mental illness. The research also sheds light on changes in the social and self-identity of the residents. The key comparison here is between service users' lives in two different settings within a short period of time, plus the impact of the move on the staff and the organisational model of living.

Recovery research

Recovery from mental illness came to prominence in the field of mental health towards the end of the 20th and the beginning of the 21st century, when the concept received a new meaning. Instead of meaning a reversion to the pre-illness state, it came to imply a focus on living well with the illness and living beyond the illness (Davidson *et al.* 2005). This in-depth change originated with activist users of mental health services in the US (Deegan 2001, 2005), and was taken up by users and like-minded professionals in Canada, Australia and New Zealand and, in a more recent development, in a number of European countries. The new meaning of recovery challenges a number of key assumptions made by professionals and in turn accepted by most other stakeholders (such as the majority of users, family members, politicians, and the general public). The two tables below illustrate the significance of the findings of the longitudinal studies on recovery and highlight this point.

Davidson *et al.* (2005) propose that the common elements of recovery are as follows:

- Renewing hope and commitment;
- Redefining self;
- Incorporating illness;
- Being involved in meaningful activities;
- Overcoming stigma;
- Assuming control;
- Becoming empowered and exercising citizenship;
- Managing symptoms;
- Being supported by others.

Researching recovery is a challenge because it is a concept with a new meaning that has implications for worldviews and the direction of policy and professional practice. This complexity also implies the involvement of a large number of stakeholders, each with its own interest in the concept, making it unlikely that one research model would be sufficient.

However, longitudinal research conducted in Europe (Ciompi 2005) and psychiatric reform in Italy (Ramon 1990, see also Dell'Acqua *et al.* 2005) imputed the same meaning, without using the term 'recovery', as part of a much larger sea change in the field of disability which constituted a move away from a cure and towards the social model of disability; the strengths that this group of people possess; and developing their ability to take control over their lives. For this to happen a parallel change had/has to occur in the attitudes of the lay public and professionals, and the latter must also acquire enabling skills.

The acceptance of the viability of recovery within mental health was greatly facilitated by the publication of the findings of longitudinal research of people with schizophrenia carried out in a large number of countries (mainly continental Europe, Japan and the US) (Harding 2005). These studies followed epidemiological methodology in so far as they investigated cohorts of people who resided in psychiatric hospitals and followed them for many years both inside and outside of the hospital. Some variables that should be noted include changes in degree of severity and number of psychiatric symptoms, number and severity of mental health crises, hospitalisation episodes, social functioning, self-care, taking up education and employment, physical health, economic costing and cost effectiveness. Some, but not all, of the studies have also included users' satisfaction as a variable.

The follow-up period for the studies varied from 1 to 37 years, with the majority around the 20-year mark. Moreover, most of the studies took place prior to the introduction of a hospital closure and de-institutionalisation policy in the countries in which they were conducted, meaning that these cohorts did not benefit from governmental support for rehabilitation and community living.

While most psychiatry textbooks continue to state that about 25% of those to whom schizophrenia is attributed recover sufficiently to live well with the illness outside of a hospital ward, these studies indicated that recovery takes place for between 50% and 68% of the people in this category. Although the findings from the European studies have been known since the late 1970s and were published in English, it took the publication of a comparative study of hospitals in Vermont and Maine to alert the mental health world to the phenomenon of recovery (Desisto *et al.* 1995). This specific comparison highlighted that it was the more recovery-oriented regime of the mental health services in Vermont, both inside the hospital and in community services, which led to better outcomes than those obtained in Maine. Thus it would seem that the appeal of a direct comparison using a simple research methodology, but one which yielded plenty of varied data, plus the aura of cultural credibility given to a US study by mental health professionals all over the world enabled the case for the new meaning of recovery to be taken seriously.

Table 1: Long-term studies of Schizophrenia. (Harding and Keller, 1998)

Study	Sample	Years	% Recovered/ Improved**	% Socially Recovered
Bleuler, 1978	208	13	53-68	46-59
Hinterhuber, 1973	157	30	75	77
Huber, 1975	502	22	57	56
Ciampi, 1976	289	37	53	57
Kreditor, 1977	115	20	84	
Tsuang, 1979	200	35	46	21
Marinow, 1986	280	20	75	
Harding, 1987	269	32	62-68	68
Ogawa, 1987	140	22.5	56	47
DeSisto, 1995	269	35	49	

Users from the following countries were included: Austria, Bulgaria, Germany, Japan, Lithuania, Switzerland, United States (2).

** Recovered = no further symptoms, no use of psychotropic drugs, living independently, working and relating well to others, with no behaviours that are considered to be odd or unusual.

Significantly Improved = all of the above, but one domain of functioning.

Socially Recovered = living and behaving in a socially acceptable way, with symptoms.

Table 2: What can be learned from the longitudinal studies? (Harding 2005)

- Diagnosis and time: not as strong a predictor as previously thought;
- Symptom course – ever widening heterogeneity with early fluctuations and later decrease of virulence;
- Predictors of long-term outcome weaken over time;
- Restoration of social functioning;
- Regaining the ability to work;
- Psychopharmacology and the assumption of lifetime use not supported;
- Many pathways to improvement and recovery;
- Rebalancing the picture for Schizophrenia: very different from findings of short term studies.

These findings challenge the belief that schizophrenia is inevitably chronic; a lack of belief in recovery and an ordinary life as a realistic possibility for a large percentage of those suffering from it; and the inevitability of having to be on medication for life. They reveal the need for a fundamental change in mental health policy and practice, and highlight the value of the psychosocial approach to living with and beyond schizophrenia. Thus they also challenge the current professional hierarchy which places psychiatrists at the top of the professional pyramid, presenting instead a case for professions with a clear psychosocial tradition – occupational therapists, psychologists and social workers – to lead multidisciplinary teams. While they do possess an ethical dimension in that they look for the best interventions for patients, the studies lack the in-depth dimension that qualitative research could have provided, and which is in evidence in a number of the other examples given in this article.

It took another decade for recovery to become official policy in most English-speaking countries (the Freedom Act in the US; the UK, Australia); with this change came ongoing attempts to implement recovery in everyday mental health services, and to do so through user-led projects (Deegan 2007). At this stage recovery research branches out in several directions: narrative research on changes in users' wishes; research on users' perspectives on whether services do in fact offer a recovery-oriented practice; action research which includes the introduction of recovery-focused personal planning programmes and the evaluation of their effectiveness by users and service providers (peer support programmes, for example); research on individual outcomes related to the new way of working, including self-perception and identity; gauging the attitudinal change of users and service providers at different levels; researcher training programmes for users which enhance their self-management abilities and assertiveness in contacts with professionals (Straughan and Buckenham 2006, see also Deegan 2007). Comparative dimensions are prominent in all these studies, and include the following: subjectively and objectively com-

paring users to what they were before the specific intervention, differences in what services offered before and after the introduction of recovery principles; differences in costing before and after these changes, with changes measured in terms of quality of life as well as the move from financially expensive services (hospital, secure units) to less costly services (the use of peer support by ex-service users who are paid less because they are not qualified professionals, or services provided by voluntary organisations); and changes in symptomatology and the ways users manage the symptoms.

Recovery research needs to address a number of stakeholders, including users, family members, direct service providers, service commissioners, policy makers, budget controllers, politicians, the media and the general public. The question of whether one type of methodology (even if the methods themselves vary) is suitable for the interests and needs of these rather different stakeholders therefore arises. Regarding the value base of recovery research, a question that needs to be addressed is Is it possible to experiment with different methodologies while retaining a commitment to research that enhances recovery options?

Recovery-oriented organisational and individual change

Emilia is an EU framework 6 project focusing on mental health and social inclusion. It is taking place at eight European demonstration sites from 2005 to 2010. I am involved in this project as a researcher. The eight sites of the project are Bosnia (user group in Tuzla), Denmark (research centre in Jaeland), England (a social work and mental health university faculty in London), France (a hospital-based site in Paris), Greece (a rehabilitation and group home centre in Athens), Norway (a hospital and day centre in Bodo), Poland (a large hospital in Warsaw), and Spain (a hospital in Barcelona). Several other countries have been involved in the project's training and/or research aspects (establishments in Denmark, Finland, Lithuania, Slovenia and Sweden). It provides more than 200 service users with serious mental illness (schizophrenia and bi-polar disorder of at least two years duration) with selective training related to recovery and employability and support in finding unpaid or paid work.

One strand of research for this project looks at changes over time in the participating organisations, based on the assumption that expecting recovery-oriented change in individual service users is insufficient to enable recovery; organisations that facilitate this process must also change their attitudes and behaviour. To obtain copious, well-triangulated data, three methods were applied in investigating the organisational facet:

- Focus groups of the steering group responsible for the project in each site;
- Observation of key meetings;
- Documentary data.

These measurements, as well as evaluations of individual users, are repeated once a year to look at the dimension of change.

The data from the first comparison (year 1 and year 2) highlights that for most of the groups the major change has been the active involvement of the users in the project, be it in the steering group itself or in co-training, co-researching, or running their own groups. The participants in the focus group commented on how surprisingly powerful the effect was for the non-user members, and how it has led them to reconsider what users can offer and to re-examine how they could work with them in the future.

However, it was also recognised that some participants in the steering groups continue to sit on the fence in terms of their attitude towards user involvement, and continue to focus on what users cannot do and to treat them mainly as disabled/'at risk' people. Those who sit on the fence seem to take a defensive position, which is linked to professional territory or power.

Concerns about the sustainability of the project's achievements are centred on the time needed for achieving long-term change among employers and issues such as scarcity of human resources and funding.

This research project has a clear commitment to improving the recovery options available to users, and to do so with their active involvement. Its research methodology embraces both quantitative and qualitative research, and pays attention to the different perspectives of users and professionals. However, a number of factors (the need to centralise the methodology and the methods; the need to report in a highly regimented way to the sponsor [the EU]; and the sheer complexity of working with teams coming from a number of very different cultures [even though all are classified as European]) have led to the conflation of differences and context-specific meanings when presenting the research findings. It is only in informal reporting or site-specific presentations that the variability receives full expression. Paradoxically, one of the strengths of the project – the high degree of autonomy given to each site – is also one of its key weaknesses, as it allows some sites to get away with substandard efforts and achievements.

Concluding remarks

While each of the studies presented above has its shortcomings (small sample size, narrow and therefore unrepresentative cross-sections, use of only one method, choices made by researchers not explained, focus on either the local or on the global), they serve to underscore the variety of research methodology that appears in current comparative mental health research. They also indicate the presence of ethical concerns, which were present in each study, albeit in varying degrees.

Longitudinal research on recovery illustrates the positive power of relatively traditional research to change attitudes and perceptions held by mental

health professionals throughout the world, but also demonstrates the power of the credibility given to a single country (the US). Most of the studies make a case for the use of mixed qualitative and quantitative methods within an interpretative framework in comparative mental health research.

All of the studies offer a comparative perspective, be it of an individual in the past and in the near future; of different teams; of different group homes; of different populations of hospitalised patients within the same country or in different countries; or of different demonstration sites in different countries. This diversity highlights the wealth of possibilities encompassed in the concept of comparative research and that comparison is a cornerstone of most research in mental health and beyond.

Operationalisation and feasibility seem to militate against a more in-depth, comprehensive approach to research, yet remain an unavoidable aspect of empirical research. Working out the conceptual framework of a comparative study and adhering to its methodological implications can prevent excessive focus on operationalisation and feasibility. Having a team of researchers with a shared perspective requires considerable effort by the team leaders and its members, as it often happens that the degree of shared understanding is deceptive and this knowledge evaporates quickly.

Although a high level of variability and diversity are a feature of the cross-national studies described above, none of them achieves the ideals of equal understanding and combining local and the global perspectives. It seems that we in mental health have yet to become cosmopolitan.

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Chapter 6

Critical Action Research: Transferring Lessons from the Streets of New Delhi to the Streets of Durban

Vishanthie Sewpaul and Ingrid Scharer Osthus

Introduction

South Africa is facing numerous socio-economic challenges, including poverty, unemployment, unequal distribution of wealth and power, HIV/AIDS, substance abuse, child abuse and child neglect (Bond 2004, 2005, see also Sewpaul 2006). Closely linked to these challenges is the phenomenon of street children. This continues to play a major role in the relegation of African black children to the bottom rungs of the socio-economic order. It is estimated that there are 250,000 children living on the streets in cities throughout the country, with as many as 10,000 living on the streets in the greater Durban area. The majority of them are African black (www.streetchildren.org.uk/reports/SouthAfricaChild.doc). The emphasis is usually on male street children because they tend to be more visible. As a result, the plight of girls living on the streets is often neglected or overlooked. Girls living on the streets might be taken into prostitution, and their identity might be that of sex workers or prostitutes instead of street children. Street life denies children and youth what Article 27 of the Convention on the Rights of the Child (CRC) defines as 'the right of every child to a standard of living adequate for the child's physical, mental, spiritual and social development' (1989).

This chapter describes a participatory critical action research project involving social work students and children, both male and female, living on the streets of Durban. The background for this project is a participatory action research (PAR) programme led by the chapter's main author, Vishanthie Sewpaul, over a period of three years. The initial research entailed a series of focus groups and workshops with children from the streets and with service providers in the field. The research found that these children had experienced multiple traumas and faced serious difficulties and hostility at home, on the street and in the services that are supposed to help them. The following quotation from one of the children is a severe indictment of society and highlights the country's failure to protect its children: 'Ma'am, sometimes we talk about it in the shelter and we compare – home, shelter, street, and we don't know which one is worse.'

Some of the more salient implications of the initial research for policy and practice include:

- The need to protect children from the streets, as they are subjected to a great deal of violence both on the street and in street shelters, and to sexual abuse, rape and prostitution;
- The need for support and counselling; children from the street are often the first to witness violence on the street. Yet, in light of the popular notion that they are 'streetwise' and resilient, they are not deemed vulnerable, so their needs go unnoticed and unmet e.g. it does not occur to service providers that children might need trauma debriefing, even in the case of very distressing events, including rape and murder on the street.
- The understanding that 'street children' are children and want and need the same kind of love, care and compassion afforded to their more privileged counterparts, in addition to the fulfilment of their basic needs for nutrition, shelter and clothing. Indeed, given that the majority of children from the streets have been betrayed by the very systems that were supposed to protect them – family, school, religion, community – one could legitimately argue that their need for love, care and validation is even greater if they are to develop some kind of trusting relationship with the adults around them.
- If given the opportunity to have a voice, children can be trusted to make sound and rational decisions.
- The need for qualified personnel and for the training and development of service providers in the field of street children;
- The majority of children end up on the street on account of external structural factors that engender unemployment, economic exclusion and poverty; these structural factors need to be directly addressed.
- The need to develop sustainable livelihood programmes within the life space of the children. One can't simply wish these children off the street, and reunification with their families under current socio-economic circumstances often proves to be very difficult.
- Responses to the presence of children on the streets from city officials, especially during major events and conferences, are counterproductive (primarily rounding them up and detaining them in places of safety against their will); they do not produce any benefits for the children or the public. On the contrary, these responses generate a great deal of anger among the children and among child rights activists.

These conclusions informed the participatory critical action research programme¹ discussed in this chapter. The inclusion of the children as active



¹ The project was conceived under the direction and supervision of Vishanthie Sewpaul. The following students from the University of KwaZulu Natal (UKZN) who undertook their field placements in the project were instrumental in making the vision a reality: Ingrid Scharer Osthus, Christopher Mhone, Sithembile Mbhele, Emma Sibilo and Sarisha Palavar. We are indebted to the following organisations that provided funding, without which it would not have been possible to initiate and maintain the project:

participants in the 34th Global Social Work Congress, which was held in Durban in July 2008, provided an opportunity for the strategic entry of the children into the programme. We wanted to take advantage of the Congress as an opportunity to develop a model for combining the hosting of conferences with responses to the realities of our context, with the long-term goal of launching a street children's development bank in Durban. To this end, two students undertook a study tour of a well-established project for street children and a development bank in India. This chapter describes the lessons they learned and how the international transfer of knowledge has helped the critical action research and practice ideals for work with children from the streets of Durban. It describes a work in progress, thus the focus is on processes rather than an evaluation analysis of the achievement of objectives. This chapter first identifies the various categories of children from the street, and then describes the research paradigm and the emancipatory social work education underscoring the work with the children. It then proceeds to provide a description of the critical action research.

Categories of 'street children'

USAID defines four major categories of 'street children' (Kanth 2004)²:

- A child *of* the street: Children who have no home but the streets, and no family support. They move from place to place, living in shelters and abandoned buildings.
- A child *on* the street: Children who visit their families regularly and might even return every night to sleep at home, but spend most days and some nights on the street because of poverty, overcrowding or sexual or physical abuse at home.
- A child as part of a street family: These children live on sidewalks or city squares with the rest of their families. They may be displaced due to poverty, wars or natural disasters. The families often live a nomadic life, carrying their possessions with them. In these cases, children often work on the streets with other members of their families.
- A child in institutionalised care: Children in this situation come from a situation of homelessness, have been provided with temporary institutionalised care, and are at risk of returning to a life on the street.

In this project, it was rather difficult to differentiate children *of* the streets from children *on* the streets. The majority of the children involved in the



the South African Netherlands Partnership for Alternatives in Research and Development (SANPAD); the National Lotteries Board and ABSA Bank.

² The quotation marks reflect that 'street children' remains a contested, though commonly used, concept. While some see it as labeling and stigmatizing, others see it as a realistic description of the children's life world.

project have families, either immediate or extended. However, they spend their days and nights on the pavement and under the overhangs of buildings – which is characteristic of children *of* the streets – even though they do have infrequent and sporadic contact with their families. None of the children with whom contact has been made are part of street families; some have intermittently been part of institutionalised care. Both children *of* and *on* the street are vulnerable to abuse, exploitation and stigmatisation, and it is ethically unacceptable for this differentiation to be used to determine the allocation of funding, even if children *of* the streets are deemed to be more vulnerable and therefore more in need of public support and funding than children *on* the street. In this chapter, the term ‘children from the streets’ will be used for both children *of* and *on* the streets. Having worked intensively with the biographies of these children, and in some case accompanying this work by home visits to their families, it is possible to conclude that the majority end up on the streets due to intolerable push factors linked to poverty, unemployment, and abuse in their families and communities of origin, rather than because of pull factors associated with the street. While one may think of children from the street as representing one of the poorest and most marginalised groups in society, it is rather tragic that they are viewed as ‘rich’ by the standards of their families of origin. The pull of the street seems to play a role in retaining them once they have been socialised into street life.

Critical action research and emancipatory social work

The current research with children from the streets is informed by participatory action research (PAR), in particular by critical action research within the PAR paradigm. Reason and Bradbury (2001) define action research as:

A participatory, democratic process concerned with developing practical knowing in the pursuit of worthwhile human purposes, grounded in a participatory world-view. It seeks to reconnect action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people. (*Op. cit.* 1)

Action research is associated with hands-on, small-scale research that involves practical and real world problems and issues. It is directed at producing change and is based on the premise that ‘research that produces nothing but books will not suffice’ (Lewin in Denscombe 1998: 58); it seeks ‘action consequences rather than the reflective truths of research’ (Bhana 2002: 228). Participatory action researchers accept that research work is pragmatic and contextual by its nature, and do not seek value-free knowledge. The emphasis is on the empowerment of the most marginalised and oppressed groups in society, with the aim of uncovering truths *with* people, rather than *about* people. PAR involves the participation of people in the research process, including

the encouragement of equal relationships between researchers and participants, and is cyclical in nature (*ibid.*). It involves a feedback loop in which initial findings generate possibilities for change, which are then implemented and evaluated as a prelude to further investigation (Denscombe 1998). These cycles of action and reflection are central to action research. Precedents exist for using action research to address social, political and power issues within a variety of fields: adult education, teacher education, social work, human resource development and community development (Anderson *et al.* 1994, see also Metcalfe and Humphreys 2002, Noffke 1997).

The purpose of participatory action research is to contribute to both practical and theoretical discourses, and to underscore both of these with democratic development. A theoretical discourse is oriented towards *understanding* something, while a practical discourse is oriented towards *doing* something. By differentiating between theoretical discourse and practical discourse, the main difference between descriptive research and action research comes to the fore. The arena of descriptive research is almost exclusively theoretical discourse, while action research also enters the arena of practical discourse. One of the major challenges faced by action researchers is how to translate what they know from theoretical discourses into practical discourses and how to use lessons from practice to develop further theoretical discourses – in other words, what can be done to narrow the theory-practice divide and create and maintain the theory-practice-theory or the practice-theory-practice development loop.

Critical or emancipatory action research (PAR informed by critical theories and approaches) is unashamedly political and seeks to 'develop participants' understanding of illegitimate structural and interpersonal constraints that prevent the exercise of autonomy and freedom' (Humphries 2008: 75). Of central importance to this study was the use of emancipatory pedagogical strategies with both the students and the children based on the theoretical and practice frameworks of Paulo Freire (1970, 1972, 1973), Antonio Gramsci (1971) and Henry Giroux (1983, 1994, 1997, 2006, 2008). Much of the reflexive discussion during supervision – a major context for the reflexive cycle of action-reflection-action – was directed towards heightening awareness among students about structural sources of oppression and exclusion (Freire 1970, see also Mullaly 2003, Sewpaul 2003, Dominelli 2004) and/or privilege (Giroux 2006) at all levels of society, including how global factors and globalisation have an impact on people's lives. This was considered to be of intrinsic value for the students, and it was also hoped that they would be able to transfer this mode of thinking and working to the children.

As Gramsci (1971) asserted, one of the central tasks of social work educators is to help students transform common sense into good sense by subjecting taken-for-granted, common sense assumptions of the world to critical interrogation. All people, Gramsci believed, hold the faculty for such a transformation (*ibid.*). 'Education,' he states 'has a major role to play: internally

vis-à-vis the knowledge to be disseminated to students and externally *vis-à-vis* the awareness it should bring to citizens at large' (Stromquist 2002: 186). According to Giroux (2006), critical or emancipatory pedagogy 'works to shift how students think about the issues affecting their lives and the world at large, potentially energising them to seize such moments as possibilities for acting on the world and for engaging it as a matter of politics, power and social justice' (*op. cit.* 66). He proceeds to argue that:

The appeal here is not merely to an individual's sense of ethics; it is also an appeal to collectively address material inequities involving resources, accessibility, and power in both education and the broader global society while viewing the struggle for power as generative and crucial to any viable notion of individual and social agency. (*Ibid.*)

The message that students are given during supervision is that social work does have a role to play in bridging the gap between the global and the local (Ferguson 2008, see also Ife 2000, Dominelli 2004, Haug 2004, Sewpaul 2006). The problems experienced by people whom social workers work with are, to a large extent, linked to structural sources of oppression, exclusion and poverty at the local, national and global levels. If adequate solutions are to be found, they need to engage with multilevel structural forces. The students are encouraged to use Freirian strategies of consciousness raising and praxis (Freire 1970, 1972, 1973) to get the children to understand the impact of structural oppression; to externalise the causes of their problems; and, by freeing themselves from internalised oppression, to help them develop the confidence and courage to engage constructively as citizens (Giroux 1994, 1997, 2006, see also Sewpaul 2003). This strategy serves to enhance – rather than abdicate – their responsibility; helps them understand that being on the street 'is not their fault'; and helps them explore alternatives and support advocacy initiatives. The students have played the role of the public intellectual (Gramsci 1971) in educating the children about the benefits of a Basic Income Grant (BIG) in South Africa. The children are currently in the process of collecting signatures for a petition in support of a BIG that will be sent to the South African government. Writing about research within the critical framework, Henning *et. al.* (2004) contend that 'of late, political activism... Has become part of the research process... Researchers are no longer satisfied with predicting or even understanding the researched, but want to address social issues in and through their research as well' (*op. cit.* 23).

Social work educators must link research, knowledge and learning to the world of action and engagement and enhance students' enthusiasm about thinking critically about the world that they live in and about their capacities to confront the range of symbolic and actual relations of power that shape their lives and the lives of people that they work with. Over and above the mastery of knowledge and specific skills, this can best be achieved by working

with the biographies of students; validating their life experiences; helping them understand the links between the personal and political dimensions of life; and helping them re-author their own life scripts when necessary so that they gain the confidence to become and remain engaged citizens. All of these things have characterised the supervisory relationship with the students³. More salient for the normative, person-centred and ethical nature of social work, Giroux's (2006) observation that educators 'need to resist the seductions of a narrow understanding of academic labour with its specialised languages, its neutralization of ideology and politics through a bogus claim to objectivism, and its sham elitism and expertise rooted in all the obvious gender, racial, and class-specific hierarchies' (*op. cit.* 74) must also be heeded. Stromquist (2002) concurs that:

A formidable concern for all progressive educators will be to defend those principles that make real democracy possible – a sense of solidarity and constant effort toward reduction of social inequalities – and to engage in serious discussion of when and how principles of 'efficiency', 'client choice', 'flexibility', and 'competitiveness' work against the construction and maintenance of democratic societies. (*Op. cit.* 187)

Participation and power in critical action research

The success of critical action research depends on the participation and engagement of people in the research process, with PAR researchers paying particular attention to power issues between researchers and participants. While every effort must be made to maintain egalitarian relationships, it must be recognised that, more often than not, skewed power relationships exist, especially when researchers are working with marginalised and vulnerable groups, as in the case of children from the street. The more researchers are aware of this, the more conscious their efforts aimed at facilitating more egalitarian relationships will be. They need to understand what is meant by participation, and acknowledge that all too often participation might take the form of tokenism or cooption (Ife and Tesoriero 2006).

While participation is the ideal in this programme, the reality is that children often do not feel sufficiently empowered to participate as equals. This was made evident both in the group sessions and in the workshops, where the researchers often lent direction to both content and process. Also, funding



³ Vishanthie Sewpaul had the opportunity to teach the students working on this project (for their 3rd year field supervision) during their first year of study. As part of the endeavor to help students understand the relationship between the personal and the political/the micro and the macro, all first year students were required to develop their full biographies and to understand how the biography provides possibilities for the re-authoring of the self. This theme was picked up and reinforced during the field supervision with these students.

prerequisites regarding the upfront specification of project aims and objectives meant that the overarching action research was predetermined by the researchers, with the participants expected to adapt to this agenda. Within the limitations of the predetermined agenda, attempts were made to ensure that processes are as inclusive as possible. This is an enormous challenge. By virtue of being university staff with the professional title of 'professor' or university students, those affiliated with social work are deemed to know more and to be in positions of power. The sessions were guided by teachers and students, but were actually led by the children themselves during intensive group work sessions and training workshops. This helped to offset the imbalance of power to a certain extent, and the researchers found that the children relished the idea of being the ones doing the teaching.

Social work educators, practitioners, researchers and students often avoid discussing power relationships, as power is imbued with negative connotations. Foucault (1978) argued that power is complex and multifaceted; it is dynamic, changing, and exercised from multiple and changing perspectives. One needs to recognise that power can be used constructively and positively, not only negatively. Critically reflecting on issues of power can make it possible to challenge and deconstruct assumptions about everyday practices. A self-reflexive examination of power can provide an overview of the ways in which social workers exercise power as researchers and practitioners. Allowing people true inclusion and participation and confronting power positions could challenge the identity of social workers as professionals. Although social workers would like to believe that they work in an empowering and participatory manner and partake of equal relationships, there is often a lack of reflexivity, which allows them to forego the painful process of confronting and challenging the paternalism that often exists in their identity and their work. This tendency is probably particularly strong among those who work with children. Social workers inevitably see them as needy and themselves as saviours. If they begin to see them as capable, responsible decision-makers, social workers' perception of their own importance and excellence might be threatened. Social workers are generally socialised into the dominant positivist paradigm, with rarefied notions of the social worker as the objective, neutral, outside expert who knows best. All of this is actually contrary to the principles and prerequisites of critical and radical approaches to research and social work intervention. Given the hegemony of the dominant paradigm, it is not surprising that 'participation' has been diluted to a noble expression in speeches and to tokenism, cooption and consultation in practice. However, this programme would reveal that, under certain circumstances, the will to participate among children and the willingness to relinquish power on the part of service providers become wholly feasible, and that when such participation is realised, it contributes to a reaffirmation of human dignity and enhanced levels of trust among children and service providers.

Learning across continents

In preparation for this project, two students (Ingrid Osthus and Christopher Mhone) went to New Delhi in India to visit an organisation called Butterflies that does groundbreaking work with children living on the street (www.butterflieschildrights.org/profile.asp). Butterflies has a number of programmes, including a bank started by, for and with the children called the Children's Development Bank (Chu 2008). The key lesson that the researchers brought back from their experience with Butterflies is related to an unfaltering focus on child participation and the handover of real power (including the management of money) to children, and the amazing results that can be achieved with this kind of truly empowering approach. Ingrid and Christopher brought back the following key message: *If, firstly, children can do this, and, secondly, street children – then nothing is impossible*⁴.

As in the case of the children from the streets of Durban, the primary factor in the phenomenon of street children in New Delhi is poverty. According to Chu (2008), India has the largest population of street children in the world; estimates put their number at 10 million, with 100,000 youngsters living on the streets of New Delhi. Children on the streets are generally between the ages of 10 and 18. The Butterflies project in New Delhi strictly limits its services to children under 18 years of age. The outreach work conducted in Durban revealed that youth in the 18–25 age group who have been living on the streets are also vulnerable, and could be prone to engaging in criminal activity. No longer little and cute so as to be able to elicit the sympathy of people, they find it difficult to access money and food by begging. In addition, as they have little education and few marketable skills, and generally do not have identity documents, it is difficult for them to secure employment. They are a group that seems to have grown tired of the streets; some of them expressed a need for stability and progress and particularly asked to be included in the project.

Despite some differences between the two contexts, the lessons brought back from India are invaluable; they reinforced the researchers' fundamental paradigms for adopting critical, emancipatory and participatory approaches with children and lent hope about making the project's processes and objectives a reality. Part of the major challenge was getting the children in Durban, who are more acquainted with the top-down dependency mode of working,



⁴ The hope that emerged from the visit to India is best captured in the words of Ingrid: 'For a student, still idealistic and not (yet) disillusioned by the hardships of the real world, it was an experience that fuelled the determinism of contributing to change, the courage to work towards a better reality and the hope that this is possible and not just a naïve dream'.

to begin to believe that they are the main actors in the project. The project in New Delhi – like the Durban project – is built on the principles of child participation in decision-making and activities and on instilling in the children a sense of dignity, self-respect, self-confidence, self-reliance and hope for change. These principles underscore the capacity building of all participants and the income generation programmes. The project in Durban is in its embryonic phase, as it only began in 2008, while Butterflies has a twenty-year history. It would appear that the children at Butterflies are far more socialised into independence than the children in Durban⁵. Despite the stated values and emancipatory epistemologies of the Durban project, shifting participants from a dependency mode of functioning has proven to be very challenging. In one of her reflections, Ingrid noted:

In Delhi we visited a well-established organisation that had been working on the streets for about 20 years. It was amazing to see what they are doing now, but it was very hard to understand how they got where they are. We came to the streets of Durban and wanted to start something new. Never mind all the theoretical discussions one can have on the topic of participation, but how do we actually, practically *do* it? It was not easy. We had no experience in stepping down so much to facilitate decision-making by the children, and the children, too, had no experience in being involved to that degree. In my naïve mind, I had maybe expected that they would eagerly grab the opportunity, but the reality was that participation takes skills and training, and it did not happen as easily as expected.

One of the ways to try to infuse hope for a truly alternative, emancipatory paradigm in the Durban children was to show the children a PowerPoint presentation of how Butterflies operates. The pictorial depiction, which included child bank managers, children managing their own accounts and ledger books, children's capacities to invest and borrow money from the banks and descriptions



⁵ This is an area that requires further exploration. We are not certain what political, economic and socio-cultural factors might play a role in the seemingly high levels of participation and self-reliance among the children in New Delhi compared with the children in Durban. It is possible that a short stay and observation of a period of one month contributed to seeing Butterflies in an idealized manner. There is also the possibility that the cultural ethos of non-violence, respect for the other and the value of self-help linked to the philosophy of *Karma* that permeates Butterflies might have an influence. Time might also be a factor; Butterflies is well-established, with a twenty-year history, and has allowed its cultural ethos to evolve over time. While New Delhi is regarded as the crime capital of India (The Times of India, 2009) children linked to Butterflies who undertake regular money transactions on the streets are remarkably safe. In Durban, children could be killed for having as little as R2.00 (about US\$.20) on them. While we would like to replicate the street bank system, we have definite concerns about the safety of the children, so we might have to modify how the bank operates in Durban.

of the financial independence of the children, proved to be a rich source of reflection, discussion and hope for the children of the streets of Durban. One of the sources of reflection for the children following the PowerPoint presentation was the perceived difference in aptitude between the children in New Delhi and themselves. Expressing a typical stereotype (Indians are cleverer than African blacks), one of the children said, 'but they can do all that because they are clever, we can't do all that.' This sentiment did not go unchallenged by the other children. In the discussion that ensued, the children expressed the opinion that the children in New Delhi were just like them. They also did not have the support of their families; they were poor and living on the streets; they had experienced violence and sometimes abuse at the hands of the police; and they were also struggling to get by. Girls in particular highlighted abuse at the hands of the Metro Police, who would confiscate their belongings and ask the girls for sexual favours in order to get them back.

The children concluded that if the children of the New Delhi streets could do it, then they could too. They expressed the view that it was somewhat comforting to learn that children in other countries were in the same plight as they are, as it made them realise that they are not alone. The children of the streets of Durban were intrigued by the idea of children as bank managers, and the presentations and discussions provided hope for their futures and the development of their own bank. Enthused by the success of the street children in India, the children in Durban have engaged in income generation projects that they are struggling to sustain, and have been discussing mechanisms by which they might develop their own bank. Having obtained funding, the idea is to send one of the youths from the streets of Durban to Butterflies⁶ in 2009 so that he can experience its success firsthand and share his experiences with the other children. But it should come as no surprise if, even at that point, the children remain sceptical, as Christopher and Ingrid's experience points out:

We were amazed at what we saw at Butterflies. We could not believe our own ears when they told us about some of their programmes: Newspapers written by young journalists living on the streets and edited by young editors living on the streets. Health services where street children have access even to hospital care. And the Bank ... perhaps the most mind-blowing achievement of all! Street children are bank managers, street children form the committee that approves or disapproves loan applications. The bank is by, for and with children living and working on the streets. Just the thought of dealing with money with them is unconventional – to do it guided by a principle of child participation and handing over real power is extraordinary.



⁶ We are currently working with the Department of Home Affairs to help him access an identity document to facilitate this.

Students who had begun developing relationships with children on the streets of Durban (while Ingrid and Chris were in India) expressed disbelief about the level of trust and honesty that Ingrid and Chris reported from New Delhi. Nobody stole from the Bank. The Bank manager, who was a street child, could keep everybody's money for a time until it was handed over to an adult facilitator who deposited the money with a formal bank. He did not take money, and nobody else would attack him or otherwise take advantage of the situation and take money. The students in Durban could not imagine that this would be possible. The boys and girls that they talked with reported a lot of violence, including violence among the children themselves.

The expectation was that there would be huge differences between the realities of New Delhi and Durban. While some of this is true, some of it is based on prejudices about children from the streets. After spending a lot of time with some of the boys and girls of Durban, the researchers have noted a surprisingly high level of honesty. Nobody has stolen from them, despite many opportunities. They are to a large extent able to keep, plan and spend money together. It takes some training, faith and demonstrated caring on the part of the researchers – a caring borne out of an understanding of their life circumstances that allows them to set boundaries and deal with manipulation without giving up on the children. The children said that the experience of care and of being trusted was one of the things they appreciated most about participating in the project. They also talked about the validation that they experienced through their participation in the 34th Global Social Work Congress, which took place in Durban in July 2008. The children were active volunteers and proved to be efficient, reliable and trustworthy. One found a cell phone and another found some cash; both of them handed in the items. Their level of contribution to the Congress workshop on child participation, which they coordinated with the students, was impressive. After the workshop at the Congress, one of the children cried bitterly. Upon being asked what was wrong, he said '...I am not crying because I am sad; I am crying because I am happy'. He expressed the view that for the first time in their lives, they felt important, and could not believe the extent to which they were trusted, a view supported by the other children. The children have talked about the amazing experience of eating the same food as 'important overseas people'; they had perhaps anticipated different, somewhat lesser and separate facilities and were astounded that they shared everything equally with Congress delegates. It is the first fruit of what was observed in India – the children there were treated with dignity, and it fostered an attitude where trust can thrive. One of the mottos of the work in India was: A child is not an object of pity. Services provided for children are their right and not an act of charity.

However, the experience in Durban has shown that it is difficult to sustain enthusiasm and participatory ideals among the children, and how great the challenge of retaining a fierce adherence to the principles of self-reliance and

independence in the face of extreme deprivation is. The children in Durban were inspired by the fact that the children in New Delhi pay for the meals provided by Butterflies. However, they have yet to reach this level of independence; meals are provided at the weekly project meetings and the children receive help with groceries, and accommodation has been provided for some of them. The children are expected to behave responsibly; for example, in preparation for the Congress, they were asked the following question: 'You really want to participate in the Congress, but how are you going to help yourself remain sober to be involved?' The problem was that drugs (mainly glue sniffing) are a way of dulling the pangs of hunger and blocking out the cold nights – both substantial *unfreedoms* (Sen 1999). One of the recommendations that emerged was the need to provide accommodation for the children during the Congress. However, it was extremely painful to ask the children to go back to the streets after the Congress. This raised enormous ethical dilemmas for those involved, and the students – who developed even stronger bonds with the children during the Congress – were themselves traumatised over the possibility of the children returning to the elements on the streets.

The relationship between freedom, self-reliance and responsibility is a complex one. Sen (1999: xi–xii) argues that while individual agency and freedom are central to addressing all forms of social, economic and political deprivation, 'the freedom of agency that we individually have is inescapably qualified and constrained by the social, political and economic opportunities that are available to us' (*ibid.*). He contends that the removal of substantial *unfreedoms*, such as the lack of freedom to access food, shelter, health and education and to participate freely in the labour market, is *constitutive* of development. He posits that '...Economic unfreedom, in the form of extreme poverty, can make a person a helpless prey in the violation of other kinds of freedom' (*op. cit.* 8). It was also noted how notions of 'choice', 'independence' and 'self-reliance' have been appropriated by right wing conservatives, who would allow states to abdicate their responsibilities to the most vulnerable members of their populations. Global neo-liberal capitalism has dictated a path for social change where the market is seen as the ideal mechanism for solving society's problems. Solutions for social problems are framed in the depoliticised language of self-help, personal responsibility and self-reliance (Giroux 2008). Those involved in the project are aware that direct service provision, income generation and the pursuit of self-help might be construed as the reproduction of the status quo and structural injustices. However, in the absence of universal social security in South Africa, the range of choices is limited.

Challenging structural inequalities remains a concomitant goal when addressing the immediate needs of the children. Efforts have therefore been made to raise the consciousness of the children about structural inequalities, and their active participation in advocacy for a Basic Income Grant (BIG) for all South

Africans has been facilitated. Critical theory is often criticised for seeking to problematise rather than solve problems and for emphasizing problem identification rather than practical applications (Valentin 2006), and those involved in the programme do not want to fall into the same trap. They are therefore interested in hands-on action that would contribute to enhancing the quality of life of the children and challenge structural oppression and inequalities.

Strategies/methods

Of central importance in PAR are the cycles of action and reflection (Denscombe 1998, see also Humphries 2008). There were multiple sites of such cycles during the course of this labour- and time-intensive study. One site was the supervisory context between the university supervisor and the students. It is within this context that the action research and the critical approach underscoring it were discussed and consolidated. It was important that the supervisor and the students shared similar value systems and that there was a shared vision for the project.

As noted in the section on emancipatory social work education, the supervision attempted to provide for a cascade effect whereby the emancipatory approaches used with the students would be replicated in their work with the children. The supervisor also made several on-site visits and participated directly with the children, thus serving as a role model. In one of the earlier sessions, the supervisor facilitated the sharing of the children's life stories and attempted to use these to connect with the children's future aspirations – an experience that the students thought was a 'real eye opener'. Given that the work with the children is emotionally demanding, attention is paid to self-care and to the students' adoption of healthy life strategies⁷. Within the critical paradigm, discussions about 'race', nationality, class, gender, disability and sexual orientation and how these intersect with power, privilege, status, exclusion and oppression were the focus of attention. These were the key issues around which the students were required to write their biographies in their first year of study.

Another site was the students' engagement in a series of weekly meetings akin to the method of cooperative enquiry (Reason 1994, see also Reason and Heron 2001). The meetings served as a context to clarify each other's expectations as team members; engage in problem solving; clarify the overall objectives of the project and the week-to-week sessions with the children; plan



⁷ Apart from supportive supervision, to this end all of the students were required to read Robin Sharma's book *The Monk who sold His Ferrari* (Harper Collins, New York, 1999). Feedback indicated that it has had enormous impact on students' management of emotional trauma and that they have been using some of the life strategies from the book with the children as well.

the weekly group work sessions and workshops; reflect on each week's work with the children; and, on the basis on this reflection, plan further action. Supervision and reflexive journals helped the students to develop insights into how the work that they were engaging in intersected with their personal and professional selves, and how their own life positions might influence their relationships with the children and their capacities for reflexivity.

The weekly group sessions with the children over an (ongoing) one-year period constituted another site of action-reflection-action, with a two-fold process of reflection where the students reflect on what they were doing and help the children reflect on their actions in and outside of the group sessions.

A focal point was the development of a committee in March 2008 called the Young Leaders Development Committee (YLDC). The YLDC consists of a core group of children and young people living on the street. They are representatives from the different groups of children and young people living on the street in different parts of the city. The students, in collaboration with street outreach workers from *Umthombo*⁸, have been involved in street outreach in the city of Durban, slowly building relationships, getting to know the children and their issues and introducing the idea of a YLDC. The street outreach culminated in the election of the Committee. At four spots in the city where children and young people living on the street are located, 'local elections' were held. The children nominated themselves and each other, the nominees answered questions about whether they would be up to the challenge or not and they voted.

The Committee has approximately twelve members (it is a mobile population group, so the number is not completely static), who are democratically elected by their peers. The election process began with the requirement that everybody had to be below eighteen years of age, as the idea was to work with street *children*, as defined by legislation in South Africa. But they objected strongly to this requirement, and argued that the younger ones are new on the street and have less experience. Their objections were taken into consideration, so there are some Committee members over eighteen years of age. This was viewed as a strength, as it was desirable that the Committee have influence in its community, where the older ones could serve as mentors for the younger ones. By including some over 18s, the Committee gained legitimacy in its community.

After the elections were held, a team-building workshop was held on a weekend. There are divisions between children and young people living on the street, both between different locations in the city and within the same



8 *Umthombo* is an NGO with a long history of working with children on the streets. The street outreach workers from *Umthombo* have been an invaluable source of support in facilitating the outreach work of the UKZN student group. www.umthombo.org

locations, so the need for building group cohesion and a sense of togetherness and belonging was and continues to be great. The workshop also focused on dialogues about the desired outcome, motivation and the purpose of the YLDC. This was a point of departure for the process of weekly group sessions where needs were identified and creative discussions on alternatives were held.

The Committee meetings, which began in March 2008, continue to provide a space for ongoing dialogue and a critical discussion of needs, problems and solutions; for action based on the acquired awareness; and for training based on the identified needs of the group. The YLDC has been the focus of a conscientisation process, and a place for critical, reflective discussions among the children and young people living on the street. Through this experience, they learned that they have something to say and that they are worth listening to. In collaboration with the student team, the YLDC has been involved in engaging discussions on the children's life aspirations, planning, action and evaluation. Needs and actions were not identified upfront, but were allowed to emerge from the group. Issues that came up included shelter, income generation (and skills training linked to this), drug use and abuse by the police. Students did, however, identify certain issues that needed to be dealt with, as they believed they would be important in the conscientisation process. These included conflict resolution and discussions of inter-group violence, gender relations and the structural approach. Central to this was work with the narratives of the children, which reflect personal-political identity links. In helping the children develop their own biographies through the use of timelines (the historical dimension of their lives), genograms/family trees (understanding themselves within the micro context) and eco-maps (understanding the influence of broader socio-economic, political and cultural factors), attempts were made to help the children understand how external socio-economic factors contributed to them being on the streets. This often resulted in the need for intensive individual work, which was undertaken by the students. This included HIV/AIDS counselling; help with negotiating complex and often hostile health care systems in accessing anti-retroviral treatment; individual advocacy; dealing with unplanned pregnancies; help with finding jobs; exploration of family reunification; and the planning and implementation of income generation programmes.

PAR that adopts a practitioner-researcher approach provides a 'way to bridge theory and practice and solve problems through planning, action and investigating the results of actions' (Gardner 2004: 52). The overall goal of this project was the empowerment of children and young people living on the streets of Durban, with the following specific objectives:

1. The conscientisation of the children and young people living on the street in Durban about external sources of oppression and their potential to act on and change their situation;

2. Enabling identification of their life aspirations, critical reflection and action;
3. Creating the space, ability and opportunity for children and young people to have their voices heard;
4. Enabling action based on acquired awareness of self in relation to prejudice and discrimination – planned, implemented and evaluated by the children and young people living on the street.

One of the specific long-term objectives is to launch a street children's development bank via a series of processes that began with the establishment of the Young Leaders Development Committee and income generation initiatives. Freire's (1970, 1972, 1973) thesis that the poor and oppressed have the capacity to create and to recreate their worlds provided major direction for the action research.

In addition to discussing the issues brought up through the conscientisation process, the Committee worked towards the IASSW Congress. The Committee explored alternative ways of integrating children and young people living on the street during the Congress. This included skills training with the children covering basic communication skills, public speaking skills (two of them spoke in the Opening Plenary session) and raising awareness related to the field of tourism. It also included approaching the municipality, building trust and relationships, and starting a dialogue between the municipality and the children. Each of the children also took photographs documenting life on the streets that were used for a poster display at the 34th Global Social Work Congress.

Conclusion

Street life certainly has detrimental effects on children, with their physical, social, mental, emotional and moral development being severely compromised. Due to their unstable and hostile environments, they are vulnerable to hunger, victimization, imprisonment, sexual abuse and exploitation, and are denied the fundamental rights accorded to children in the Convention on the Rights of the Child (1989) and the rights elucidated in the African Charter on the Rights and Welfare of the Child (1990). In the South African context race and class discrimination are key to rendering African black children vulnerable to failure in school, abuse, exploitation, orphan-hood and migration to life on the streets. Discrimination takes various forms and has a way of seeping into the lives of individuals and families by crystallizing in unemployment, poverty, domestic violence, abuse and hopelessness. The immediate manifestation of discrimination often belies the macro level factors that underscore it. In addition to this, the dominant discourses on children from the street and the prejudices against them mean that it is all too easy for the children themselves to internalise their oppression and to blame themselves for their plight.

The stigmatisation of children from the streets has its genesis in the societies in which they are located and in the ideological hegemony of neo-liberal capitalism, which exalts individual freedom, choice, self-reliance, material progress, profit and independence. Within the neo-liberal individualistic framework, there is little room to investigate how structural factors exclude, oppress and relegate some groups of people to poverty. Thus when individuals find themselves in situations of dependence, they begin to believe that it is their fault and take on the dominant voices of self-blame and moral degradation; the poor, and especially children from the streets, are deemed to be morally decrepit. Critical action research and emancipatory pedagogy, which informed the interventions described in this chapter, provide us with a worldview and strategies for challenging the dominant neo-liberal paradigm; becoming reflexive researchers and practitioners; raising consciousness among the children about the world that they live in; and building upon their enhanced self-esteem and self-confidence to help them challenge structural injustices. Above all, by understanding the impact of the structural, we are able to tune in to the life worlds of the children in empathic ways. We saw enormous spin-offs of the commitment to caring, and we emerged from this convinced that caring and justice go hand in hand. Caring humanises and drives our pursuit for justice where justice does not have to be reduced to a technical, universalistic endeavour. All our work has reinforced our view that there are no short cuts to development work; the processes of gaining entry and developing trust and the multiple cycles of action and reflection take a great deal of time and require intellectual, physical, material and emotional investments.

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PART III

Policy issues

Chapter 7

Ethical and Methodological Issues in Researching Brazilian Policy Responses to Poverty

Joana Garcia

Introduction

In terms of the ways in which it deals with poverty, Brazil shares certain traits with other capitalist societies which have not adopted the universal welfare state model: tutelage, clientelism, and benevolence. By 1988, this tradition had begun to change, at least in the legal domain. A Federal Constitution was adopted, and with it the stipulation that social welfare is a government-ensured public policy. The relationship between the giver and taker of benefits was now mediated by a law that converted what was once an act of goodwill or charity into an established right.

Approximately 15 years later, an antipoverty programme that does not rely on mediation or preference-based choices was created. This policy, called the *Programa Bolsa Família* (Family Grant Programme or FGP), aims to mitigate deep-rooted economic inequality in Brazil through the large-scale incorporation of families suffering from extreme poverty. It provides assistance but does not treat the poor as a passive object; it has directly contributed to changes in school attendance and basic maternal and child health care.

This chapter will present discrepancies between the planning and operational phases of the Programme, and will analyse its foundations and impact. It will feature a combination of wide-ranging studies, including those that explore quantitative data and those that examine everyday activities with poor families from various backgrounds. Through an analysis of these two forms of assessment and supervision, the advantages and limitations of the Programme will be elucidated.

The chapter is divided into three sections: the first presents a brief summary of the main aspects of Brazilian social reality and its distinctive diversity. The second section is dedicated to the FGP, and will present practical aspects of the Programme, including eligibility criteria, amounts of aid granted according to poverty level, and the conditions for maintaining benefits. The third section will present some results and effects of the Programme based on recent studies by key researchers of the subject.

A snapshot of Brazil and its features

Any study on social policy and social work in Brazil should encompass a wide range of cultural references and political and economic variables, and should take account of the irregular demographic and territorial scale of the country. There are noticeable differences between the twenty-seven states in Brazil, and these become even more apparent in the broader geographical context of the country's five larger regions: North, Northeast, Southeast, South and Central-West.

Traditionally, diversity in Brazil has been treated as a hierarchical structure, with ranked scales defining areas according to their level of development. By this system, the Southeast is usually the most developed and modernised region, while the Northeast represents poverty and backwardness. The Municipal Human Development Index, which internally gauges life expectancy, literacy and levels of education, varies from 0.919 in the Southeast to 0.467 in the Northeast, revealing an enormous gap between the different municipalities.

Besides its continental dimension, internal diversity and massive population contingent, Brazil is characterised by indexes of wealth inequality¹ that reveal an alarmingly high concentration of resources in the hands of a small, privileged elite. The high level of inequality of opportunity in the form of favourable conditions for mobility between occupational sectors beneath a professional elite and the extremely limited opportunities for individuals born to less qualified, working class parents to become part of this elite should also be noted.

The diagram below summarises basic demographic information about Brazil:

Although the country's population represents a diverse mixture of ethnicities and religions, these dimensions are not the cause of social problems, as is the case in other countries. Religion is a very important underlying factor in the political culture and in the way Brazilian society understands and deals with social differences and the concept of welfare. The conservative Catholic approach, which neither confronts social problems nor questions their causes, but rather contributes to compassion and acceptance of one's condition, is predominant. A fundamentalist branch of Protestantism is also developing, and has been more active in mobilising the poor than other faiths. Many key figures of this religion are connected with politics in Brazil, and it has made its mark on the country's welfare programmes, resulting in a paternalistic attitude towards the poor and, occasionally, the selection of users based on religious criteria.



¹ The Gini Coefficient varies between zero (no inequality) and 1 (highest degree of inequality). Brazil's index is 0.57, according to the 2007/2008 Human Development Report. With the introduction of income transfer programmes, there is a positive variation in this value. According to a study conducted by Soares *et al.* (2006), the Gini index in Brazil decreased by 5 percent from 1995 to 2004, and 21% of this decrease was attributed to the Family Grant Programme.

Figure 1: The regions and states of Brazil.Area: 8.514.877 km²

Population: 186.332.540

Municipalities: 5.562

Language: Portuguese

Religion: 74 % roman Catholic
15 % ProtestantEthnicity and race: white 54 %
multiracial 39 %
black 6.1 %
others 0.9 %

In terms of ethnic diversity, the figures reveal that black people are a small group. This is due to the fact that this data was collected from the respondents, most of whom do not perceive themselves as black. There are many euphemisms for skin colour and these serve to cast ethnic affiliations in a positive light. Although many changes have been made in the legal and social benefits available to black people in order to promote their economic integration, recent studies show that these mechanisms were not as pervasive as they should have been. Brazil was the last country in Latin America to abolish slavery; the practice lasted approximately 300 years, during which approximately 4 million people were brought over from Africa. The final decree abolishing slavery was promulgated in 1888, following others that declared the freedom of newborn slave descendents and slaves over the age of 60.

Although no forms of segregation were imposed after the abolition of slavery, black people in the country were marginalised in many ways. They are not perceived as worthy recipients of what Amartya Sen has called 'substantive freedoms' – the capabilities to choose a way of life and do the things that one values. They still live in conditions of inequality compared with whites. This inequality is made manifest at different moments in the individual's life cycle: beginning at childhood and continuing through one's school years, it is a key factor in access (or a lack thereof) to the urban infrastructure, ultimately crystallising in the labour market, which consequently determines the income and living conditions of Afro-Brazilians as a whole.

According to official data, the income among the white population is almost 196 percent higher. Basic services for housing also reveal a discrepancy between the two groups, as the following table shows:

Table 1: Differences between white and black people in Brazil.

Variables	Blacks	Whites
Income (minimum wage per family)	1.15	2.64
Education	84 %	89 %
Life expectancy	66 years	72 years
Water supply	67 %	83 %
Sanitation	40 %	63 %

Source: PNAD 2004/IBGE

One can see that the race factor in Brazil is directly linked to poverty conditions. Around 64 percent of FGP beneficiaries are black or pardo². All these aspects contribute to a concept of poverty that does not consider income an isolated explanatory variable. Nevertheless, the defining criterion when applying for antipoverty programmes is the potential beneficiary's self-identification. Quantitative criteria based on family income are the most commonly used indicator for defining poverty and qualifying the lack of protection to which poor families are subjected. Although the 'poverty line' is an important indicator since income does in fact confer purchasing power, it must nevertheless be used in conjunction with complementary indicators in order to reveal the multidimensional character of poverty and the interrelation between different needs. Moreover, as specialists in this field have pointed out, the poorer the country, the less helpful income criteria become in tracing poverty levels.

The table below presents an outline of Brazilian households³ with children under 15 by income bracket.

Table 2: Families with children ages 0 to 14, according to average monthly per capita income (minimum wage).

	Up to 1/2	From 1/2 to 1	From 1 to 2	From 2 to 3	From 3 to 5	More than 5
North	48.5	26.1	11.8	3.3	2.1	0.9
Northeast	61.0	21.3	8.0	1.9	1.5	0.9
Southeast	25.9	32.8	22.0	6.0	4.5	2.6
South	23.9	32.3	26.6	7.0	4.3	2.8
Central-West	32.7	32.4	17.5	5.1	4.3	3.6

Source: PNAD 2007/ IBGE



- 2 Broad designation applied to people of mixed skin color, of either African or Indian descent.
- 3 The term family represents all existing arrangements, without limitations imposed by blood or marital ties, or any type of ideal composition.

The Northeast of Brazil displays a noticeable concentration of poor families with children. Until the age of 14, children are protected from any form of remunerative or intensive work. Only from this age can teenagers immerse themselves in a work activity (albeit with protective measures pertaining to their condition as developing persons). This restriction on child labour is a relatively recent development, established in 1990 by the Child and Adolescent Statute. Although it is considered an advance in child protection, it had a significant impact on household income among poor people.

The Family Grant Programme

The debate on family and social protection in Brazil has been limited to the principles, implications and impact of the FGP. Created in 2004, the FGP reached 10,654,244 beneficiaries in October 2008, a year in which the state directly transferred US\$ 4,504,098,184⁴ to impoverished families. It is presented as a programme that aims to eradicate hunger and extreme poverty, and its political impact has been considerable, not only in terms of visibility, but also as a methodology of social welfare intervention.

Inclusion criteria

Brazil is a federalist country consisting of three federal units: municipalities, states, and the union. Because the FGP is a nationwide programme, the union (or federal government) is in charge of its management and wealth allocation. The family registry is nationally integrated by means of a registration form, which is filled out in each municipality. The form, called the Unified Registry for Federal Government Social Welfare Programmes, is a database containing a description of the socio-economic conditions of low-income families in Brazil. In order to be included in this registry, families must have a monthly income of up to half the per capita minimum wage; if their income surpasses this amount, their inclusion is contingent upon their eligibility for other social programmes. Information contained in the Unified Registry is not limited to income criteria; it incorporates other significant variables for assessing the conditions of family vulnerability such as home features (number of rooms in a house, type of construction, water treatment, sewerage system and waste disposal); family structure (number of family members, pregnant women, elderly members, breastfeeding mothers, and members suffering from any kind of disability); identification and documentation of each family member; educational background of family members; professional qualifications and situation in the labour market; and family sources of income and expenses (rent, transportation, food, etc.).



4 Brazilian real-US Dollar exchange rate as of December 2008.

Despite this multiplicity of indicators, income remains the most important criterion for inclusion in welfare programmes. In order to be included in the FGP, families must possess a family income of up to 1/3 of the effective per capita minimum wage⁵. Based on the information in the Registry, each month the Ministry of Social Development and Fight against Hunger electronically selects families to be included in the Programme. The families with the lowest income have the highest priority.

The method used to prove income deficiency is self-declaration (uncertified), which is considered the most economically viable alternative given the Programme's large scale. This also represents a less discomfoting method than poverty certificates issued by state agencies⁶. On the other hand, this method has been criticised because of its inaccuracy and the indirect factors involved, such as the misallocation of funds and political misappropriation.

As noted above, inclusion in the Unified Registry is a necessary condition for being selected as an FGP beneficiary family. But inclusion in the Registry alone is not sufficient; in other words, the number of registered families is larger than the number of beneficiary families. In 2008, 31 percent of families registered as FGP candidates were not included. The fact that the Registry does not imply a family's immediate enrolment in the Programme and, consequently, the allocation of benefits tends to generate doubt and frustration concerning the desirability of providing information and how this information is used.

It must be kept in mind that providing information on one's own material precariousness in a context that values the entrepreneurial individual generally produces discomfort and self-censure. As Tocqueville (1997: 30) stated in a classic excerpt from his *Memoir on Pauperism*: 'From the moment that an indigent is inscribed on the poor list of his parish, he can certainly demand relief, but what is the achievement of this right if not a notarised manifestation of misery, of weakness, of misconduct on the part of its recipient?' In the example at hand, appearing on the list and not receiving any benefits could be considered even more demeaning.

In the last two decades, the notion of citizenship has become increasingly important in the political vocabulary of Brazil. Its emergence has been linked to the democratisation that has been taking place since the 1980s. References to citizenship have often provided common ground for a wide range of diverse social movements fighting for substantive rights (housing, education,



⁵ The income-related amounts and the transferred funds were not indexed in relation to the minimum wage, but are shown as fixed values. They were indexed for comparative effects. The effective minimum wage in December 2008 was equivalent to US\$ 167.

⁶ Note that citizens below an annual income bracket (US\$ 6,026) do not need to declare their income for tax purposes.

health). Although the new constitution extended social rights to everyone, some of the old concepts of citizenship remain. Prior to the adoption of the new constitution, which took effect in 1988, a citizen was a regular worker and citizenship was related to employment. The term 'regulated citizenship' was coined by Santos (1979) to designate this connection, and has become a key concept in the analysis of Brazilian welfare. It means that the recognition of citizens did not have a universal character, but was restricted to workers. Also, only those workers in professions recognised and regulated by the state and belonging to unions recognised and regulated by the state were entitled to social rights. The state promoted an exclusionary view of citizenship as a condition strictly related to labour, and this perception is still very much alive in Brazilian society in the form of the idea of the 'deserving poor'.

Current welfare policies, and especially the FGP, seek to avoid one of the heritages of early republican Brazil: 'clientele politics' or 'clientelism'. The FGP evokes a technical model, where criteria anticipate preferences. Clientelism has commonly been viewed as one of the factors that most endangered the consolidation of a citizenship culture in relationships between the agents involved in social interventions and the population. Yet this is not a prerogative of the welfare domain: clientele politics has been associated with many traits that permeate power relations in Brazil, creating hierarchies and asymmetrical relationships. One institutional representation of this asymmetry is the idea that public welfare services are 'owned': public aid is linked to a concept of ownership, where the 'owner' decides upon the criteria for distributing aid. Furthermore, in a sense the beneficiaries themselves are seen as constituting this property, and are often referred to as 'my clients', 'my kids', 'my families' – that is, they are restricted by a personified counterpart.

The FGP is an anti-poverty programme that transfers income with a reasonable degree of de-personification by following previously established criteria of inclusion and wealth allocation. This creates an alternative means of interaction between the welfare distributors and the beneficiaries. While previous mediations were permeated by the direct relation between policy-makers and users, in this model, the system – which proceeds and is superior to those involved – selects the order of enrolment based on a unified registry and directly transfers funds to the family.

The funds

The amount transferred to the families varies from 5 percent to 44 percent of the effective minimum wage, depending on the family's monthly per capita income and the number of children and teenagers under the age of 17. The amounts vary based on beneficiary categories: 'basic benefit', 'variable benefit' and 'variable benefit associated with adolescents', as shown in the table below.

Table 3: Types of FGP Benefits.

Types of benefit	Amount	Criteria
Basic benefit	15 % of the effective minimum wage	Families considered extremely poor, with a monthly income of up to 15 % of the per capita minimum wage. Any family with this level of income receives this benefit, regardless of whether it includes children, teenagers, or young adults.
Variable benefit	5 %- 15 % of the effective minimum wage	Poor families, with a monthly income of up to 1/3 of the effective per capita minimum wage, provided they include children and teenagers age 15 or older.
Variable benefit associated with adolescents (BAA)	7 %- 15 % of the effective minimum wage	FGP families including 16 and 17 year old teenagers that attend school.

Source: Ministry of Social Development, 2008

Although the individual amounts are very small, in certain cases of extreme poverty they represent the family's main source of income. Studies conducted by Rocha (2008) indicate that FGP income has reduced the poverty bracket by 12 percent and reduced poverty severity by 19 percent.

Amounts are uniform throughout the territory of Brazil, but the cost of living varies, meaning that the impact of income allocation varies according to the region. The price of basic staple foods in the Northeast is lower than in other states, with the lowest price in the state of Pernambuco (US\$ 71.46) and the highest in the state of Sao Paulo (US\$ 99.97), according to studies referring to 2008 conducted by DIEESE⁷.

Keeping in mind that food is one of the most highly prioritised items in the family budget, the purchasing power of families differs across regions, with distinct effects on the nutritional needs of families.

The sum allocated for the FGP derives from the General Budget of the Union, and in 2008 represented less than 1 percent of the annual budget. Even though there are sufficient supplies for expanding benefits, political limits exist. Considering the neo-liberal proverb, 'teach a man to fish and he'll never go hungry', monetary initiatives for decreasing poverty must be kept at a certain level so as not to discourage people from working. Also, productive insertion into the labour market represents the so-called exit from antipoverty



⁷ DIEESE, or Inter-Union Department of Statistics and Socio-Economic Studies, is a highly reputable research institution that was created by Brazilian union movements.

welfare programmes, standing as it does in sharp relief to the adverse effects of these benefits: chronic dependence and parasitism.

This concept is the key to preserving the idea that dignity is derived from labour as opposed to dependence on public support, and to visualising a productive activity that would be able to fulfil the survival and social reproductive needs of families. Once again, the living conditions in an unequal, hierarchy-based, selective society are concealed by a discourse that appeals to competence, individual effort, and merit-based qualification as sufficient conditions for the emancipation of individuals. In this respect, Soares' (2007) research on participation in the labour market was welcomed by those who share the view that there should be a residual state presence. The data in this study reveal that members of FGP beneficiary families enjoy 2.6 percent more participation in the labour market than adults in non-beneficiary families. Moreover, female beneficiaries' participation in the labour market is 4.3 percent higher than in the case of their non-beneficiary counterparts.

Conditions for maintaining benefits

In return for the benefits received, families must ensure the protection of children, teenagers and mothers. Acceptance into the FGP is contingent upon monitoring school attendance, vaccination requirements, prenatal care and body weight. Though presented as a means to guarantee protection, these conditions may lead to punitive and controlling measures. When school and health centre attendance is monitored, families do not always understand that the so-called conditions operate in their own interest. Failure to meet these requirements initially leads to warning notices, then to blocked remittances, and finally to removal of the family from the list of monthly concessions.

The conditions for continuous enrolment are listed in the table below:

	Children age 7 and younger	Children and teenagers age 6-15	Teenagers age 16-17	Mothers
Health	Tracking vaccine charts, growth and development			Prenatal and nutritional care of pregnant women age 14-44
Education		Minimum school attendance of 85 %	Minimum school attendance of 75 %	
Social Welfare		Minimum attendance of 85 % in socio-educational services for children and teenagers at risk or removed from child labour		

Table 4: Conditionality according to area and target.

Source: Ministry of Social Development, 2008

Whereas FGP resources are transferred without technical or political mediation, the Programme's follow-up phase requires professional interaction. An intersectorial team is supposed to conduct the follow-up phase, and usually operates with a moral framing approach, which is typical of traditional welfare models in Brazil. Although families can freely administer the funds, appropriate use of the benefits is expected. For instance, if the family uses the allocated income to purchase alcoholic beverages, tobacco products or other adult items, their choice could lead to explicit reprobation by professionals and society in general.

Requirements are expected to be rigorously followed, notwithstanding the fact that their implementation depends on conditions beyond the families' control. There is also the expectation that in time, having achieved emancipation, the family will be able to relinquish funding and make way for others. The welfare money and direct access to the law are still viewed as the source of 'inverted citizenship' (Fleury 1984), which means that meeting conditions for claiming rights is, at the same time, evidence of personal failure. A true citizen is one who is able to afford private services like education, health care, and housing without relying on the state. According to this concept, public social services are designed for the helpless.

The conditional implementation of a recognised right is a contradiction stemming from the classic contention that welfare should not be delivered for free, since this would not be constructive and does not produce efficiency. No matter how adherent conditions for the FGP might be to principles embedded in the law that ensure access to basic social rights, particularly those related to health and education, they are ultimately enforced through coercion. The predominant view among specialists, policy implementers, and society as a whole is that the concession of welfare benefits should be temporary, controlled, restricted to emergencies, and eventually replaced by productive relations. This situation indicates that there are conceptual and political gaps between the law, its understanding and its application.

These gaps are the reason for the lack of synchrony between the Programme's institutional dimension and the consolidation of the values linked to it. This trait of Brazilian political culture is responsible for the biased – and many times opportunistic – appropriation of the idea of citizenship. There is no *a priori* correlation between civil, political and social rights and other sets of values that operate in other policies or refer to the idea of citizenship. One example that illustrates the lack of synchrony between the law and its application is associated with the family follow-up phase of the Programme: although families are understood in the broader sense, they are still subjected to moral framing. Despite recognised changes in the composition, function and values of families, which indicate a wide range of families even within similar income brackets, modernity patterns disseminated in the beginning of the 20th Century with the establishment of a republican regime and the quest

for *ordem e progresso* – ‘order and progress’, an idea so closely connected with the republican project that it appears as the prominently displayed device on its key symbol, the Brazilian flag – still guide welfare actions in Brazil. The republican project partly remains, controlling the network of welfare relations with destitute sectors through intervention in the lives of families and communities. Interventions guided by a moral dimension still select productive and structured families and distinguish them from their opposites; it is not uncommon to find the aim of ‘promoting self-esteem among the poor’ in complementary income-generating welfare programmes and the follow-up phases of the FGP.

The impact of values on data collection and interpretation

The quantitative studies presented here are based on official annual data collected in the National Household Sample Survey (PNAD). This database provides information on the education, health and employment conditions of family members and home infrastructure. Using this primary source and the Unified Registry, which contains detailed information on poor families in each municipality, it is possible to draw a map of poverty in each territory. This map is cross-referenced with other databases on education, health, work, and consumption, and occasionally reveals positive associations produced by external causes, such as the introduction of the FGP. Surveys based on this type of approach are generally conducted by economists, who assess the programmes on the basis of their ability to represent efficiency, effectiveness, and reality. Constant effort is dedicated to verifying that the social investment is justified and satisfactory.

Another source of information used in this chapter comes from assessments conducted *in loco*, at the site of the programmes. This information was obtained in a systematic evaluation effort conducted in 2007 and 2008 by Garcia *et al.* (2008) in 91 Brazilian municipalities located in the Southeast region. Case studies of various regions presented at social work meetings and conferences throughout the country were also analysed.

Results pertaining to FGP performance generally seem to reveal positive indicators, especially in the case of numeric, as opposed to qualitatively analysed, data: sufficient range to reach families experiencing extreme poverty, increased household expenditure for food, increased school attendance, and decreased maternal death rates. FGP assessment is expected to consider other, less visible, dimensions of assessment models on an amplified scale, dimensions which are less likely to be summarised by measurable indicators, but that should be able to reveal the magnitude of the discrepancy between foundations, principles and real results.

Two indicators for assessing the FGP were foreseen in the 2004/2007 multi-annual budget: a poverty index and the rate of attendance of poor families. The

poverty index was deemed inadequate because it is impossible to isolate FGP effects from the numerous variables that influence poverty. The attendance ratio, which represents the number of poor families benefiting from the Programme in relation to the total number of poor families, reached 98 percent in 2008, according to the official database (Vaitsman and Paes-Sousa 2008).

The Programme's impact on education has been positively appraised, as revealed by the increase in school attendance and decrease in dropout rates among children of beneficiary families (*ibid.*). Evaluation studies dealing with children's educational improvement closely examine these indicators. No qualitative studies that would analyse school performance since the introduction of educational conditions for receiving benefits have been conducted. Considering that attendance rates have increased and dropout rates have decreased due to FGP requirements, it would also be important to investigate the impact of the attendance of children from FGP families on school routines and the restructuring of pedagogic content and dynamics. According to Soares' evaluation (2007), children from FGP beneficiary families are 4 percent more likely to fail in school. The reasons given for poor performance are generally related to endogenous family background factors. However, schools themselves are a key part in the learning process in terms of techniques and student socialisation.

Studies conducted by Glewwe and Kassouf (2008) have found positive correlations between school performance and the introduction of the FGP. Using the historic 1998–2005 series, the researchers highlighted the connection between the Programme and the school system. The *Bolsa Família* variable referred to schools attended by at least one child from a FGP family, thus indicating the impact of the programme's availability, rather than participation in it. The main results show improved performance in schools ranked at the very bottom of the quality indicators and a positive impact on the approval rate of boys, but a less positive impact on the approval rate of black, indigenous and Asian students. According to the researchers, one possible explanation for the reduced effects in the case of these students is that their enrolment brought students with greater learning disabilities to the classroom, thus increasing their chances of failing subjects and the school year. This concept tends to be predominant, and results in children who are already stigmatised by their social origin being made responsible for their unsatisfactory performance. Also, it fails to hold schools accountable for the interests and performance of students.

As far as health statistics are concerned, the achievement of the intended results of the Programme (increase in vaccination, decrease in maternal and infant death and malnutrition rates) still appears slight in comparisons of beneficiary families and their non-beneficiary counterparts. There was an increased demand for health services, but the supply did not always correspond in terms of quantity or quality, according to frequently heard criticism from specialists and family members involved in the Programme

(Garcia *et al.* 2008). Once again, the introduction of conditions has a punitive effect since the conditions cannot always be met, and may be beyond the family's control.

Studies conducted by Teixeira (2008) analysed the impact of income allocation on labour relations and concluded that the average effect of the FGP on job hours varies between zero and a 3.5 hour reduction of paid labour. This confirms Soares' observation (2007) that it is not possible to state that the FGP is responsible for generating dependence, at least in the case of homes with employed individuals who possess other sources of income beside benefits from the Programme.

Using the concept of budget shock (a sudden increase in household income unconnected to labour income), researchers have pointed out changes in the unpaid labour of women. Women participate more in household chores and are therefore more sensitive to budget shock and less stable in terms of job offers. It is important to emphasise that the dominant model is the single parent family headed exclusively by the mother. Out of the total number of families with children, 25 percent of households are headed by unmarried mothers, while only 3 percent of heads of this type of household are men.

Responsibility for ensuring that the conditions set out by the Programme are met falls mainly upon women, which partly explains the fact that beneficiary mothers dedicate more hours to household chores than non-beneficiary mothers (Suarez and Libardoni 2007). Due to their greater occupation with family care activities, it is preferred that women receive the benefits and administer their use. This situation strengthens a woman's role when accompanied by a spouse, and may therefore contribute to redefining family power relations.

A qualitative study conducted in 10 municipalities in the Southeast and Northeast of Brazil between March and June 2006 explored the perspective of female beneficiaries. The researchers presented several firsthand accounts of the impact of income allocation on the gender condition (*op. cit.* 145–146):

'Now that I have my own money, I can do things without asking my husband. I no longer wait for him to say yes or no.'

'Because the husband speaks appropriately to his wife, because she can leave home, women now have their own money.'

'Yes, it's true. He used to beat me before.'

'Because when she had nothing, he would use it against her. With her getting the allowance, they don't act like that anymore.'

'... a lot of times it became easier to manage with a husband and kids. There are fewer fights because now it's easier to manage.'

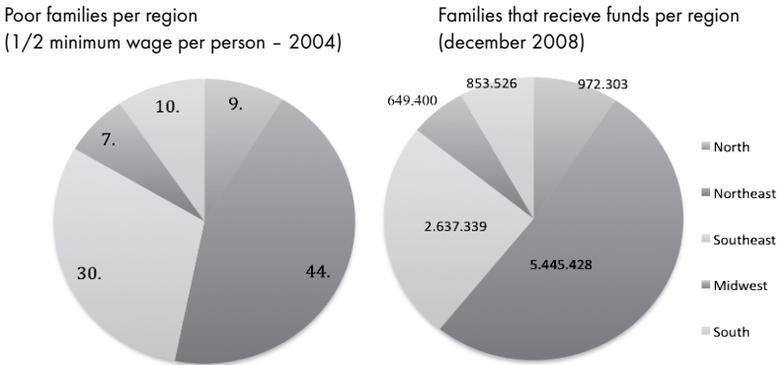
These quotations could reflect a shift in family relations, but at the same time they do not hint at changes in the traditional identity of the woman in the household as a wife and mother.

Results of the Family Grant Programme and impact in different states

Due to the unique spatial and demographic dimensions of the country, evaluations involving all states are predominantly quantitative. As previously indicated, the methodologies employed on the national level make use of statistical correlations between variables provided by the annual National Household Sample Survey and official databases on school and hospital attendance, as well as information about employment and consumption originating from distinct governmental and non-governmental sources. The variables most sensitive to the introduction of the FGP in family life are condition-dependent: school attendance and performance of children and teenagers, maternal and infant mortality rates and nutritional conditions. Studies on consumption patterns and participation in the labour market were also conducted, but in these cases the income increase obtained through the Programme is not presented as an isolated explanatory variable (Teixeira 2008).

The graphs below show how the poverty situation, expressed by region, was effected by the Programme in 2008.

Figure 2: Poor families and FGP allocations by region.



A high concentration of poor people can be observed in the Northeast region, which justifies the allocation of more resources for families in this region. However, the allocation surpassed the 8 percent estimate, thus reducing the allocation to municipalities in the Southeast. This allocation can be justified by a comprehensive understanding of poverty that considers the deficit of other resources besides income and the increased difficulty of being included in the job market. Based on this argument, the Northeast was a pioneer region for the implementation of the Programme. But political reasoning may also be considered when viewing the Northeast as a priority. The tradition of clientele politics is notably strong in this region. In the 2006 elections, the President sought reelection and obtained significant numbers at polls in regions that were especially contemplated by the Programme. Nicolau and Peixoto (2007) analysed voting

patterns for President Lula da Silva in all Brazilian municipalities. One of the aims of this study was to observe the existence of associations between the FGP (measured by policy spending per capita in the municipalities) and votes for President Lula by city. The results revealed a strong correlation (r 0.68) between the Programme's resource allocation and the President's popularity in the polls; in other words, cities benefited by the Programme tended to vote more intensively for President Lula. Since the authors worked with aggregated data, it is not possible to assert that the beneficiaries of the Programme voted for Lula. Nonetheless, the data consistently suggests the strong influence of the FGP in town life.

As for variations within each territory, a groundbreaking study on the regional influences of the FGP was conducted by the economist Rosa Marques in 2004 (2004). In the first implementation phase of the Programme, the number of beneficiary families was around 1/3 lower than at the present. The study demonstrated that the impact of income transfer is not limited to the family sphere, but that, in an aggregated form, it ends up generating a boost to the local economy as well. For instance, in the northeast municipality of Pedra Branca (in Ceará state) the allocated FGP resources give a figure corresponding to 43 percent of the disposable income of the municipality (revenue derived from local taxes plus constitutional allocations); in Vitória de Santo Antão, in Pernambuco state, this figure corresponded to 40 percent. The Marques study demonstrated that the lower the disposable income of the municipality, the greater the relative importance of the resources transferred by the FGP. These municipalities represent municipalities with a population of 100 to 500 thousand, mostly located in urban regions, with a below average HDI and whose economic activity is predominantly in the secondary sector. In Várzea and, once again, Pedra Branca (both located in northeast states), 45 percent of families benefited from the Programme.

Another comparative study of regions sought to evaluate the impact of the Programme in terms of nutrition (Assis *et al.* 2007). The survey was conducted in 2006, and encompassed 3,000 families that received benefits for at least a year in 53 municipalities. The results of this survey indicate that most children originally from beneficiary families consumed 3 or more meals a day, varying by region as follows:

Table 5: Number of meals per day by region.

Meals/day	Regions				
	North	Northeast	Southeast	South	Central-West
1	0.5	0.4	0.3	0.5	0.5
2	2.6	3.4	8.9	3.3	6.1
3	50.6	45.3	36.8	31.2	33.9
4	34.1	30.5	44.9	57.1	47.8
5 or more	11.3	13.9	6.6	6.2	8.6
6 or more	0.9	6.6	2.4	1.6	1.1

Source: DataUFF 2006 (Assis *et al.* 2007: 72).

These results came as a surprise to those expecting a dismal scenario in the Northeast. This region, though very poor and the most deprived in terms of wealth distribution, has a tradition of crop cultivation and animal herding that, even in periods of drought, create vital stockpiles not associated with monetary exchange which ensure family sustenance. However, it should be noted that the number of meals per day is not a sufficient criterion for assessing the quality of nutritional habits.

This research also sought to assess how satisfied families are with the quality of food after being included in the Programme. Table 6 indicates how families assessed the quality and variety of food.

Table 6: Evaluation of food quality and variety after enrolment in the FGP.

	Regions				
	North	Northeast	Southeast	South	Central-West
QUALITY					
Much better	17.5	14.5	20.2	16.2	25.2
Better	75.5	67.1	59.8	68	64.2
Same/ worse	7.0	18.3	20	15.9	10.7
VARIETY					
Much better	71.2	74.2	68.2	69.7	83.3
Better	28.8	25.8	31.8	30.3	16.7

Source: DataUFF, 2006 (Assis et al. 2007: 81).

This assessment survey reveals a generally positive response to the Programme. Once again, it is interesting to observe that it is precisely in the Northeast, where the availability of food throughout the day is most critical, that the percentage of those who felt that food quality remained the same or got worse was higher than in other regions, which suggests that in these cases the income received by the families might be diverted to supply other needs.

Finally, the regional impact of the Programme varies due to a number of factors. Of these, the following should be highlighted: local development, poverty level, place where poverty is more acute, support of public services, local networks of solidarity and the political profile of the poor. The more people are used to a culture of handouts, the more they tend to receive resources without questioning the obligations that they imply. Each additional cent will be received as 'a gift from heaven'. This de-politicisation, very common among the poor, leads the poor to conform to the norms of their status, to be appreciative of those who are responsible for reallocating resources and to obey without question.

Concluding remarks

This synthetic outline of the Brazilian experience contributes several as yet unresolved issues to the debate about family-focused welfare protection policies.

Firstly, welfare for the poor has been historically marked by disciplinary and charitable interventions. Treating welfare as a right has highlighted the multidimensional aspect of the concepts and forms of intervention, albeit on the normative level. Relations based on moral classification systems have been gradually replaced by legal references that consider the poor citizens and the welfare agent a part of public policy and as such subject to preset, socially controlled norms. The FGP is implemented in a scenario where welfare assumes a more politicised character, even though it retains traces of a political and professional culture that views the poor as a burden and a risk to society.

Secondly, face-to-face contact, once key in selection phases and benefit transfers, was replaced by a unified and computerised database based on objective criteria. On the one hand, this ensures increased protection against clientelism, which is contaminated by particularised criteria; on the other, it gives user interaction with politics a highly bureaucratic character. It is hoped that the direct transfer of resources will resolve issues that would have previously characterised the user's demand for service.

Thirdly, the conditions for maintaining benefits produce an ambiguous understanding of citizenship. Children and mothers are compulsorily protected and stripped of the right to freely demand (or refuse) this protection. Furthermore, the conditions for accessing a right include the mandatory exercise of another right. What should be considered a right now appears as a duty. Lastly, the fulfilment of the duty required of families appears to be unilateral. No matter how capable social services are of attending to mothers and children in need, families are still responsible for abiding by the specified conditions.

Finally, complementary activities demand intersectorial involvement. Though presented as a self-explanatory mantra, the realization of these activities in fact implies adding a still incipient practice to the institutional culture guiding welfare policy formulation and implementation. If welfare policies are managed by distinct agendas and, consequently, contain a specific apparatus for each agenda, investing in joint actions implies the existence of political pacts, with consequences for the budget.

This chapter analysed the introduction of the *Programa Bolsa Família* in a political culture that brings together progressive laws and social policy projects based on technical reasoning, albeit in combination with traditional values and customs. Thus a scenario marked by changes, but with some continuity, was presented.

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Chapter 8

Homecare Aid: A Challenge for Social Policy and Research

Lucie Prochazkova and Tom Schmid¹

Introduction

The tasks of comparative social policy research include connecting findings about specific components of policy to the context of state systems using, for example, Esping-Andersen's (1998) well-established distinction between three types of (European) social state systems: Nordic, corporatist and liberal welfare states. This is particularly the case when the phenomenon being researched eludes official statistics. This chapter focuses on the care provided for older and frail people in their homes by workers coming to Austria from central and eastern Europe (Prochazkova and Schmid 2005, 2007, see also Prochazkova *et al.* 2008, Prochazkova 2006, Hovorka *et al.* 1996, Rupp and Schmid 2007, Schmid 1997, 1999, 2004, 2006).

Austria's initial situation was similar to that of other 'corporatistic' states (Behning 1999). However, the legalisation passed between 2006 to 2008 significantly changed the general conditions (Prochazkova *et al.* 2008). This article deals with the characteristics of this change and with the question of how to collect data on the quantitative dimensions of an illegal phenomenon. Being cared for at home is about us, about our grandparents and parents. This is not a specifically Austrian problem, but one that increasingly affects the European Union and its neighbouring regions. Thus the services offered by numerous men and women from central and eastern Europe who are able to provide 'affordable' care in the home due to the existing income gap should not hide the fact that the same problems exist in their native countries. An aging society and the increasing demand for care are present to a comparable degree in all European countries, even though coping strategies differ from country to country. There is therefore a need for comparative social research of solution perspectives and strategies in the researchers' own countries and for the development of comparative perspectives for both the countries of origin and the destination countries, with the aim of constituting research on the migration of household service providers that would encompass the entire EU.



¹ Translated by Ingrid Feurstein

The exchange of research and research contacts on this topic have increased significantly in the past few years, both in terms of content and methodological perspectives. Hopefully a European research network on household services and household migration will be established soon.

Methodological concerns and specificities

The development described in this chapter is a reflection of seven years of research and three years of political consulting. The central problem remains the difficulty of obtaining relevant empirical data and publicly communicating results. Empirical knowledge on the reality of 24-hour attendance in Austria's private households is insufficient, above all because this was an illegal phenomenon until just recently. When researching this area, information barriers seem to be inevitable: placement agencies are very tight-lipped when asked about their activities; it is very difficult to find an agency prepared to provide information on its activities, let alone offer data on care workers and their clients; and institutions that circulate contact information of agencies are reluctant to admit it. In a survey carried out in 2004 among 50 percent of all Austrian hospitals, only two hospitals were ready to pass on the contact information of placement agencies to patients (Prochazkova and Schmid 2005: 174). Even the same hospital which had given a team member with a grandmother requiring care the contact information of three agencies just three weeks before ticked the 'of course not' box in the questionnaire when asked if they provided such information. It is also impossible to determine the exact number of households with home care.

For the reasons listed above, research and politics depend on *estimates* of the number of 24-hour care workers in Austria. In the past, this led to a statistical 'boom': figures cited by the media rose from 8,000 or 10,000 workers to 40,000, with later estimates as high as 60,000. By the time of the public discussions in 2006, this figure had come down to 40,000. Nonetheless, empirical evidence continues to be wanting. We assume that the number of 40,000 caregivers is exaggerated, and estimate that by the end of 2006 approximately 27,000 to 30,000 caregivers who had been placed through agencies were working in Austria, which corresponds to approximately 15,000² affected families (since two care workers usually alternate for one family).

In the middle of this decade, approximately 500 to 1,000 care workers were registered at each of the ten to fifteen large agencies in Austria, as deduced from interviews with some of the more 'talkative' agencies (Bachinger 2006, see also Sommerer 2006). An incomplete, brief investigation of the



² For an estimated 20 % of the affected families, one care service provider is sufficient. (Prochazkova *et al.* 2008).

relevant files in the district court in Budweis, where one of the larger agencies is registered as a foundation, revealed only a couple of hundred foundation members who could be identified as caregivers. Politically, the 'escalating' numbers of illegal care arrangements make sense – the more overwhelming the problem seems to be empirically, the more political pressure³ will be applied to finding a solution to it.

In 2007, the first serious estimate was introduced to the discussion by the politicians themselves. Emanating from estimates for the Vorarlberg province and based on interviews with a large random sample of all care allowance beneficiaries in this small province, social welfare officers⁴ extrapolated results for the entire nation and supported them with additional sample surveys conducted in their own provinces in the first half of 2007⁵. They estimated the number of care workers to be 30,000, corresponding to approximately 15,000 families in need of care. In our own survey, which was commissioned by the Ministry of Social Affairs, we contacted all of the 1,200 beneficiaries of an allowance for homecare with a questionnaire in the summer of 2008 and achieved a response rate of more than 60 percent (Prochazkova *et al.* 2008). The simultaneous distribution of about 700 questionnaires to legalised care workers from Slovakia and Romania was less successful. These questionnaires were supposed to be distributed through a co-operative placement agency, but apparently communication difficulties led to such a small response rate that the results could not be evaluated. At the time of writing, the legislator had yet to significantly improve the database.

It is easier to achieve viable results through qualitative interviews. In the course of several studies (Prochazkova and Schmid 2007, see also Sommerer 2006, Prochazkova *et al.* 2008), numerous qualitative interviews with (legal and illegal) care workers from the Czech Republic and Slovakia and supported families in Austria were carried out. In some cases, contact was initiated by the Ministry of Social Affairs, which is responsible for consulting and supporting households with legalised homecare. Other interview participants were found through personal contacts, chance encounters and the chain distribution of contact information. Sommerer (2006), a registered nurse originally from the Czech Republic, went undercover as a nurse in an agency in 2003 and 2005 to conduct research for her diploma thesis at the Fachhochschule St. Poelten. She also managed to review court files in the district court of a Czech town where a large placement agency is registered as a foundation, whose registered



³ It should not be forgotten that the problem of home care was far from being the most urgent problem in the context of care between 2006 and 2008. But in terms of public debate, it seemed that 'illegal' homecare was the only problem in existence.

⁴ These are the highest-ranking social officers in the individual province governments.

⁵ These surveys were conducted in the course of negotiations between the Federation and the provinces on a subsidy scheme for legal 24-hour attendance in May 2007.

members include care workers from the Czech Republic and Slovakia as well as families requiring care.

Another research measure was the regular monitoring of the websites of placement agencies in Slovakia, the Czech Republic and Austria between 2002 and 2006 (Leibetseder 2004, see also Prochazkova and Schmid 2005, Bachinger 2006, Prochazkova *et al.* 2008). Valuable insight into the provision of homecare placements by agencies and into changes in this provision can be gained through this analysis. For example, a slight price drop of the provisions could be observed in 2006, together with the migration of Austrian agencies to Slovakia following the legalisation. Some provisions have been removed from the Internet, which does not necessarily mean that they no longer exist; it can be assumed that 'silent' placements through word of mouth and business cards are still taking place.

Although an obvious decrease in the sense of wrongdoing of those involved in the illegal employment of 24-hour caregivers could be observed since 2005, this did not enable easier access to information. An increasing openness and readiness of affected households, placement agencies and related others (general practitioners, for example) to speak candidly about the exploitation of the (not yet legal) arrangements could be observed. Contact information was passed on by doctors and hospitals, and also by private persons (Prochazkova and Schmid 2005). Furthermore, the provision of 24-hour attendance was openly advertised in newspapers and on the Internet. But research did not benefit from this candidness, and the results remained in abeyance, somewhere between anecdotal evidence and a qualitative survey. By this time, research was able to more or less correctly infer the structures and processes of the still illegal home care and placements from the known facts, but was still in the dark as to its volume and dimensions. This changed with the formal legalisation of home care, which will be described later in this chapter.

The context and forms of care at home in European countries

The demand for care at home most often increases with old age. In Austria, approximately 60 percent of all recipients of a care allowance are over 60; almost half are over 80 (Prochazkova *et al.* 2008: 79). A similar breakdown of persons requiring a high level of care by age group can probably be noted in the other states of the European Union (Kytir and Münz 1992). At the present, 400,000 people, or 5 percent of the Austrian population, draw a care allowance (*Bundesministerium für Soziale Sicherheit und Konsumentenschutz* 2008b) in one of the seven stages outlined below. The old age dependency ratio is the ratio of the population over 65 to the entire population; it currently amounts to one-fifth, and is likely to increase to two-fifths by 2030.

A similar development can be expected in other European countries. However, changes in the flows of migration as well as economic and political changes

may actually lead to a different outcome. The fact remains that the ratio of elderly people will rise significantly throughout the EU over the next twenty years⁶. This can be demonstrated for individual EU member states:

Table 1: Old age dependency ratio – 2004 and forecast, select EU member states.

State	2004	2015	2030
Belgium	26.1 %	29.1 %	41.3 %
Bulgaria	24.9 %	29.0 %	40.4 %
Germany	26.8 %	32.0 %	46.0 %
Finland	23.3 %	32.0 %	45.0 %
France	25.2 %	29.5 %	40.7 %
UK	24.3 %	28.1 %	37.4 %
Ireland	16.4 %	19.9 %	28.3 %
Italy	28.9 %	34.3 %	45.2 %
Netherlands	20.5 %	26.0 %	36.7 %
Austria	22.8 %	28.1 %	40.8 %
Poland	18.6 %	21.7 %	35.7 %
Portugal	24.9 %	28.8 %	39.0 %
Romania	20.9 %	22.1 %	29.8 %
Sweden	26.4 %	32.0 %	38.5 %
Slovakia	16.3 %	19.1 %	31.7 %
Slovenia	21.4 %	25.9 %	40.4 %
Spain	24.6 %	27.7 %	38.9 %
Czech Republic	19.7 %	26.8 %	37.1 %
Hungary	22.6 %	26.7 %	35.1 %

Source: EUROSTAT 2007: 3ff

This development constitutes an extensive challenge for pension provision systems and implies a tremendous increase in home care. While monetary retirement provisions can be adapted to meet this demographic challenge by means of economic measures (adjustment of financing, increased ratio of real net gain, etc.), the increased demand for home care requires a significant increase in the number of service providers against a backdrop of decreasing employment potential⁷.

As early as the beginning of the 1990s, Baldock and Evers (1992: 23) pointed out that in the future these personnel requirements would exceed the capacity of the legal gainful employment market. Some estimates state that the care sector would require between 1.0 and 1.2 million employees by 2000; the estimated total potential employees would amount to 4.5 million. It is a relief



⁶ Not before the year 2050 can a decline of the old age dependency ratio be expected due to demographic reasons (dropping out of 'baby boom generation') (Rürup 1997).

⁷ Employment potential is the number of potentially employable persons between the ages of 15 and 65. According to the population prognosis this ratio will decrease significantly.

to learn that, as of 2009, this demanding development has not yet taken place. However, the dramatic undertone of this message is that a deterioration in the quality of care due to a relative shortage of resources is to be expected.

Esping-Andersen (1998) distinguishes between three 'worlds' of welfare capitalism according to the relative degree of decommodification⁸ of labour. The 'Nordic' or 'socialist' model designates a well-developed welfare state predominantly financed through taxes, which means a comparatively high tax and contribution rate, but at the same time provision for a high level of decommodified labour. 'Corporatistic' continental European states have a 'medium' degree of decommodification: a social insurance system is provided by the social partners and the state, and benefits are financed through contributions, not through taxes. The 'liberal' model features a low degree of decommodification and a less developed public social insurance system, while extensive private insurance (e.g. private retirement provisions) is predominant. The share of government expenditure in the GDP is low.

This model may be rightfully challenged for its insufficient regard for historical developments and for barely taking into account eastern and central European States (Lessenich and Ostner 1998, see also Manow 2008). Furthermore, it disregards pre-market types of work typically performed by women (household work, illicit work both in the household and in the market) (Lutz 2007, see also Gather 2002), which still fall well outside of either commodification or decommodification. An analysis of household work must also focus on these types of (female) work.

Theobald (2008a) distinguishes between three European models of home care: (1) the 'Scandinavian model' (Scandinavia and the UK⁹), with a high proportion of publicly financed services and a low ratio of illicit household work; (2) the 'Central European model': publicly supported family care comprising a mixture of household supporting social services, family care and attendance work and illicit household work; and (3) the 'Southern European model': care and attendance is almost exclusively provided by family members. For the purposes of this overview, these three models have to be supplemented with a fourth: the 'Central and Eastern European model', which denotes an almost complete lack of publicly supported home care (either mobile or stationary) and the total absence of affordable care (Surdej 2008). Poland exemplifies a state where home care is almost exclusively provided by relatives living either under the same roof or in other households (*op. cit.* 13).

This overview highlights the fact that the model of illegal home care carried out by a predominantly female external staff (Lutz 2007) is only available



⁸ According to Esping-Andersen, decommodification is the degree of independence of gainful employment from the system of employers.

⁹ Actually, the UK should be considered a hybrid form (Theobald 2008: 14).

in countries where the wage differential between the country of origin and the destination country of the staff is high enough to result in significantly cheaper illegal arrangements. Thus illegal home care work is neither relevant for the Scandinavian model (sufficient publicly arranged legal services), nor in the Southern European and Central and Eastern European models (insufficient wage differentials between legal and illegal work, insufficient household income). Geographical proximity is also a factor, as it implies commuting options, cultural similarities and the absence of physical barriers to migration (The EU's Schengen Zone) (Prochazkova *et al.* 2008). Once the temporary restrictions on the EU labour market expire (by 2011, or 2014 in the case of Romania and Bulgaria), illegal care at home may face fierce competition from legal employment options offering similarly low or slightly higher salaries but more attractive working hours, especially in jobs with staff accommodation (food service, for example) (Prochazkova 2006, Prochazkova *et al.* 2008).

The sudden decision

Decisions about home care often have to be made suddenly by those affected and/or their families due to what initially appear to be unexpected and irreversible health changes. In many cases, continuous attendance during the service hours of mobile provisions cannot be provided by the family for various reasons. Apparently, in the past few years, foreign support service providers have proven to be an effective and efficient alternative in more or less all countries of the Central European type. In these countries, the public discourse on home care always (implicitly or explicitly) includes one question: Aren't the families able to accomplish this task? In the past, they were able to provide sufficient assistance. This question fails to account for three significant contexts.

Firstly, the duration of the required care and attendance is much longer today than it was even just a few decades ago (Kytir and Münz 1992: 5) due to increased life expectancy. Longer life expectancy means greater burdens, both for the person in question and his/her immediate family (Münz 2004: 2). Secondly, the need to provide home care was once an indicator of poverty for many families (*Bundesministerium für Soziale Verwaltung* 1979). The introduction of the state care allowance in 1993 has helped in this regard (Behning 1999, see also Pacolet 1998). However, the current rate of this provision is insufficient to finance all elements of such arrangements on the regulated market of legal services. Thirdly, the increase in female labour participation and the female factual retirement age (again, a phenomenon not limited to Austria) has to be taken into account. Because the brunt of the burden of care work is borne by women (Badelt *et al.* 1997: 105), the increase in female labour participation goes hand in hand with a decrease in time available for around-the-clock home care. The findings appear inconsistent, because the

increase in the female labour force participation rate has been accompanied by a significant increase in female part-time employment and an increase in the duration of female non-working time, e.g. due to the extension of maternity leave from one to two and a half years in 1991.

The Austrian care allowance and the system of home care

The situation in Austria exemplifies the Central European type of home care, that is, a significant portion of illegal care at home is provided by women (and men) from eastern and central Europe. In 1993, the problem of care was solved in Austria through the introduction of seven stages of benefits which are paid out on a monthly basis and through an agreement between the Federation and the provinces on a nationwide extension of social services until 2010, including quality assurance measures (Pfeil 1994, 1996, see also Gruber and Pallinger 1994, 2003, Schmid 2000). This development was accompanied by the inclusion of medical homecare on the list of statutory health insurance benefits in 1991. The statutory obligation of the Austrian care allowance is compensation for care-induced expenditure. It is paid out in seven stages. These stages are determined by the amount of care needed, measured by hours per month. The allowance is tax-free and not regarded as income. There is no specific provider, thus minimizing bureaucratic expenditure. The following table presents an overview of the stages of the care allowance:

Table 2: Care allowance stages, 2009 in Euros (allowance per month).

Stage	Definition (monthly care needed)	Care allowance in €
1	Minimum 50 hours	154.20
2	Minimum 75 hours	248.30
3	Minimum 120 hours	442.90
4	Minimum 160 hours	664.30
5	Minimum 180 hours, if extraordinary care is required	902.30
6	Minimum 180 hours a) If care measures are required which are mutually exclusive due to the time schedule and which are required at regular intervals day and night; b) If the continuous presence of a caregiver is required day and night due to the probability of endangerment to self or others.	1242.00
7	Minimum 180 hours a) If no purposeful and functional movement of the four extremities is possible or b) If a similarly diagnosed condition is given.	1655.80
	Monthly spending money	43.29

Those affected by a severe intellectual or mental disability – in particular in the case of dementia – receive an additional hardship allowance of 15 hours a month. Additional aggravating factors regarding the care situation are recognised if deficits in motivation, cognitive abilities, or the strategic and practical realisation of activities or social functioning lead to a severe behavioural disorder. The monthly hardship allowance takes account of the specifically intense care situation of children and adolescents with severe disabilities if at least two mutually independent severe dysfunctions have been diagnosed. The hardship allowance amounts to 50 hours per month up to the age of 7 and then 75 hours per month up to the age of 15. In the case of an inpatient stay in a nursing home, 80 percent of the care allowance is paid to the provider of the nursing home, plus 80 percent of the annuity of the person requiring care, though not the 13th and the 14th annuity, which is given to the person requiring care in its entirety. Beneficiaries of the care allowance accommodated in a nursing home receive 43.29 Euros spending money a month. In the case of an inpatient stay in a hospital, the care allowance is suspended from the third day¹⁰.

82 percent of all care allowance beneficiaries (88 percent of the women, but only 69 percent of the men) are over 60 years of age; half (47.6 percent total, 55.6 percent of the women, 30.8 percent of the men) are over 80 years of age. Approximately 4.9 percent of the entire population (3.2 percent of the men, 8.3 percent of the women) receive the care allowance, while 17.8 percent of the entire population are over 60 years of age (11.7 percent of the men, 22.2 percent of the women). A little over half of the persons over 80 years of age in Austria (52.8 percent total, 39.6 percent of the men, 58.2 percent of the women) receive the care allowance in one of the seven stages. The higher percentage of women is due to a large degree to their longer life expectancy. Slightly more than the half of all beneficiaries (55.7 percent) are classified in the two lowest stages of the care allowance, which contain slightly more men (56.3 percent) than women (52.8 percent). Nearly a third of the beneficiaries (31.7 percent) can be found in stages three and four; again, men (32.9 percent) outnumber women (22.5 percent). 12.6 percent of the beneficiaries are classified in the three highest stages (five to seven); here there are more women (14.6 percent) than men (12.2 percent).

Attendance and support measures are provided predominantly by family members; only a third of the beneficiaries in stages 3–7 living in private households use social services (were visited by skilled elderly care nurses) (*Bundesministerium für Soziale Sicherheit und Generationen* 2002). Extrapolated to include all beneficiaries, this comes to 51,400 people¹¹. Foreign 24-hour attendance staff is



¹⁰ After one month, if the care allowance finances the employment of a care service provider.

¹¹ In 2001, 154,019 beneficiaries drew a federal or regional care allowance in stages 3–7 (BMSG 2002, own calculations).

only employed by a tiny fraction of the beneficiaries. Contrary to the demands of the organisations of disabled people leading the political discourse on care provisions in the early nineties¹², the solution decided upon in 1993 featured a strong medical orientation, as opposed to support for a life characterised by *autonomy* and *self-determination*. The definition of the care allowance stages and the classification decree are to a large extent based on physical and mental deficits, impairment of the senses and mental diseases, which require care support in the broadest sense. The objective of meeting the social and cultural needs of persons requiring care and support is hardly incorporated into this classification.

The seeds of the key problems in the discussion on the legalisation of non-family care staff (and the costs of this legalisation) were already sown with the foundation of the care allowance, albeit against a different backdrop: in 1993 the social services were barely developed and home care was provided to large degree by family members or through neighbourly help, usually on a voluntary, unpaid basis¹³.

The introduction of the care allowance brought about increased decision-making autonomy and with it the demand for attendance, which is not legally recognised due to its non-nursing nature. Thus today the Federal Government and the provinces (through blanket cash benefits and allowances in kind) are responsible for care, while attendance remains the responsibility of the affected person and their family.

However, since the introduction of the care allowance in 1993, significant changes have taken place. These changes are partly linked to the care allowance (the extension of social services enables more and more people requiring care to remain in their own homes) and sociological changes within families. As mentioned above, family members (usually women) have fewer and fewer possibilities for meeting the attendance needs of (predominantly elderly) people requiring care who live on their own in their (often much too spacious¹⁴) homes. This is exacerbated by the fact that the tasks themselves are becoming more demanding and time-consuming.

The arrival of a caring and supporting companion at such a home is a viable solution, in particular if one keeps in mind the sufficient and affordable supply of care workers from central and eastern Europe. The grey area that emerged between unpaid support, legal and illegal employment, social insurance and



¹² For example, the Austrian *Zivilinvalidenverband* (ÖZIV) (Disabled People's Association) single-handedly collected 60,000 signatures supporting its demands within a short time in the run-up to the care allowance regulation.

¹³ See, for example, Hovorka *et al.* 1997.

¹⁴ According to Federal health monitoring, approximately 88 % of people over 80 years of age living in private households have at least one more room at their disposal than the number of people living in the household.

taxation laws turned into a veritable black market. Yet only a significant minority of care allowance beneficiaries take advantage of these opportunities for attendance. The majority of the beneficiaries do without these support services, either because there is no demand or because the supply is too expensive.

The extension of social services which has enabled an ever greater number of people to remain in the privacy of their own homes, together with the political changes in central and eastern Europe following the events of 1989¹⁵, created both the supply and demand for family care. Prices on the emerging black market levelled out at approximately 1,600 Euros/month (Prochazkova and Schmid 2005) at the beginning of this decade, making this a much more cost-efficient solution for people in need care and their family members than accommodation in a nursing home (Schmid 2008a). Attendance services in private households are provided by central and eastern European migrant workers at affordable prices, but are unregulated by trade and industry law. The authors estimate that approximately 28,000¹⁶ to 30,000 persons originating in foreign countries provided attendance in Austria in 2007. Since in most cases two carers share responsibilities in a 14-day rotation, it can be assumed that 15,000 households are affected. The monthly cost is estimated to be in the area of 1,500 Euros/month¹⁷, owing to a slight fall in prices over the last few years.

Forms of organisation and placement

24-hour service providers from the Czech Republic and Slovakia have found and still find placement to a large extent through agencies. At the beginning of 2006, 22 agencies operated in Austria (Bachinger 2006). By the summer of 2007, 37 organisations (Prochazkova and Schmid 2007) could be identified through their advertising campaigns. A high degree of fluctuation of individual agencies can be noticed, but the number of placement organisations had been increasing steadily until 2007. In 2008, the number of placement organisations decreased, and the smallest agencies disappeared from the public landscape¹⁸.



¹⁵ It should not be forgotten that shortly after the Velvet Revolution in 1989, the province of Vienna enticed qualified care personnel away from (the then) Czechoslovakia to Viennese hospitals.

¹⁶ Our estimates start at 28,000 caregivers in approximately 15,000 households, since about 20 % of the households get by with a single care service provider. Approximately 8 million people live in 3.5 million private households in Austria.

¹⁷ Monitoring of placement agencies' websites reveals a slight decline in prices since the beginning of this decade – for more details see below.

¹⁸ This does not necessarily mean that these small organisations no longer exist; some of them have resorted to informal (word of mouth) advertising because their caregivers prefer to work illegally.

One of the longest established agencies is *Das Beste – Südböhmische Volkshilfe*, with its head office in Budweis and branch offices in Slovakia and Upper Austria. This organisation is registered at the commercial court as a *foundation* and the Czech and Slovakian nursing staff and the people requiring care in Austria (or in Switzerland or Germany¹⁹) and/or their family members are registered as *foundation members* (Prochazkova and Schmid 2005, see also Leibeseder 2004, Sommerer 2006). Most agencies are organised as *associations* with head offices either in a foreign country or in Austria. The nursing staff and the people requiring care (or their families) are usually registered as members of the association. The agencies are registered in their home countries as trade professionals and (potentially) pay tax and insurance contributions there. Thus they claim that they comply with legal requirements and operate within the scope of 'freedom of services' in western Europe²⁰.

In addition to nursing staff placed through agencies, there is an unknown but probably larger number of directly placed home care workers in Austria. The model of direct placement attendance arrangements is to be found mainly in the Hungary-Burgenland border region²¹.

Over the course of time, different 'target groups' that solicit 24/7 attendance have become apparent. There are elderly people who are physically capable of doing many things on their own, but who require continuous supervision due to dementia. A carer has to be present almost all the time. These people are often classified in a low care level²² (at least at the beginning of their disease) and do not need intensive care (again, at least at the beginning), but comprehensive attendance. There are also people who require support in several areas of life due to physical disabilities and impairments. A different situation occurs if a family member's state of health has deteriorated to the point that more and more support, attendance and care are required, but the family is not capable of bearing this burden and official care services are insufficient²³. In these cases, accommodation in a nursing home is often the only other alternative.



- 19 This organisation currently comprises about 6,000 caregivers and its activities are available throughout Germany, Austria and Switzerland.
- 20 Since every legal clarification requires charges against the person in need of care as an 'illegal employer', which are avoided for understandable reasons, the legality of the various forms of support services has yet to be verified by the Superior Court.
- 21 Austria's easternmost, predominantly rural province.
- 22 This situation has changed for the better since the amendment to the care allowance regulation on January 1, 2009.
- 23 Official care services are usually allocated to a household for three or four hours a day (maximum).

The motivation of foreign care service providers

According to the foreign caregivers, the main motivation for this kind of work is payment²⁴, whereas families list availability and relatively low price as the main reasons. The nurses come to Austria (in spite of the intense and exhausting nature of the work) because they earn much more there than in their home country or because they do not have a job in their home country. Until the summer of 2006, this unsatisfactory, illegal situation was apparently tacitly tolerated by all parties concerned, and was even considered a win-win situation²⁵ due to the lack of affordable alternatives. The unilateral dependency situation resulting from the prosperity gap between old and new EU member states (Lutz 2007) and the recent development of 'nomadism' in Europe have hardly been mentioned in the discussion on 24-hour attendance. In 2006, Czech nurses in Austria earned almost twice as much as they could earn at similar jobs in their home country, but without social security coverage; the difference was even greater in the case of nurses from Slovakia (Prochazkova and Schmid 2006)²⁶.

In 2006, care service providers usually received between 40 and 60 Euros a day, which amounts to between 560 and 840 Euros for 14 days²⁷. In return, the carers had to be at the attended person's disposal practically twenty-four hours a day during the two weeks of service (hence '24-hour attendance'). The costs to the attended persons and/or their families amounted to between 1,120 and 1,680 Euros a month²⁸ (for two alternating carers). In addition, travel expenses were also usually paid by the family. Additional costs for the agency or foundation (placement fees, one-time admission fees, annual fees, etc.) were also incurred. These costs may differ significantly from agency to agency. In many cases, both the carer and the family of the attended persons had to become members of the 'association'/'foundation'. For example, at one of the agencies surveyed, the one-time costs for the family amounted to 350 to 600 Euros, depending on the distance involved and type of attendance needed (short-term or long-term). Some agencies charged a relatively low registration fee, but one



²⁴ See Prochazkova and Schmid 2005.

²⁵ Higher salary and western European work experience for the service provider, relatively low costs, immediate availability and flexibility for the people requiring care (their families).

²⁶ Even though the rates are higher today, the income relation between the Czech Republic and Slovakia has remained steady. The relation of salaries in the health and care sections between Slovakia and the Ukraine amounts to approximately 1:3 (Prochazkova 2006).

²⁷ Assuming the common scheme of a 14-day 'care rotation'.

²⁸ In order to simplify matters, we assume 30 days to a month.

charged a placement fee of 1,100 Euros. Additionally, some agencies demanded an annual subscription fee for each year the family used their services. Nonetheless, these fees were hardly a deterrent, keeping in mind that the services offered were (and continue to be) affordable and readily available and provide what Austrian suppliers cannot deliver – around-the-clock attendance at home.

Qualifications of migrant care workers

Prior to 2004, most foreign carers placed through agencies in Austria came from the Czech Republic²⁹ and Slovakia. Generally speaking, medical education in those countries is of a very high level. In the former USSR, there were a number of nursing training schools, which educated more medical staff than the country needed. This 'surplus' of nurses and doctors often found work in other Communist and Third World countries (Cuba, Libya, Mozambique, etc.). After the breakdown of the Soviet empire at the beginning of the 1990s, most nurses returned to their home countries, thus swelling the surplus of medical staff. Many nursing schools shut their doors, and a migration of nursing staff to central and western Europe was underway as early as the first years of the 1990s (Schneider 2004, see also Prochazkova 2006).

Today, there is no longer a surplus of nursing staff in the Czech Republic and Slovakia. Nonetheless, a significant portion of medical and nursing staff – including nurses, carers and physicians – seek work abroad due to low wages at home³⁰. With the accession of the Czech Republic and Slovakia to the EU in May 2004, the target countries changed. Today, qualified medical and nursing staff largely migrates to countries whose labour markets were not governed by transitional restrictions on employees from new EU members as of May 2004, such as the UK, Ireland and Sweden³¹. Many are hired during their training in their home countries, and are consequently significantly less qualified than the previous generation of migrants (Prochazkova 2006).

Of course, this migration has direct consequences for the health care situation in their countries of origin; the resulting gaps were filled with staff from other countries – countries where wages are even lower (the Ukraine, for example³²). Thus the source of the chain of migrations is being pushed



²⁹ Today, only a small number of Czech service providers come to Austria (see below).

³⁰ Some of them are replaced with caregivers from the Ukraine.

³¹ On January 1 2007 more EU member states, above all states in southern Europe, abolished transitional rules on the labour market.

³² The language and mentality of the Ukraine and Slovakia are quite similar; moreover, until the extension of the Schengen border in December 2007, no visa was required between the Ukraine and Slovakia.

further and further east. This holds true not only for illegal employment, but also for legal employment: vacancies in the Czech Republic are replaced by Slovakian and, to a smaller extent, Polish staff (*ibid.*). Although most agencies still claim that they place only educated, qualified staff (registered nurses, carers, and elderly care nurses with accrediting documents and sufficient German language skills), in reality their employees often lack any medical or caregiving education/qualifications³³. This does not necessarily imply a lack of commitment, willingness and empathy, but in certain situations medical and caregiving competencies are essential to providing the competent, around-the-clock attendance of people in need of care (Prochazkova *et al.* 2008).

Problems with 24-hour attendance prior to the debate on legalisation and the major changes following the debate

Before addressing the public discussion in 2006, which resulted in an extensive legalisation of home care in private households, problems arising from illegal home care *before* the legalisation will be summarised.

Illegality: Due to general preventive considerations alone, a condition infringing on numerous norms could not be permanently ignored or tacitly accepted, even if all parties concerned were truly satisfied.

Working conditions: The caregivers often worked 24 hours a day, seven days a week, for two weeks non-stop. Breaks were only possible when the attended person's state of health allowed (terms of agreement of many agencies, available on their respective websites) (Prochazkova 2006).

Social insurance coverage: Illegal caregivers had no social coverage or health insurance (apart from standard travel, health, and accident insurance in their home country), and were not entitled to unemployment benefits or a pension from this work.

Tax and contribution liability: The illegal employment caused the Austrian state to lose considerable revenue in the form of taxes and social insurance contributions. This situation is made even more complex by the fact that a legal condition would mean that significantly higher remunerations would have to be paid by the families in need of care³⁴.

Legal Protection: Neither the caregivers nor their families had any legal entitlement to a legal advisor or compensation in the case of damages (malpractice, damages in the home, etc.) or access to a system for filing complaints if



³³ So we were told in numerous interviews in 2006.

³⁴ There was no legal way to work as an independent homecare service provider before 2007; only employment, which was much more expensive, was possible.

mistakes were made³⁵. The illegal caregivers also had no assistance or legal options for asserting their interests if they felt they had been treated badly or overworked by the family. In the event of an accident or illness, the caregivers only had tourist health and accident insurance, if any.

Stress and strain: For weeks at a time (usually 14 days at a time, sometimes longer), the caregivers lived in isolation from their families and friends in a foreign country – a foreign environment with a foreign language. These factors, together with daily exposure to suffering, led to mental strain. The mental overload which can develop if the care service provider is not sufficiently prepared for certain situations and/or certain disease patterns should not be underestimated (when working with dementia patients, for example)³⁶. Physical burdens may also be a factor, as only a few households were (or are) equipped with assisting/lifting devices.

Unfair competition: Non-profit welfare providers experienced the illegal 24-hour caregivers not only as a complement to their work, but often as competition: since these people worked illegally, they could provide qualified work (or work considered qualified) at a significantly lower price without being limited by employment law, fiscal law or vocational law regulations. Staff members of legal mobile services experienced the caregivers' mistakes in care and attendance as additional burdens. Also, nursing home providers experienced illegal caregivers as unfair competition. Before 2006, 24-hour attendance was increasingly considered an alternative to nursing homes in some provinces, even in the case of high care levels³⁷.

Generally speaking, the problems surrounding illegal household support were well known to the relevant stakeholders before the public discussion in the summer of 2006³⁸. Studies had been carried out (Schneider 2004, Prochazkova and Schmid 2005, Sommerer 2006, Bachinger 2006), and several symposia were held (*Volkshilfe Österreich* 2004). Nevertheless, public discussions about this issue rarely took place. Then in the summer of 2006, charges were unexpectedly brought against a number of people in need of care as part of a special police unit's attempt to combat illegal employment. The action took



- ³⁵ Some agencies' websites declare that they guarantee protection in the case of complaints – but to our knowledge this has never been verified.
- ³⁶ Even for highly qualified nurses, dealing with a certain disease pattern in a hospital/nursing home is very different from dealing with the same pattern in a dwelling in which they also reside (for at least 14 days).
- ³⁷ For example, an oral statement made by Dr. Groess at the Department of the Lower Austrian Provincial Government at the beginning of 2006.
- ³⁸ Decision makers from politics, administration and welfare organisations were well aware of the problems resulting from this black market. These problems were also discussed at symposia by an expert audience (*Volkshilfe Österreich* 2004, see also ÖKSA 2006).

place predominantly in Lower Austria, and resulted in fines of several thousand Euros in each case³⁹. These incidents triggered a heated discussion in the media, and it soon became clear that punishing people in need of care for being 'illegal employers' was the wrong approach to solving the problem, especially once it came out that even the family of the sitting Federal Chancellor had hired an illegal care service provider. In October 2006 the newly elected National Assembly enacted a temporary amnesty for all of these cases.

The task of establishing sustainable legislation for 24-hour attendance fell to the newly formed Federal Government. The additional costs incurred by the affected households were at least partly compensated through an allowance system. The new regulations came into effect on July 1 2007; at the same time, the amnesty was prolonged to December 31 2007 (at which point it was again prolonged until June 30 2008, but in a modified form) to facilitate adaptation to the new situation. The main objective of the policy was to find a solution that would be both legally and socio-politically satisfying without significantly increasing costs. The policy makers were confronted with the decision of either adapting the given situation to a legal condition – caregiving is only acceptable in the form of employment – which would have led to enormous additional costs and therefore been unacceptable to both the private households and the public budget; or adapting the legal situation to accept caregiving without employment law restrictions. The second approach was chosen, though not without a great deal of creativity on the part of the legislator (Rupp and Schmid 2007, see also Prochazkova *et al.* 2008).

In addition to the amnesty, an immediate measure was enacted: on November 1 2006 an amendment to the Federal Act on the Employment of Foreigners took effect, legalising the hiring of caregivers (at least from the EEA) in private households. In the first half of 2007, corresponding legal measures were enacted:

- A labour legislation basis for legalising caregivers either as employees (with employment law compromises, especially concerning working hours) or as self-employed persons;
- An allowance system to compensate the additional costs incurred by the families of people requiring care due to the payment of mandatory social insurance contributions for the legal caregivers⁴⁰;
- The adjustment of professional laws (laws governing care for the elderly and the medical profession) to stipulate the task area of caregivers and provide supervision through elderly care nurses and physicians;



³⁹ Some of them were fined several thousand Euros, which was later reimbursed due to the amnesty in October 2006.

⁴⁰ In the meantime, independent home caregivers receive a subsidy of 550 Euros a month; employed caregivers receive 1,100 Euros a month.

The additional expenses of the allowance were divided between the Federation and the provinces in the course of revenue equalisation. Some provinces feature their own allowance systems with higher rates and/or without property considerations, which either replace (Lower Austria) or complement (Tyrol, Vorarlberg) federal allowances. These legalisation measures were first evaluated in the summer of 2008 (Prochazkova *et al.* 2008), resulting in an increase of the allowances for households with legalised caregivers.

Following a tepid reception, the legalisation of homecare has proved to be a success. By the end of 2008, approximately 15,000 home care workers had been legalised, the vast majority of them as self-employed caregivers. Monitoring has yet to be put into place. Responsibility for the legality of the situation lies exclusively with the employer, i.e. the person looked after may be penalised. Although this would conform to the letter of the law, it is considered bereft of any socio-political sense of proportion and is therefore apparently not enforced.

The legalisation has led predominantly to self-employed caregiving relationships, and the model of employed home care has hardly been adopted. This may be due to the fact that self-employed caregiving relationships allow for greater flexibility, in combination with the fact that employment leads to additional expenses in addition to the costs of national insurance contributions. Extra expenses are incurred due to legislation on working hours (overtime/excess work, holiday remuneration) and the collective labour agreement of warranted wages. Furthermore, most persons requiring care (and/or their families) would be overburdened by the tasks associated with being an employer (keeping wage accounts, paying contributions and taxes, payroll accounting). About one quarter of the legal caregivers are not subject to mandatory social insurance contributions, since their income is below the limit for compulsory social insurance (2008: 4,886 Euros a year). In these cases, the household of the person requiring care is also not entitled to claim allowances, since no additional costs are incurred due to legal mandatory social insurance.

Why have all caregivers yet to be legalised? This is partly due to a lack of information on concrete regulations in Austria⁴¹, even though this information and forms can be found on the Austrian government's website⁴² in both German and the languages of the countries of origin. Bureaucratic difficulties (producing legally attested translations of documents such as extracts from police records and the registration of the business) might be a deterrent to



⁴¹ In 2007, the Austrian Ministry for Social Affairs, together with its Slovakian counterpart, campaigned intensively in Slovakia for the legalisation, resulting in high rates of legalisation.

⁴² www.help.gv.at (August 15 2009).

registration, even though support measures⁴³ have made a significant impact. But the *main reason* why foreign caregivers do not become legalised is that they draw transfer income (unemployment benefits, early retirement pensions) in their home countries. They fear that, in the event of a data synchronisation between Austria and their home country, the transfers will be detected, resulting in penalties and enforcements in their home countries (Prochazkova *et al.* 2008). The majority of legalised self-employed care workers (Prochazkova *et al.* 2008: 96) come from Slovakia (79.3 percent), followed by Romania (6.6 percent), Austria (5.2 percent) and the Czech Republic (3.4 percent).

Conclusion

Through the legalisation of 2007 and 2008, a large part of what used to be illegal care work was legalised on the basis of the criteria *legal, affordable, quality assured*. Sound legal protection has been created for the affected households, and the additional costs they have incurred through the new mandatory social insurance have been covered by a public allowance. The quality assurance of care work is guaranteed through a contractual job description, the basic parameters of the allowances and the special regulations of the profession. The care workers now have legal employment⁴⁴ and extensive social insurance coverage⁴⁵, including the right to a pension, which can be transferred to their home country⁴⁶. However, several issues remain unresolved.

Firstly, *false expectations* arose during the legalisation debate. Many affected persons assumed that through the legalisation and financial support, not just the additional costs incurred due to social insurance contributions would be covered, but also at least a part of the direct costs of caregiving (approximately 1,500 Euros/month). This would not have been possible given the budget framework. Moreover, it would not have led to the desired distribution effects since this caregiving model applies only if the family members (usually children and/or children-in-law) have an above average income.

Secondly, the problem of *legal certainty* has not been entirely resolved (Mazal 2007). The contracting parties are not free to decide whether the type of occupation is one of employment or not, this being determined on the basis of various criteria (substitutability, disciplinary code, own equipment,



⁴³ For example, the 'one-stop principle', introduced in March 2008, made it possible to take care of all registration steps at one 'desk' during a single visit.

⁴⁴ Those who exceed the minimum income limit for compulsory social insurance.

⁴⁵ This comprises 'freelance severance pay' as of 2008, in addition to health insurance, old age insurance and accident insurance.

⁴⁶ This is only applicable in the case of members of the EEA and Third countries with a Social Security Agreement.

short-term/long-term debts) (Schmid 1999). Whether each case of 'self-employed' caregiving fulfils the criteria of self-employment or not would have to be assessed individually and, ultimately, decided upon by the Supreme Court. But any resulting criminal proceedings against persons in need of care as 'illegal employers' would be considered unreasonably harsh by all parties involved and would therefore not be pursued in practice.

Thirdly, the fact that caregiving is almost exclusively carried out on a *self-employed* basis is regarded with scepticism by many observers, especially by representatives of trade unions, the chamber of labour and charities. Still, the argument of financial viability is hard to counter, since legally employed caregivers would lead to significantly higher expenses⁴⁷.

The legalisation is therefore a rather successful, albeit compromise-ridden, in-strategy, and has produced impressive quantifiable effects. Confronted with the decision of either adapting the given situation to the legal situation or adapting the legal regulations to the actual situation, Austria chose the latter, mainly on the basis of lower costs and greater efficiency. In the process, legal inconsistencies and a situation that may have undesirable effects on the labour market have had to be knowingly accepted.

With a further rise in the standard of living in the countries of origin of caregivers due to an increase in the wages in the caring professions, home care work in Austria, with its unreasonable hours and relatively low pay, will become less and less attractive to care workers from the present countries of origin. Once transitional regulations governing the labour market have expired, and all jobholders in the EU are granted freedom of movement and residence (by May 2011, or, in the case of Bulgaria and Romania, by January 2014), many of the current care workers will scatter to countries throughout EU in search of jobs that are more attractive in terms of working hours and pay.

The legalisation model described above therefore pertains to employment with an *expiry date*. The question of whether it will be possible to replace the care workers from Austria's neighbouring countries with workers from countries further afield⁴⁸ possessing the necessary qualifications remains unanswered. However, policy has taken a similar stance towards this 'problem' as it did towards the entire matter of legislation before the summer of 2006: following the example of the three wise monkeys, Austria 'sees no problem, hears no problem, speaks no problem'. Thus further conflicts are inevitable.



⁴⁷ If all working hour regulations and holiday regulations were adhered to, four employees per household would be required. The costs set by the collective agreement (pay grades, working hour regulations) are significantly higher than those stipulated in the home care regulations for employees in the household.

⁴⁸ These states will probably not be members of the EEA and the Schengen regime.

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PART IV

Educational dilemmas and the academisation of social work

Chapter 9

Indigenising Social Work Education: Experiences of the Students from the People's Republic of China in Hong Kong

Angelina Yuen-Tsang and David Ip

Introduction

The call for the indigenisation of professional knowledge is nothing new. In the field of social development, the appropriateness of strategies imposed upon developing countries by developed ones has long been a topic of heated debate (CPA Team 1984 cited in Garming 2008). In the field of education, there has also been much deliberation on the need for indigenising curriculum (Altbach 1978). However, it was not until Foucault's (1980) theorisation of the relationships between power and knowledge, which revealed how the production of knowledge can also become a significant reproduction of power, that this discourse was fundamentally reshaped. With Said (1985), who contributed an understanding of the power inherent in and emanating from a Eurocentric knowledge system and, in response, advocated an anti-colonial project for contesting the dominance of Western discourses in the production of knowledge, the universality of knowledge was problematised. In countries whose academic and social settings are least similar to conditions in the West, this has led those in social work who engage in pedagogical activities and service delivery to consider the need for indigenisation in the production of knowledge, especially in the face of increasing globalisation (Midgley 1981, 1992, 2008; see also Walton and Abo El Nasr 1988, Yip 2004, Osei-Hwedie 1993, Wang 2000).

While the views of Foucault and Said have been influential, their deconstructionist and post-colonial perspectives are not shared by all involved in social work education. Walton and Abo El Nasr (1988), for example, saw indigenisation as a stage of transition, of putting an imported knowledge through a process of authentication, thus making it relevant to the local social, cultural, political and economic characteristics. Yan (2005), however, proposed that inter-dependence is more important when a more mature indigenisation of social work practice is introduced in a developing country. Similarly, Yan and Cheung (2006) found it more meaningful to reinterpret indigenisation as a process of re-contextualisation, that is, of the selective appropriation and tweaking of the Western social work discourse on values, theories and practices, to frame a new local social work discourse. These

observations led Gray and Coates (2008) to declare, rather frankly, that indigenisation is an outmoded concept because there are other ways of overcoming professional imperialism or universalistic claims of the superiority of Western social work. In their view, since the 1990s a basic consensus seems to have been emerging from the discourse and debates on indigenisation. It includes the following elements:

- a) Recognition of the importance of the local (Nimmagadda and Cowger 1999);
- b) The inevitability of cross-cultural contacts and exchange, and hence the necessity for cultural sensitivity in social work practices (Coates *et al.* 2006);
- c) Opportunities for and benefits of integrating, adjusting, synthesising and enriching the imported and the local, particularly in terms of ideology, epistemology, technology and teleology (Tsang and Yan 2001, see also Ling 2003, Barise 2005).

For these reasons, they conclude that it would be more appropriate for the discourse on indigenisation to move on and shift its focus from professional imperialism to the concept of cultural relevance.

While these debates have tackled the macro issues of indigenisation and greatly informed the recent development of international social work, the actual processes of indigenisation on the micro level, that is, the ways in which knowledge in social work is imported, filtered, fused, reconfigured, tested, grounded and reproduced in the experiences of non-Western countries, remain under-explored. The primary aim of this paper is to provide a case study of students from the People's Republic of China who have been educated and trained in the Masters of Social Work programme at the Department of Applied Social Sciences of the Hong Kong Polytechnic University since 2000, the year the programme began¹. The text begins with an investigation of the learning experiences of this group of students from their own perspective, and proceeds to delve into the question of how they attempted to indigenise or make relevant what they had learned upon returning to their homeland and embarking on their professional practice. Hopefully the reflections, insights and assessment of their situations will provide a useful and meaningful foundation which could serve as a basis for further research on international and comparative social work education.

The data on which this chapter is based was collected mainly from 56 student feedback surveys implemented by the Masters of Social Work programme between 2001 and 2005. About two-thirds of these students were female, and half of them studied social work and work in social service organisations. More in-depth interviews with 6 recent Ph.D. graduates and current



¹ This program is funded by the German Catholic church charity, Misereor, and the Hong Kong-based Keswick Foundation.

candidates at the Department of Applied Social Sciences were selected using purposive sampling; these were carried out to elicit additional information on the current progress of and efforts in the indigenisation of social work in the People's Republic of China. They also provided a point of reference for checking data consistency, validity and reliability.

The Development of Social Work and Indigenisation Efforts in China

Social work education and social work practice were first introduced in China by American academics at Yanjing University, the predecessor to Peking University, in the 1920s. By 1930, social work courses were quickly embraced by other prestigious tertiary institutions such as Jinling University, Lingnan University, Fudan University, Qili University, Tsinghua University and Furen University (Lei and Shui 1991, see also Yuen-Tsang and Wang 2002). Then in 1941, due to military invasion by Japan, all teaching programmes in social work ground to a halt, not to be offered again until the end of the Second World War (Li 1991). Together with sociology, social work was terminated by the Communist regime as an academic program at universities in China in 1952. Its approach and content were branded as more relevant to capitalist societies, and thus unfit to serve the needs of the country and the people (Yuan 1988, see also Yip 2008). Instead, the government, and in particular the Ministry of Civil Affairs (MoCA), was to become the sole care provider for all citizens by carrying out political work, mass work, or community work through state-owned factories and work units.

Understandably, the MoCA had a mandate and responsibility to coordinate relief work for all marginalized groups, provide relief work and operate welfare facilities. However, its work was mainly administrative, and many of those employed by the Ministry were simply unable to deliver social welfare tasks effectively and efficiently. It was not until the early 1980s, in the framework of the national drive for modernisation and the realisation of the growing need for social services and increasing demands for properly trained personnel to deliver these services, that the Ministry decided to upgrade its social services to more professional levels (Nie et al. 2004). A two-pronged approach was adopted – on the one hand, the decision was made to look to Western models and transplant what was considered beneficial in order to improve current practices. On the other, having benefited from the reinstatement of sociology at major universities, the Ministry, together with a group of leading university academics, advocated the reintroduction of social work as part of tertiary education curricula in 1986. The following year, the State Education Commission formally approved social work courses as part of the academic programme at the Department of Sociology at Peking University. Other universities, including Jilin University, Xiaman University and Renmin University, followed suit. At the same time, the MoCA had also begun to run its own training classes.

Nonetheless, the growing demand for qualified teaching staff outstripped the number of graduates produced by these universities. In 2000, with financial support from Misereor and the Keswick Foundation, Peking University and the Department of Applied Social Sciences at the Hong Kong Polytechnic University decided to introduce a 'train the trainers' Masters Degree in Social Work (MSW) programme, with the purpose of producing more competent and professional social work educators and practitioners in China. At the same time, formal social work training in China was also expanding rapidly. In 1998, only four social work academic programmes were offered in the entire nation. By 2005, this figure had climbed to 160 (Yan and Cheung 2006), and then to 200 in 2006, with over 95,000 social welfare organisations employing more than 400,000 social work practitioners (Ministry of Civil Affairs of the People's Republic of China 2009). Of course, this was fuelled by policies introduced in 2003 by the MoCA for professionalising social work education and social work practice, which required that social workers not only be trained professionally to acquire formally recognised qualifications, but also that they gain proper accreditation through a national examination before being allowed to practice in the field (Chan *et al.* 2009). Also, the communiqué issued by the Central Committee of the Communist Party at the 2006 Plenum, which declared that it was high time for China to build a large, well-structured and qualified corps of social workers, has no doubt given greater impetus to the professionalisation of social work education and practice.

However, it must be noted that, from its introduction in China in 1988 to the call for its expansion and professionalisation in 2006, a constant factor in social work education has been the government's overriding concern for social work's relevance and ability to meet the practical needs of Chinese society, in particular by offering solutions to a host of problems deriving from China's rapid economic transformation and providing stability (Yuen-Tsang and Ku 2008). Another issue surrounding the introduction of social work education that was key for the Chinese government was the possibility that Western 'scientific and systematic' knowledge would be uncritically accepted by academics at universities. While this is a legitimate and reasonable concern, it is also an important political matter because social or helping services in China have long been the exclusive domain of the statist bureaucracy. The adoption of a Western model of social work education could pose a threat to the political influence traditionally enjoyed exclusively by the government bureaucracies (Yuen-Tsang and Ku 2008).

For these reasons, the indigenisation of social work education in China over the last decade or so has always been marked by tensions between practical and theoretical concerns, as well as by conflicts between bureaucratisation and professionalisation. It is easy to understand why Hong Kong and Taiwan, having gone through the process of developing and consolidating their own brand of social work education by adapting and transforming Western knowl-

edge and practices, became a role model of social work indigenisation in China, and, at the same time, Hong Kong was allowed to see itself as a conduit for assisting China in making its own imprint on social work education.

Experiences of Students from the People's Republic of China in Hong Kong

When the Masters of Social Work programme was first instituted at the Hong Kong Polytechnic University, its goals included instilling a set of core values of social work and incorporating respect for human dignity, mutual help and support, social justice and human rights in pedagogy and curricula for students from China. It had a multi-disciplinary approach, requiring students to develop, alongside concrete intervention strategies, a broader perspective in appreciating both macro and micro issues in analysing problems. The programme emphasised reflection on lived experiences and practices derived from practicum and preparation for action research and social praxis, encouraging students to obtain knowledge not only through experiential learning, but also through critical thinking and self-reflection (Yuen-Tsang and Ku 2008).

Given that the content and teaching of the courses were largely reflexive, many key teaching staff in the programme had accumulated experiences of indigenising what they had learned overseas to make their curriculum and practicing skills culturally relevant and appropriate for the social milieu in Hong Kong. They were most conscious of and keen to avoid professional imperialism in delivering their knowledge.

Initially, students from China enrolled in the programme were mostly uncertain as to what its outcome would be; however, at the end of the first year, their feedback was overwhelmingly positive.

What stood out in their feedback was not how much they were appreciative of the special efforts their teachers had made to ensure that teaching materials were culturally sensitive and appropriate, particularly by trying to find relevant Mainland Chinese case material to illustrate the cultural differences embedded in concepts pertaining to political rights and values implied in intervention strategies. In fact, feedback obtained through their evaluations of the teaching showed they were not particularly aware of the efforts the teaching staff had made until later, when they had to put into practice what they had learned. During the time they spent learning at the college, they were more excited about the fact they were coming into contact with new ways of learning and thinking. As one of the students wrote in the feedback form:

It was a revelation for me to find out that there is such a big world out there in terms of social work knowledge – all the new unfamiliar names, concepts and theories, and so much to learn. At the end of each lecture, I always felt I had touched on something new. However, that was not only about theories, but more about the learning process, how one's thinking could be stirred up by simply talking and interacting with classmates and teachers.

Another student gave a more reflexive statement:

I did not think too much about the issue of indigenisation – the issue simply did not come up. Perhaps we were just not ready to ask, especially when we were so busy trying to understand all the new materials we came into contact with. What struck me at the time was that I had never imagined social work could be like this, that it is not a simple act of helping people, but there is a philosophy, an ideal behind it, and that it is a profession. Like others, I was so inspired that I wanted to do all the reading, but my English language was not good enough... Instinctively I just kept making copies of all the readings we were supposed to read and hoping one day I could learn all at my own pace.

It was not until they started putting into practice what they had learned in class that they began to confront the issue of indigenisation. In one of the course evaluation questionnaires, a student wrote:

Before I began my practicum, I thought being a social worker was like taking up just like other job – I didn't think social work is a legitimate profession, and I thought it was good enough just to acquire the basic tool, knowing the theories and concepts. But once I was in the field dealing with real people and real situation, everything started to change for me. Suddenly I was forced to think about issues I was not aware of and had to come up with interventions; I could not find answers from the books and articles I read because the socio-cultural backgrounds of the people I came in contact with were Chinese, and Western-inspired intervention strategies just would not work.

A similar reflection was provided by He, a graduate from Hong Kong City University's social work programme. As a beginning social worker with a Chinese Mainland background practicing in the Tin Shui Wai² area of Hong Kong, she was immediately confronted with feelings of confusion and frustration arising from having to deal with cultural differences and the indigenisation of social work practice standards in the case of the corporal punishment of young children in the community. As someone who grew up in China, she could identify very well with the effectiveness of corporal punishment for disciplining young children. She wrote:

My experience tells me that it is OK for kindergarten children to play out of their parents' sight, and that physical punishment serves a purpose in disciplining children; just as in the old saying, 'No sticks, no disciplined kids'.



² Tin Shui Wai is a new town in Hong Kong's New Territories where many migrants from the Chinese Mainland and South Asian countries have settled. It was labeled the 'city of sadness' after a number of cases of killings caused by domestic violence was widely reported by the mass media. These tragedies also inspired a number of films made by Hong Kong directors.

However, after working as a social worker in Hong Kong, she also learned something different, and uncertainty arose, particularly from not knowing what to do when she witnessed a possible case of child abuse:

The professional stance and the Hong Kong culture tells me that some measures might need to be taken if such situations arise. These two different perspectives sometimes confuse me and cause me to fail to act. One evening in the community the sound of crying accompanied by a father's scolding was heard. Through the window, a chicken-feather duster could be seen. My supervisor asked us to advise different agencies of the situation, and finally she asked me to report it to the police. I hesitated and wondered whether it was serious enough to do this. (He 2007: 651)

Although the feedback from the Masters students of Hong Kong Polytechnic University did not provide examples as detailed as the one above, a number of students wrote about their concerns over the issue of indigenisation and the cultural relevance of teaching and practicing social work when they return home:

In the process of the practicum, it made me think about how I should integrate what I learned in Hong Kong with the social situations in China when I get a teaching job or working for an NGO.

It made me realize that social work education is a political arena – because when you are teaching or practicing, you are making a statement reflecting your ideal, mission and choices. You learned new theories, perspectives, professional techniques and standards for practices and you want to see changes. But changes are not always easy and they are political, and you cannot just change things for the sake of bringing changes...

I did wonder whether what I learned would be helpful in preparing me to work with the system of institutions, organizations and individuals when I return to China. I worry that when I now have a much broader view of what social work and social work education could be, whether I would feel constrained to be working under a system with a different set up in terms of values, visions and attitude.

Teaching and practicing social work in China

Indeed, the worries of the graduates of Hong Kong Polytechnic University seemed to be justified when some of them began their professional career upon returning to their homeland. Many found the institutional setting for social work education and practice to be somewhat woeful. Firstly, the immediate overall impression of those who continued to teach in social work was that of a big letdown. One graduate pointed out that because he had seen how the teaching staff in Hong Kong were able to blend local expertise with perspectives from mature external models, he was disappointed by the resistance exhibited by his colleagues, who came from a number of different backgrounds, ranging from sociology, history, and politics to Marxist philosophy, and worked together to develop an interdisciplinary approach to and deeper understanding

of social work. Similarly, another graduate grumbled about her frustration over how many of her colleagues in the department continued to teach only theories about social work, altogether ignoring a search for more effective ways of indigenising social work practice. 'They simply did not want to have anything to do with practice because they thought practice was inferior to theories without knowing that practices do inform theories.' For this reason, she expressed concern that 'if theories and practice are not integrated in social work education, not only the quality of students in the discipline will remain inadequate... Social work will never become professionalised in China.'

A third informant interviewed for this paper agreed. However, he also commented that at present, a critical issue confronting social work education in China is the lack of experienced social work practitioners in supervising social workers and students. In his view, the problem was two-fold:

On the one hand, formal education did not prepare them to deal with complex problems. On the other, in spite of the best efforts...in their front line work, they are simply unprepared and inexperienced for handling complex problems. Worse still, advice from teachers and supervisors is often not there because the former is not interested and the latter is hard to find.

Some typical frustrations and difficulties could be illustrated by the cases described by the graduates. One example pertains to a graduate working with a group of young people between the ages of 12 and 16 who were considered repeat offenders at a high school due to truancy, bullying, brawls, extortion of money, theft, lack of motivation to study and addiction to computer games. In her view, the school authority strongly believed that the best way to handle these 'troublemakers' was to discipline them and bring them under control. As a school social worker, however, she found it hard not to take a more sympathetic view of the students' perspective, particularly when better alternatives, such as showing these young people trust and care instead of isolating them through penalties and harsh criticism without considering their predicament, were suggested by literature from Hong Kong and the West. Yet, few teachers and administrative staff would support her approach, and she found it difficult to access advice and assistance.

Another graduate who was working with women suffering from domestic violence in Beijing had similar complaints. Strongly influenced by feminist theories and concepts, she found it absolutely infuriating to have to refute the commonly held biases against women in China, which often lead to women being blamed and made the obvious targets of any subsequent treatment or intervention every time family violence occurs.

Another graduate mentioned how, when he started advocating an empowerment approach in helping migrant rural workers settle in urban areas, insisting on developing mechanisms and channels that would allow the vulnerable group to have their 'voices' heard and recognised, as well as using oral history

and other participatory methods for conducting research in social work, he was ridiculed and pelted with derision.

If there is a common thread running through all these cases, it is the gradual discovery that indigenising social work should not only involve making theories, concepts and methods culturally relevant in the Chinese setting. To these informants, a pressing need for a much deeper level of transformation of systems and their mindsets, institutional set-ups and actors affiliated with social work was more important. According to one of the informants currently completing a doctorate in social work, systemic flaws exist which made the indigenisation of social work as a discipline difficult. This is because there is a rift between those who regard social work as a practice profession and those who consider it a pure academic discipline. According to one of our informants, the former are more likely to be returnees trained in the West and Hong Kong, while the latter are those who have been working for the MoCA for some time, as bureaucrats or administrators. Typically, the former believed that a number of social services, including child protection, residential care, community development and counselling, should be delivered and managed by properly trained social workers. The latter, on the other hand, tended to not agree that one needs social work credentials 'just' to deliver these services; they view service delivery as a matter of administration, and as a carefully guarded traditional political domain which is now under threat. Interviews with other informants show that these lines are also commonly drawn among academics in tertiary education institutions, with some emphasising that social work and social work education should be configured to a totalising framework integrating theories and practice, and others, particularly those who were historically transferred to social work teaching from other disciplines, such as politics and philosophy, at a time when there were few qualified and trained social work lecturers, convinced that only theories should be taught.

These rifts have led to a number of unfortunate consequences. Upon their return to China, those who were formally educated as social workers found themselves receiving little support in dealing with problems emerging from front-line practice because formal local social work education had not produced many graduates with competence in supervision. Furthermore, as many lecturers currently teaching social work in tertiary education institutions were originally trained in non-social work disciplines, they did not see the necessity of or have the capacity for preparing students with solid skills in delivering and supervising social services. This has made life even more difficult for those who regard practice as an integral part of social work education. One of the informants who participated in this study complained that:

It was frustrating enough for us [those who were properly trained] to be regularly put down or made inferior by those who know little about professional practice. More discouraging was that if we were employed by the MoCA, where most employees were administrators, we would have

no say in our work, ranging from service delivery to peer performance review or program evaluation. Everything was decided and managed by a rigid set of administrative protocol devised by superiors who had little training and understanding of social work as a profession. Within this system, activities extending from service delivery to professional development and advancement are only matters of administrative concern.

For another informant, this was not even the worst-case scenario. This informant contended that when social workers were employed by the MoCA (a significant employer of social workers in China), they were often assigned to work in government departments and work units where most people had little idea of what social work was or what it is supposed to do. Some responded to the social workers with nonchalance, while others were so confused by their presence that they did not know how to handle having social workers around. Ultimately, it was not unusual to find social workers performing tasks that were completely unrelated to what they were trained for, such as strictly administrative tasks or cleaning offices. Not unexpectedly, many social workers felt uncertain about their professional identity, and would question their self-worth and professional esteem and harbour feelings that they were no different from ordinary white collar workers randomly allocated by the government to work anywhere within the government bureaucracy with hardly any consideration of their potential professional contribution. For these reasons, several of our informants indicated that, despite the current official rhetoric of professionalising social workers and making social work practices more relevant to Chinese cultural contexts, changes in the indigenous Chinese bureaucracy, especially those pertaining to educating bureaucrats about the role and tasks and mission of social work, are of paramount importance.

Equally troubling for many social workers was the fact that they found that they lacked professional status and respect in the community at large. A common misgiving they had was the way they were treated by the government, which assigned them to serve communities where local residents had become increasingly recalcitrant about the social problems they encountered. While many of the workers did not resent what they had to do, that is, implementing intervention strategies and services to meet community and individual needs, some could not help but feel rather disappointed by the community residents' attitude towards them. As one informant remarked:

Ordinary citizens don't know what social work really is, and many believed that we're either good-natured, compassionate 'volunteers', or front-line government officials sent by the government to conduct 'political work' or 'mass work', controlling or placating their anger when things began to get a bit out of hand.

For many social workers who were inspired by the noble humanitarianism and compassion of the profession, it was wearisome not only to find that

people were so ignorant about their work and life mission; they were also let down by the fact that they enjoyed little professional credibility and authority among their clients. In some cases, this led to further disillusionment stemming from the perception that they had few prospects for professional development and career promotion. The fact that social workers in China do not command a very high salary doesn't help either. As one informant (a graduate) lamented, 'if we do not earn more than a clerk or an office worker, how can people be convinced that we are "professional"?' A number of informants expressed their disappointment about how little had been done by the government, their professional association and their work units to publicise and 'educate' the general community in order to increase awareness and knowledge of their profession.

Further Steps in the Development of Social Work in the People's Republic of China

In many ways, the communiqué issued in October 2006 at the plenum of the Central Committee of the Communist Party was a turning point for the continuation of the indigenisation of social work in China. Since its call for the development of policies and relevant mechanisms for building, educating, assessing, employing and encouraging social workers, specific measures have been introduced to rectify some of the problems faced by social workers formally trained overseas or elsewhere. The municipal government of Shanghai, for example, was the first to attempt to give the profession a higher profile: in 2003, it created three social worker agencies outside of the MoCA to work with disadvantaged young people and drug abusers, and backed this up with a subsidy of 40,000 *yuan* (4182,66 Eur³) to cover salaries and overhead. In 2006, the Shanghai municipality employed an additional 8,000 social workers. However, the effort backfired, as only one-third of these were graduates from social work departments at universities (Chang 2006), and many university graduates were unhappy about how high school graduates were allowed to enter the profession of social work.

Nonetheless, in the same year, in a measure intended to professionalise and raise the standards of social work education and practice, three ministries in China, including the Ministry of Civil Affairs and the Ministry of Personnel and Labour, introduced a national certification system requiring all social workers to gain proper accreditation and registration by passing a set of exams, regardless of their educational background. A classification of different levels of social workers and a pay scale based on experience were also introduced. Furthermore, as a quick fix to allow cities greater flexibility in managing the severe shortage of supervisory staff in support of social workers, the



³ All exchange rates are from July 2009.

city of Shenzhen in southern China was allowed to develop its own strategy for building up the capacity of local social workers by allowing government departments as well as NGOs to 'purchase' or import the supervisory services of experienced social workers from Hong Kong, who work part-time or full-time as supervisors to help locally trained social workers become more 'professionalised' and skilled in handling difficult cases (Yuen-Tsang *et al.* 2009).

Despite the introduction of these new measures, for many social work practitioners, the certification and registration of social workers in China will do little to educate the public at large about social work. Through the new system, different levels of social workers have been introduced to provide the professional with a formal trajectory for professionalisation and career development; however, social work practitioners remain divided as to what this could mean for their professional development. In a survey commissioned by the MoCA in Shenzhen in 2008 to assess the development of social work as a profession in the city, Yuen-Tsang *et al.* (2009) found that many respondents were less than pleased about the examination. They complained that, unlike national examinations designed for lawyers and doctors, which require candidates to have completed specified basic training prior to taking the exam, there were no prerequisites for those who took the examination for social workers. In other words, if the examination is open to everyone, it does not confer a professional status upon social work. Some respondents were also worried that the examination focused too much on candidates' knowledge of basic theories and concepts, and too little on their professional values and ethics. Its legitimacy was therefore questionable.

Nonetheless, the government in Dongguan City in Guangdong Province has recently taken note of social workers' complaints, and plans to lift the pay scale for social workers to a level comparable to that of other professionals in China. By its latest revised pay scales for social workers in public social organisations, a social worker at the bottom of the scale – an intern social worker with high school graduate qualification – will fetch a relatively modest monthly income of 2,000 *yuan* (209.044 Eur). However, as soon as he or she gains more experience and qualifications and enters the basic entry point (point 13) for social workers, his/her monthly salary will be increased to 3,000 *yuan* (313.508 Eur) per month; it will continue to increase all the way to an impressive 7,000 *yuan* (731.485 Eur) at point 8, with even higher salaries available through negotiation (Office of Dongguan Municipal Social Work Leading Team 2009).

Conclusion

The indigenisation of social work education, both in terms of theory and practice, has been a topic of heated debate. Conventionally, the narrative of indigenisation was associated with the political undertones of knowledge

and professional imperialism; however, in more recent times, the focus of the discourse has shifted to questions of cultural relevance. In other words, how can social work effectively and appropriately respond to unique cultural contexts (Gray and Coates 2008: 24)? To date, the bulk of the literature on making social work culturally relevant seems to have focused on the transfer and re-contextualisation (Yan and Cheung 2006) of professional knowledge and practices. However, observations of experiences of the indigenisation of social work in China, and particularly feedback from graduates who were trained in Hong Kong and returned to their home country to practice, have led us to believe that there is another dimension, one which the current discourse on indigenisation seems to have overlooked. In addition to making knowledge transfers culturally relevant and free from external or top down domination and embracing self-determination, indigenisation should also mean setting up systems and institutions that make it possible for social work knowledge and practitioners to take root and grow in a sustainable manner.

The experiences of students from the People's Republic of China who were trained in Hong Kong have been very informative. Through joint academic programmes and professional practicum, they seem to have found ways to question, digest and rethink what was offered to them in the social work profession and turn it into culturally relevant tools for professional pedagogy and practice. In doing so, the stage has been set for them to become pioneers and trail blazers for the future of social work education and practice in China. On the other hand, social work educators and practitioners continue to face challenges, especially those embedded in the system and institutional set up, such as the unfortunate rift between an emphasis on theory and an emphasis on practice in teaching and a lack of professional support for social work practitioners in the government and NGOs. Both aspects have been rather disheartening for social work education and practice and their goal of taking root, growing and becoming professionalised in China.

Since 2006, when the discipline received unambiguous support from the central government, there have also been encouraging portents for the development of social work education and practice. New measures, including the introduction of a national certification examination and registration system, have aimed at standardising, qualifying and, hopefully, professionalising social workers. Greater flexibility was also given to the MoCA, NGOs and other government departments in selected cities in China, such as Shanghai and Shenzhen, to experiment with purchasing supervisory services from imported experienced social workers to alleviate the severe shortage of supervisory social work staff and provide beginning social workers with better access to supervision in their work. And the plans recently revealed by the Dongguan Municipal Government in southern China include providing more support, both financial and in kind, for social work training, supervision, and service delivery, as well as the introduction of a professional classification

system and a pay scale for social work practitioners that formally rewards professional training and experience (Office of Dongguan Municipal Social Work Leading Team 2009). These are good indications that the indigenisation of social work is making great leaps forward. Admittedly, there is room for fine-tuning the policies and measures already introduced, and bottlenecks will need to be overcome.

The lessons gained from the case of China are illustrative of the complexities and multi-dimensionality of what the indigenisation of the transfer of knowledge and practice involves. At the same time, some may question whether the Chinese experience of indigenising social work is useful and relevant for other countries, such as Vietnam and Cambodia, which are beginning to develop their own social work identity, but are facing analogous problems (Collins 1998, see also Nguyen 2002, Hugman *et al.* 2007, Evans and Harkness 2008). Either way, the Chinese experience will serve as a valuable reminder of the necessity and importance of conducting comparative research in international social work development.

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Chapter 10

Using Action to Cross Boundaries: An Example of Cross-national Action Research in England and Bosnia and Herzegovina

Reima Ana Maglajlic Holicek

In lieu of a traditional introduction: My story, in a nutshell

For anyone mainly accustomed to preparing, doing and reading about more 'traditional' research studies – that is, positivist or heuristic paradigms – the content of this chapter may be difficult to follow, at least at first. This chapter follows a study I initiated within my Ph.D. dissertation. I am of Croatian and Bosnian descent, and lived the first part of my life in Croatia, where I also began studying social work. This was from 1991 to 1995, at the same time as the war in my home country. This experience made me acutely aware of a particular issue in the relation between education and practice/everyday life. Despite both students and staff being engaged in responding to the newly arisen circumstances of war (as activists and/or through being personally affected by them), the horrific and changing context around us rarely, if ever, permeated our learning space. The war was to change both our personal and professional lives for good. The nature of 'social needs' and the need to amend or completely change approaches is something the entire region of the former Yugoslavia is struggling with due to political changes as well as the social and economic impact of what is frequently labelled the 'transition from socialism to western-style democracy' and/or war.

From 1994 to 1999, I worked and studied in England. The most important part of my professional identity and practice in this period was formed by the knowledge I acquired about empowerment and the possibilities for service user involvement and guidance in transforming both our learning (through education and research) and professional practice. The cross-nationality of my work is therefore based on my own personal and professional contexts. This also influenced my choice of action research methodologies for conducting my study. As someone who learnt solely about positivist (quantitative) research in my home country, learning about different strands within the philosophy of science – particularly the participatory worldview (Heron and Reason 1997) – and the changes in social science research that they imply made a huge impact on me. In addition to the need for the creation of participatory knowledge, the participatory worldview stresses that science cannot be separated from 'the personal' as part of one's personal construct system: 'If

a question has no seriousness for you, why should you expect other people to take seriously the answers you provide for it...Personal experience is no more a subjective, chaotic, anecdotal nonsense in relation to science than it is in relation to life' (Bannister 1981: 194–195).

Researchers of the issue of power in relation to knowledge creation have played an important role in the emergence of action research (Fals-Borda 2006), as well as in the fight to ensure a more proactive role for service users in the 'social relations of knowledge production' (Oliver 1992: 102). Although both action research and service user involvement have been practiced and promoted for nearly 30 years, social work research has yet to widely implement and promote service user control either within individual countries or in comparative, cross-national research (Gibbs 2001, see also Shardlow and Walliss 2003). It remains a contested area among social workers, even though some view it as intrinsic to social work's contribution to the social sciences (Shaw and Norton 2008).

Broadly speaking, this is the situation I wished to address in my work by enabling the active and meaningful participation in knowledge production of people traditionally excluded from such processes. In terms of social work education, this refers not only to service users, but to three groups: service users, students and practitioners. The main research questions echoed ones posed by Torbert (1981):

- a) What should (social work) education do?
- b) How can (social work) education do what it should do?
- c) Which of their aims, strategies, or behaviours would social work educators need to reform in order to educate more successfully?

In order to enable active and meaningful stakeholder participation, I chose to conduct the study using two types of action research: counterpartal role inquiry (a type of cooperative inquiry where participants are usually counterparts rather than collaborators) (Heron 1996) and participatory action research (PAR). This choice is interesting in terms of cross-national research for two reasons. Firstly, the emphasis on personal aspects of inquiry enabled me to choose two contexts for the study – Cambridge, England (the place of my professional 'upbringing' and early career) and Sarajevo, Bosnia and Herzegovina, where I worked in both education and practice from 1999 to 2007. Bosnia was the place of my personal identity and the space of my 'professional maturity'. Like Croatia, Bosnia and Herzegovina experienced the war in the first part of the 1990s (1992–1996), but with graver political, social and economic consequences (which are beyond the scope of this overview). Secondly, the selected action research methodologies emerged in both the 'Global South' (PAR) and the 'Global North' (counterpartal role inquiry), which, in reflection, made them a relevant choice considering both the choice of contexts and of study participants.

The action research framework was intended to help facilitate the stakeholders' exploration of social work education in order to create *shared* new

knowledge. This requirement and the action research methodologies selected stipulate that the core inquiry be conducted through group work. The stakeholders became co-researchers (Heron 1981). Simply speaking, I initiated two groups of co-researchers, one in Sarajevo and one in Cambridge, who jointly explored what social work education should do and how it should do it. Both groups consisted of approximately 15 service users, social work students and social work practitioners. They worked together to refine the research questions listed above and to answer them through cycles of joint reflection and action. The 'glue' for this collaboration was the group meetings, which were held once (Cambridge) or twice (Sarajevo) a month. Each group held five meetings in total, as they didn't want to commit to a longer 'relationship' in this unfamiliar adventure. To inform their reflection and action, the groups used a variety of tools, such as in-group discussion (both groups), reviews of relevant educational structures and procedures at their 'home university' (both groups), and a literature review on the particular themes explored by the group (Cambridge) or surveys of social work students and practitioners devised and implemented by group members themselves (Sarajevo).

Although this was mainly a cross-national rather than a comparative study, some of my reflections as the initiator and facilitator of both groups were comparative. The Cambridge group was more reflective than action-oriented, relying mainly on in-group discussions. This group created a list of 'ingredients' they found were important for students to learn. The Sarajevo group, on the other hand, achieved a balance of reflection and action. It aimed to initiate some changes in educational practice (with mixed success, as will be discussed below) based on in-group reflections similar to those of the Cambridge group. In one sense, the ideas developed by the group in Cambridge (West) were later expanded and implemented by the Sarajevo (Southeast) group – a 'dynamic' not uncommon in, for example, development studies and practice. Both groups found their contribution and the process as a whole to be something new and different from their previous education and practice experiences and different from their original expectations of what participation in the study would entail, even though they received information and were given time to prepare for this process. In both contexts, facilitation of the study faced one main challenge pertaining to perceptions of what research and research participation is. For all of the participants, research was something done *to* you, rather than *with* you. Most importantly, the implementation of findings (the action component) is usually someone else's responsibility. Pushing this responsibility up the chain and away from frontline/grassroots life is not an uncommon feature in social work (Brearley 1975). Another way of viewing this issue, however, is to recognise the embedded level of disempowerment among all the stakeholders who took part, a situation which takes time to address through any activity. For any Ph.D. student, but also for practitioners or researchers, time is an important factor to consider when initiating an action research study, owing to the

time-consuming nature of the process. The studies took a year to initiate in each context (by approaching relevant participants through university programmes and service user groups). Two years is a long time for preparations within the traditional Ph.D. framework. The time required to successfully prepare oneself, that is, to learn how to become a facilitator of action research, and initiate a group or groups to undertake this research bears a greater resemblance to the requirements of longitudinal research. However, this may not be the case in studies with existing groups who choose to 'bootstrap' their collaboration within an action research process (Heron 1996).

The most important 'comparative' element that emerged through my reflection relates to the key messages promoted by both groups. The groups promoted the following messages, each in its own way and in its own words:

- Social workers should become community-oriented change agents, practising as advocates (or using other rights-based activities) working to meet and protect service user needs, rather than fitting them into available services. A sole focus on work with individuals and families – prevalent in both contexts, but for different reasons – was found to be ultimately disempowering and something social work should not do. In Cambridge, group members agreed that 'valued time and relationships have been taken away from social work practice' (quote from the group write-up of their findings). In Bosnia, the group members reflected on how professional practice had been reduced to eligibility assessment and administering cash benefits to service users. In contrast, the group emphasised how social work needs to be a flexible profession, one which supports the service users in accessing all their citizen rights.
- The need for social work education to prepare social workers to become agents of change. This is to be done primarily through the stronger collaboration and involvement of service users and practitioners in all aspects of social work education (from student selection and theory and practice learning to student assessment) – this has since become a requirement in social work education throughout Britain, but not in south-east Europe. The Sarajevo group (particularly the students) attempted to establish a forum which would address this issue with the formal support of the Head of the Social Work Department of the University of Sarajevo. However, other students weren't very interested in such an activity; the students' explanation of their peers' lack of interest was that they simply hadn't undergone the same transformation as they had due to their participation in the action research group.

Both messages are in line with two types of ideas relevant in British social work. Firstly, the findings resonate the growing interest in and resurgence of radical or 'progressive' social work in Britain (Mulally 2001, see also Langan 2002, Jones *et al.* 2004). Secondly, in terms of professional identity, the findings also promote demands inherent in the partnership-based model of

professionalism (Thompson 2002) or collaborative professionalism in social work (Healy and Meagher 2004). Without subsequent, comparative reflection on the study process and findings, this key message from the study may have been overlooked (at least by me). Ideally, it would have emerged through the joint, collaborative, work of both groups, which was not possible due to the resources available to me or the other group members. Language would have also been a big problem in such an undertaking, as many Bosnian participants spoke very little English (and none of the English group members shared my passion for the Bosnian language).

This brings me to the end of the overview of the study and its cross-national and comparative components. I shall now return to some methodological considerations. The first of these will be an in-depth discussion of the choice of action research as opposed to other types of social research for the study. I will then review the study in terms of the quality requirements for action research. The conclusion will discuss some considerations regarding the use of action research in cross-national and comparative research.

Methodological choices and requirements

In order to research the experiences of students, social workers and service users in a study on social work education, a variety of approaches could have been used. In a study aimed at developing and validating a needs assessment model for stakeholders involved in a university nursing programme, Labrecque (1999) invited the stakeholder groups to take part in the study. The author relied on both qualitative and quantitative methods to collect data. These included focus groups, a questionnaire, the hermeneutical approach and magnitude estimation. Had I chosen to follow a similar approach, I could have used a series of qualitative open-ended interviews and focus groups with each stakeholder group I wanted to involve in the study or structured or semi-structured surveys of representative samples of the stakeholder groups.

However, this wouldn't have addressed the issue of power relations between me as a researcher and the three stakeholder groups, whose experiences had been largely marginalized in the formation and implementation of the social work education agenda(s). Most of the decision-making regarding the research process would have been out of their hands – from the formation of research questions to the interpretation and presentation of the findings. From this, it follows that the methodology used would have to allow:

- A more participative approach to determining the research agenda (its renegotiation with the different stakeholders I wished to involve);
- A joint renegotiation of different power issues that appear in any research process;
- A joint exploration within the 'fieldwork phase' of the research process;
- A joint exploration within the 'sense making' phase of the research process;

- The (attempted) transformation of the consequent practices and experiences of the stakeholders involved in the study.

The exploration of different possible approaches led me to consider different types of action research. The reason for this choice is made clear by a brief description of action research: 'It's about inquiry as a means by which people engage together to explore some significant aspect of their lives, to understand it better and to transform their action so as to meet their purposes more fully' (Reason 1994a: 1). The simplest definition states that it is research *with* people rather than *on* people.

Another important reason for the selection of an action research approach lies in the type of knowledge and experience that could be gained through research *with* people. Heron (1981) notes that, 'for a science of persons as agents, my considered view of your reality without consulting you is a very different matter from our considered view of our reality' (*op. cit.* 27). I think this statement best sums up the general objective of this work: its goal was to provide a glimpse of *our* reality, the three stakeholder groups' shared view of the role of social work education in social work practice. A qualitative or quantitative methodological framework would have only facilitated the emergence of 'my considered view' of the experiences and recommendations of the students, practitioners and service users.

As a co-generative approach to knowledge construction, action research combines professional knowledge with local knowledge in a process of collaborative sense-making (Elden and Levin in Levin and Greenwood 2001: 105). Regarding the selection of stakeholders, it is relevant to note that other stakeholders were excluded, most importantly social work academics. There are several reasons for this decision:

- There is a perception – which in many cases corresponds to reality – that as professors, theoreticians and researchers, academics have the most opportunities to inform, create or promote their views through professional research, teaching, conferences and literature. I wanted to give a similar opportunity to other groups traditionally excluded from these processes.
- The majority of service users, students and practitioners I contacted stated that they would be less comfortable opening up and participating in a group if academics were present. They felt that they could easily dominate and take over the group discussion and decision making, at least as the group members take their 'first research steps' together.

This 'exclusion' may also be related to a noted disadvantage of the methodology selected for the study. The application of either qualitative or quantitative methodology would have allowed me, as the sole researcher (rather than a co-researcher), to choose all relevant stakeholder groups that need to be represented in 'the sample'. It would have given me more control over the entire research process and, in the case of quantitative methodology, would have made it possible to generalise the findings of the research.

The work of the two groups falls somewhere between two distinct action research approaches: PAR and co-operative inquiry, as defined by Reason (1994b):

The PAR strategy of developing knowledge through empowering dialogue, initially between an animator and a community of people, appears to be most appropriate when the inquiry involves a relatively large number of people who are initially disempowered. PAR also draws our attention to the political issues concerning ownership of knowledge, and to the need to create communities of people who are capable of continuing the PAR process. Co-operative inquiry is a strategy more likely to be successful with a group of people who experience themselves as relatively empowered and who wish to explore and develop their practice together. (*Op. cit.*: 335)

The study had the following 'PAR elements'. Firstly, it was based on a commitment to partnership between social work stakeholders whose role was previously limited to that of a 'subject' in social work research – this primarily applies to the service users, but is also true of the students and practitioners. Second, it echoed PAR views of what may be called 'the politics of academia'. Together, both points lead to the view that PAR may provide a social validation of 'objective' knowledge, one which cannot be achieved through other forms of research (Fals-Borda 1991). This stems from dialogue (which encompasses discussion and argument) and enabling participation in decision-making across all levels of the research process – from shaping the focus of the study to implementing ideas. Although not straightforward, these processes are enjoying increasing popularity in social work.

Discussions of issues regarding how to involve different marginalised groups in the creation of knowledge are much more prevalent in writings on PAR processes than in those on co-operative inquiry. In these two studies, collaboration pertained to people previously 'left out' of knowledge creation. This type of inquiry is of interest to social work learning and practice since 'by altering who controls knowledge, the type of knowledge produced – and, indeed, the very definition of what constitutes knowledge – may also change' (Gaventa 1991: 131).

In my own view, these issues are intertwined with understanding and achieving reciprocity between co-researchers from different backgrounds. Although financial reimbursement for participants' (particularly service users') time and expertise is a major positive development in social work education, practice and research, it doesn't touch upon the issue of other forms of reciprocity. If we stop at this 'breakthrough', all the stakeholders will miss out.

Reciprocity also applies to learning, an essential element of PAR. Users can learn how to participate in knowledge development and decision-making, whereas professionals can learn how to listen to and hear non-academic ways of interpreting reality and common sense. Through such a process:

...people may learn that the "scientific" foundation upon which regulations are made, and through which their own experiences are discounted, is not so solid, that it is subject to fallibility, conflicting viewpoints, misinterpretation and plain falsification. With this also comes a renewed examination of their own popular knowledge, which, since first days of schooling, they have been taught to depreciate. (Gaventa 1993: 36-37)

Research 'practicalities' and research quality

Practical methodological decisions which needed to be made with this or any other type of research will be introduced through a discussion of the quality requirements for action research. I am deliberately avoiding the term 'validity' because it is inherent in evaluations of the quality of quantitative research. The quality of the study will (and should) be explored through the quality requirements developed for action research. Heron (1996) and Heron and Reason (2001) have developed internal, 'technological' standards for co-operative inquiry, while Bradbury and Reason (2001) outline broader quality issues pertaining to different action research approaches. The study will be described mainly in terms of the former set of quality standards, with the latter only mentioned in passing

Authentic collaboration

This aspect of internal quality is related to the requirement of achieving quality as relational praxis (Bradbury and Reason 2001). This broader quality dimension explores the nature of the relationship between the initiators and participants, how democratic values were adhered to in practice, and the implications of the study for the infrastructure and political structures.

At a minimum, for a research strategy to claim the term co-operative inquiry, I would argue that the nature of the involvement of all participants should be openly negotiated, that all should contribute to the creative thinking that is part of the research, and that relationships should aim to be authentically collaborative. (Reason 1988: 9)

One possible problem with these 'criteria' and ensuring that they are met is the myriad ways in which 'open negotiation', 'contribution to creative thinking' and 'authentic collaboration' can be defined.

Relationships became very relevant for the study. In reflections following the study, the majority of participants in both groups, and particularly service users, stated that they took part because they knew me from other work I had done. This made it easier for them. I had collaborated with a number of service user organisations in both countries (particularly mental health organisations, as this was my field of work at the time) and had made an effort to get to know other organisations. The students and practitioners were mainly contacted through the two Universities (Anglia Ruskin in Cambridge and the

University of Sarajevo in Sarajevo) using lists of current and former students. In Sarajevo, however, contact with former students was not possible due to the war. Therefore, I approached a local organisation which brought together health and social care professionals and service users for joint initiatives. My relationship with students was somewhat different than my relationship with practitioners. I was an occasional lecturer and researcher in a university-based practice and research agency at Anglia Ruskin called Shield. I therefore knew some of the students. In Sarajevo, I co-ordinated an MA programme in community mental health. The relationships I had with some of the practitioners, service users and students were vital to speeding up the process, which nonetheless took a year to complete in each country, as noted above. To prepare authentic collaboration, I conducted dialogical interviews (Massarik 1981). These interviews served a twofold purpose:

- They were an opportunity to discuss potential participants' experiences with social work prior to involvement in the study, their motivation for joining the group and their support needs for participation (either for the group work itself or on a more practical level, i.e. transportation) and to ask them for input which would be used to organise particulars (how often, when and where meetings should be held, etc.).
- They presented an opportunity to provide written, verbal and audio information about action research and my own motivation in a variety of formats.

The interviews were followed by another meeting, where we discussed the interview transcript and any questions participants might have. The content of the interviews was used to refine the study questions, with each individual having an opportunity to phrase their own questions. These were subsequently amended at the first meeting with the whole group.

In Cambridge, twenty people joined the group: six people who use or have used social work services (three mental health service users, two people with learning disabilities and one representative of the Black Women's Support Group), five practitioners (two working in the voluntary sector and three who work in statutory teams or services) and nine students. Five were men and the rest were women. Only one group member was black, while the remaining members were white.

In Sarajevo, the group had fifteen members: six students, five professionals (two in the voluntary sector, one in health services, one in the statutory team and one who was unemployed at the time) and four service users (two from the Association of Mental Health Service Users, the President of the Union of Civil War Victims and the President of the Association of Citizens with Cerebral Palsy). Again, there were only four men in the group. It should also be noted that all of the students were female.

Although participants were invited to join the groups on the basis of their 'official' roles (as service users, students or practitioners), some also had other

roles relevant to social work: they were also carers, practice teachers or students as well as users and/or workers. Several people even belonged to more than one of the three stakeholder groups targeted by the study: they were students, service users and practice teachers, for example. Identity is truly a complex thing.

This quality requirement is related to the broader quality requirement of the plurality of knowing (Reason and Bradbury 2001). However, promoting broader participation alone is insufficient to confront the built-in inequalities of power amongst the various research participants (Powell 2002). An opportunity to speak is not a guarantee that a contribution will be either listened to or heard (Rees in Powell 2002: 27–28): ‘Participation without a change in power relations may simply reinforce the status quo’ (Gaventa and Cornwall 2001: 75). Facilitation skills play a vital role in the process of enabling a different relationship between groups that may all perceive themselves as powerless but, at the same time, be perceived as powerful by other stakeholders.

Facilitation was a key to enabling subsequent group collaboration and meeting this requirement. Practical ideas for the role of facilitator, which is crucial in any PAR/co-operative inquiry, came from my participation in a Hawkwood Conference entitled *Emerging Approaches to Inquiry* (a bi-annual conference at the Centre for Action Research in Professional Practice, University of Bath, UK; for details visit <http://www.bath.ac.uk/carpp/workshops/emerging.html>) and a variety of tools which have been developed primarily to enable the research participation of children (the Spider Tool developed for Save the Children, for example; http://www.ungei.org/spanish/resources/1612_1570.html). The Hawkwood Conference gave me a chance to see facilitation ‘masters’ in action, as its structure and process were based on the principles of participatory inquiry. Reflection on this event enabled me to improve my own facilitation skills. The practical aspects of the crucial role of the facilitator in this process include:

- Demystification skills, to reinforce the right of stakeholders to participate in processes that affect their lives (Evans and Fisher 1999);
- Negotiation skills (Powell 2002);
- Skills for facilitating the learning of all of the co-researchers.

The process of authentic collaboration is beset with tensions, some stemming from the nature of the profession itself. As one participant noted:

Our group seems to have promoted the notion of partnership rather than patronisation, but this seems to me to run into the problem of *whose interests exactly does this profession represent*. It glosses over the difficult mediating role which social workers often have to play. I think another factor behind the negative public image of social workers is that they are always likely to fall foul with one party or the other because they have loyalties to several. And perhaps it lies behind some of the disillusionment felt by

the students. One person I spoke to has considered a social work course with the view of fighting in the corner of the oppressed (forming partnerships with needy clients), but he reckoned that nowadays he would simply be drawn into the role of 'soft policing'. (Service user's diary, male service user, 1999, England)

But the methodology itself did help create a collaborative context for the joint work of the group:

I have the impression, one which I'm really pleased about, that this group realised that we can do a lot on our own, without shifting the responsibility to someone else, out there, who is usually an undefined entity.

My feeling is that we realised that you can look at the same issues from a different perspective, that we can do a lot ourselves, that we can start from our own example. I think this is very important. (Female practitioner, 2001, Sarajevo)

Balancing reflection and action

The importance of doing something together provides a good introduction to the relevance of balancing reflection and action components of the study. At the core of any action research study is a spiral of cycles of reflection and action. As noted above, the English group suffered from a misbalance between these two important 'states', favouring reflection over action. Two possible factors may be noted when considering the lack of action in this group: general perceptions of what research is and who bears the responsibility for action and/or time constraints – as noted above, participants were only willing to commit a limited amount of their time to the study. The group work therefore resulted in a set of recommendations regarding the content of social work education, which were presented to the Head of the Department. In Sarajevo, the actions had a dual purpose. First, surveys were prepared in the group and conducted with practitioners and students to get a sense of their experiences and inform the group work (i.e. in relation to practice placements, an aspect of education which the group agreed was too limited and of poor quality). This group also attempted to implement some of their recommendations, namely to organise service user and practitioner presentations for social work students at the University. Although these did materialise, the students were disheartened by the poor attendance of their peers. In a sense, both outcomes compromise the broader quality requirement of enduring consequence (Bradbury and Reason 2001). Enduring consequence merely 'trickled down' into individual practice. Years after the study was finished, individual participants (both students and practitioners) from the Sarajevo group told me that they still use some of the materials they used in the group to inform their everyday practice.

Divergence and convergence

Convergent co-operative inquiries focus on the in-depth exploration of a single issue throughout one study, while divergent inquiry pertains to an exploration of different issues. The rule is that groups decide on a balance between these two approaches (Heron and Reason 2001). During the initial individual interviews, group members listed issues that they felt the inquiries should focus on. These were then further refined in each group at the first group meeting. Both groups arrived at a variety of issues related to social work education, meaning that both inquiries were divergent, in line with the groups' preferences.

Challenging consensus collusion

A group may draw premature conclusions or conclusions that lack argumentation. One way to avoid this is the regular use of the role of devil's advocate (Heron 1996). In each group, I engaged a co-facilitator for this role. In the Cambridge group, this was a member of the local mental health service user group whom I had worked with on a similar project. In Sarajevo, this was a practitioner colleague.

Chaos and order

In a co-operative inquiry group, a delicate balance between chaos and order needs to be achieved. A 'novel' experience (as one member of the Cambridge group described it) such as this one must involve at least some degree of fear and collusion if a group is to truly take risks and explore new practices, new understandings. This was particularly problematic for the members of both groups. Neither group was comfortable with a certain degree of chaos (if such a state can in fact be quantified). Nor am I sure that, as a facilitator, I myself was terribly comfortable with it at that point, or even understood what exactly the term 'chaos' implies. A recent experience has led me to believe that it may even involve taking a break from the group's 'formal work' to dance on the table to ease the tension or celebrate a successful action. Another type of chaos is represented by an experience I had prior to working with the groups: in a moment of mental distress, a service user burnt the only set of notes. Fortunately (or unfortunately), this experience didn't get out of control. Nonetheless, the implications of what chaos is and can be in a context such as Sarajevo, for example, may be quite different, and may at least partly explain why the members took refuge in the group's orderly work. Also, taking part in new activities, i.e. learning how to conduct a survey or analyse its findings (the Sarajevo group), may have been chaotic enough.

Research cycling

Heron and Reason (2001) suggest going through approximately 6 to 9 cycles of reflection and action in order to allow sufficient time for 'looking at experience and practice from different angles, developing different ideas, trying different ways of behaving', and thus making it possible for 'experiential and reflective forms of knowing (to) progressively refine each other, through two-way negative and positive feedback' (*op. cit.* 184). This is also related to the requirement of achieving quality as a reflexive-practical outcome (Reason and Bradbury 2001). At best, the groups completed two to three cycles and should therefore be considered incomplete.

In England, the group met over a period of six months, while the group in Bosnia and Herzegovina met over a two-month period. The limited amount of time that the participants were willing to commit to the study, coupled with their uncertainty as to what co-operative inquiry actually is, limited our ability to go through the required number of research cycles. Both inquiries at best completed two to three cycles. Although different aspects of the study focus were discussed each time a group met, the groups (particularly the English one) were reluctant to initiate broader action. In the case of the Bosnian group, the members also encountered resistance and passivity from their peers, which prevented them from completing the remaining cycles.

Due to the novelty of this research approach in both social work education and practice, it was very difficult to find participants that were both interested in the topic and sufficiently at ease with the methodology to commit substantial time to the group work. I noticed the same kind of uncertainty in other groups with whom I later conducted similar action research studies (people who use mental health services, young people, etc.). The process of action research, its values and rules – as well as the practical meaning and relevance of those values and rules – make sense only in hindsight, once one manages to 'walk through' them.

This attitude is also affected by a common prejudice about 'what research is'. For example, when I approach practitioners about taking part in research, it often happens that they expect that they will only have to fill out a questionnaire and will never hear from me again. This methodology is also perceived (among practitioners) as something irrelevant and divorced from practice. This perception may have also influenced the use of a survey (as opposed to interviews, for example) when the Sarajevo group members wanted to find out more about the experiences of other students and practitioners.

The diversity of group members may have also been an issue. The focus on a search for common ground required us to devote significant time to sharing experiences and views about different issues pertaining to social work education. These groups still don't have many (if any) opportunities to meet and become better acquainted.

Bradbury and Reason (2001) note that some action research studies give primacy to conceptual learning rather than to concrete, enduring activities. The two studies carried out within my Ph.D. dissertation bore a closer resemblance to the former. Conceptual learning pertains to both the research topic (in this case, the exploration of social work education) and the research methodology (participation in a counterpartal research process as a co-researcher, a novel experience both for myself as a facilitator and the stakeholder groups that were my co-researchers).

Furthermore, conducting a participatory study within the Ph.D. structure leads to 'contradictory demands' because this type of postgraduate degree requires an emphasis on the individual nature and originality of the research undertaken and the presented thesis (Lyons 2002: 343). This contradiction pertains to the overall *process*: To whom are Ph.D. students accountable? What kind of commitment, in terms of time, can they offer the research process, particularly if this is just one of several practices that they are trying to 'juggle'? And what can be considered proof of a job well done?

Action research is best seen as an emergent, evolutionary and educational process for engaging oneself, people and communities which needs to be sustained for a significant period of time (Reason and Bradbury 2001: 12). Stoecker and Bonacich (1992) state that participatory researchers, when writing about their work, tend to emphasise achievements rather than the processes that created them, and 'settle for small victories without acknowledging the absence of greater social change' (*op. cit.* 8). I certainly hope that won't be the case with the two studies I tried to initiate, support and describe.

It should also be acknowledged that the university where I was enrolled as a Ph.D. student was very supportive of the use of action research approaches (despite the fact that the forms I had to fill out to confirm my candidature had distinct positivistic overtones); this might not have been the case at other universities in England or elsewhere. Levin and Greenwood (2001) argue that 'making pragmatic action research the central research approach in Universities would move institutions of Higher Education towards becoming collective "learning organisations" engaged in improving society and the quality of life and away from being redoubts of self-serving and autopoietic academic activity' (*op. cit.* 103). I now believe that I should have formally discussed the relevance of the study for the social work departments at both Universities and ways in which they could have made a commitment to interaction with the groups in order to discuss and – possibly – initiate some of the activities. This would have also been an opportunity to discuss and negotiate the participation of social work academics in the group and could have provided 'the best available tool to merge professional knowledge with local knowledge in a process of collaborative sense making' (*ibid.*).

Concluding remarks: crossing borders through action

The roles of insider and outsider and the manner in which these are negotiated in research, practice and everyday life are very important. The cross-national aspect of this study relates to my own cross-national and cross-cultural professional and personal identity. While this may not be an issue in other cross-national studies, these roles and identities need to be explored in any such research.

The language issue noted in the introduction is relevant for any comparative research, regardless of its methodological framework. Together with difficulties pertaining to the organisation of joint meetings, differences between research traditions and administrative structures in different countries, and other broader cultural differences, language represents a key obstacle when planning or implementing comparative or cross-national research of any kind (Hantrais 1995, see also Hetherington 1998, Shardlow and Walliss 2003). The expectation may be that the communication will take place in English, rather than in another language. Parallel to this, North-South collaboration can also be beset by tensions stemming from 'donor-recipient habits' (Etmanski and Pant 2007: 281) and other power related issues.

Language may simplify the complexity of social work in a particular context (Meeuwisse and Sward 2007). One example comes from an article on social work education (Kantowicz 2005). In this article, the author presents a comparative table showing the length and titles of a variety of social work programmes from throughout Europe. When presenting data for Slovenia, the author notes that the social work programme there is equivalent to a 'DipSW' – a distinctly British abbreviation for a discontinued two-year social work degree programme in the UK from the 1990s.

At its best, action research will be used in cross-national and comparative social work research to enable the mutual learning of people rooted in particular contexts (Matthies *et al.* 2000). The origins of action research (particularly participatory action research) are to be found in global solidarity and work with marginalised societal groups (Etmanski and Pant 2007). This is an echo of recent agreements regarding the definition of social work on an international level (IASSW 2002) and, hopefully, highlights the true relevance of action research for future cross-national and comparative efforts.

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Chapter 11

Concept mapping as a discovery and learning method: the strengths and benefits of its use in social work research and practice

Petra Videmšek and Joanna Fox

Introduction

Concept mapping can be described as a method to help us to understand and pictorially represent our thought patterns in an organised and structural process. It has been used in a variety of ways: to assess and develop learning; to plan curriculum development; as a research tool; to plan assignments / chapters / books; to plan lectures. The strengths of concept mapping are that it is an enabling tool that seeks to share understanding, balance power, and can involve different people in the process of creation and design.

The article will begin with a theoretical discussion of Ausubel's (1968) theory of meaningful learning that underpins the design and development of concept mapping. This shows the philosophical underpinnings of concept mapping and how it was designed to capture meaningful learning, rather than rote learning. We will discuss and draw out the strength of concept mapping from similar processes like mind maps. We then describe some of the uses of concept mapping both in other disciplines and introduce some new work undertaken on concept mapping in the field of social work.

The article presents our personal experience of using concept mapping in two different countries, Slovenia and the United Kingdom, in our PhD dissertations. Its use in Slovenia is presented and relates to a very typical use of concept mapping in supporting learning. The English context example illustrates how it can be used in practice and relates to the presentation of eco-systems maps. In both sections, we discuss how these processes have helped us to capture and analyse data in the PhD. We then present how concept maps can be used to measure development and change in learning, and conclude with their advantages and disadvantages.

Theoretical underpinnings of concept mapping and its previous uses

Novak and Gowin (1984), in the first book on concept mapping, explain the development and usages of this process as an effective learning, teaching and research tool. Concept maps are based on Ausubel's (1968) theory of meaningful learning, according to his theory, meaningful learning is based

on a constructivist epistemology, which posits that human learning is based on cultural, religious and contextual situations and conceptualisations. This contrasts with positivist hegemony which posited that there is only one true methodology exists. Ausubel's theory has three tenets:

- knowledge is hierarchical;
- knowledge advances through progressive differentiation;
- knowledge adapts by integrative reconciliation.

The learner, he argues, possesses an existing knowledge structure which is organised hierarchically with more general concepts sub-divided into more specific concepts. Knowledge advances through progressive differentiation. The learner has a general concept which is modified and made more particular by the more knowledge s/he internalises and learns – this modification of existing concepts and knowledge with new knowledge to advance already existing knowledge is called progressive differentiation. The third tenet of his theory relates to integrative reconciliation, referring to the new relationships that are made between different concepts, including the qualitative growth of knowledge and is shown figuratively in a concept map by the presence of cross links. To advance their knowledge the learner must choose to change and adapt their existing knowledge structure to accommodate the new learning i.e. the learner must choose to learn.

At an early stage in its development, concept mapping was used as a research tool to analyse research data and organise it into a comprehensive whole. Concepts maps were then further refined by Novak and his team at Cornell University to be used in education to develop strategies that promoted meaningful learning. Most evaluation and testing in American schools was based on rote learning and memorisation (Novak, Gowin 1984); for example, evaluation in the form of multiple question testing or short answer testing is based on what a person can remember. It did not test meaningful learning. Knowledge that is grounded in rote learning or memorisation is more quickly lost than that that is acquired through meaningful learning. Novak (1995) hoped to change and influence education processes in American schools through his work.

We next present the uniqueness of concept mapping over other similar processes, and identify why its particular formulation is so effective in aiding teaching and learning.

Many people find concept maps similar to brain storming, mind mapping, or road learning. In some ways, this is a correct assumption, but the use of cross links and linking phrases differentiates this model. Learners, using concept maps for the first time, seem to find it easy to name the 'concept' in the main boxes but find it harder to make the connection between them and define the linking phrases. Linking phrases can be "results in" "contribute to" "leads to", "depend on", etc. Another contrast between concept mapping and mind mapping is the speed and spontaneity with which a mind map is created. A mind map reflects what a learner might think about a single topic,

and can focus group brainstorming. A concept map can be a map, a system view, of a real (abstract) system or set of concepts. Concept maps are freer in form, as multiple hubs and clusters can be created, unlike mind maps which fix on a single conceptual centre. Concept mapping, as developed by Novak and Gowin (1984) is unique because it makes concepts, and propositions composed of concepts, the central elements in the structure of knowledge and construction of meaning.

Description and uses of concept mapping

Concept maps are an effective way to show how the learner can acquire new knowledge and learn meaningfully. They are generally used to either express a conceptualization of an issue to others (Fraser 1993, Glynn 1977) or to attempt to understand the conceptualization of an issue by others (Suen *et al.* 1997, Thatcher, Greyling 1998, Freeman, Jessup 2004). Concept maps have been used in various studies: the study of physics (Gangosa 1996), chemistry (Markow, Lonning 1989), ecology and environment education (Brody 1993), biology (Heinze-Fry, Novak 1990, DeGroot 1993, Coleman 1998), history (Baldissera 1993). Novak and Cañas (2006) explain that concept maps have also been used as a tool to represent the expert knowledge of individuals and teams in education, government and business. It has also been used in science education (Novak, Gowin 1984, Novak 1998), medical education (West *et al.* 2002), and more recently in nursing education (Hsu, Hsieh 2005) and just recently in social work (Anghel, Fox 2008).

In the related field of nursing Hsu and Hsieh (2005) used concept mapping in a nurse education course. Their study highlighted that concept mapping applied in a group environment was a useful tool in enabling students to acquire problem-solving and critical-thinking skills, in enabling them to organize complex patient data, analyze concept relationships, and identify interventions.

In social work practice concept maps can be used in many ways, such as during a consultation with a service user to increase their participation in the dialogue with the social worker. The service user can control the construction of the concept map, whilst the social worker can support the process by asking the right questions and help structure the map. The concept map can represent pictorially some of the issues of the consultation. This process can empower a client, however Marakas and Hornik (1996) stated that in a consultation the trained consultant (the expert) is seen as much more powerful than the client. Users often resist the consultant but simultaneously depend on the consultation as a result of this power imbalance (see also Freeman, Jessup 2004). By using the concept mapping technique, we can support the service user to design their own map and increase the level of partnership working.

Roxana Anghel and Joanna Fox (2008) of Anglia Ruskin University piloted the use of concept map as an assessment tool in social work education. The overall aims of their study were to:

- measure changes in students' learning of core social work concepts;
- produce reliable evidence of the impact of teaching and other learning opportunities on students' understanding of these core social work concepts;
- explore its feasibility as an alternative summative and/or formative assessment instrument.

The first strand sought to evaluate the effectiveness of concept mapping as a summative assessment tool in measuring 'working in partnership with service users'. It showed that concept mapping is a reliable tool in measuring development of learning in social work education – however the study results are limited by the small number of participants and the topic requires further investigation. The second strand confirmed that concept mapping is an effective formative assessment tool enabling students and lecturers to recognise gaps in student knowledge and enable adjustment to student learning and lecturer's teaching materials accordingly. The authors showed that concept mapping has considerable potential for use in social work education both as a summative and as a formative assessment method (*ibid.*: 33). (The first strand of this work has now been published in (Anghel, Fox and Warnes, forthcoming).

In the next part of the article, we are going to present how we construct our own concept maps. Both concept maps have been used initially in different ways, showing the strengths of the concept mapping process, however we will discuss how these two different applications have more similarities than differences in the way they are applied in our learning processes.

Construction of concept maps – a Slovenian example

As has been previously presented, a concept map can be described as a visual tool for organizing and representing knowledge and as a technique to make sense of a particular domain (Novak, Cañas 2006). The concept map shows the creation of new knowledge that is based on a pre existing knowledge structure. I (PV) have used the concept map to promote my conceptual understanding of the issue. Concept maps were prepared by the author according to the general principles outlined by Fraser (1993), Glynn (1977), Novak, Cañas (2006), Ramon (2006). In my work I used a software programme developed to support the use of concept mapping (IHM CmapTools <http://cmap.ihmc.us> 20.02.2009), described below. This enables me to use concept mapping much more effectively to outline my main concepts and highlight the links among those concepts.

The structure of a concept map is constructed to represent a number of key concepts that apply to a particular knowledge domain. The number of concepts that is initially presented depends on the learner's knowledge of the issue and also depends on the stage s/he is in their learning. The concepts are

words or ideas that relate to a topic, and are usually put into boxes. Boxes are connected to each other with the linking line that includes linking words that specify the relationship between the concepts. The connecting arch represents the concept links that shows some connection between different concepts.

Novak and Cañas (2006) stated that the links between concepts show different segments and domains of knowledge on the map. They help us to illustrate how these domains are related to one other. Cross links are important in order to show that the learner understands the relationship between sub domains in the map. An effective concept map will capture the generalities at the top of the map moving to more specific concepts towards the bottom of the map. The linking phrases make concept maps different from other ways of learning.

This concept map shows my understanding of the domain of work at the beginning of the PhD work. The PhD focuses on the decision making influences of people with mental health difficulties in mental health services in Slovenia. One strength of using concept mapping lies in its ability to explain long sentences with a simple visual representation. We can see immediately what we are trying to express without reading a long tract!

Figure 1.1

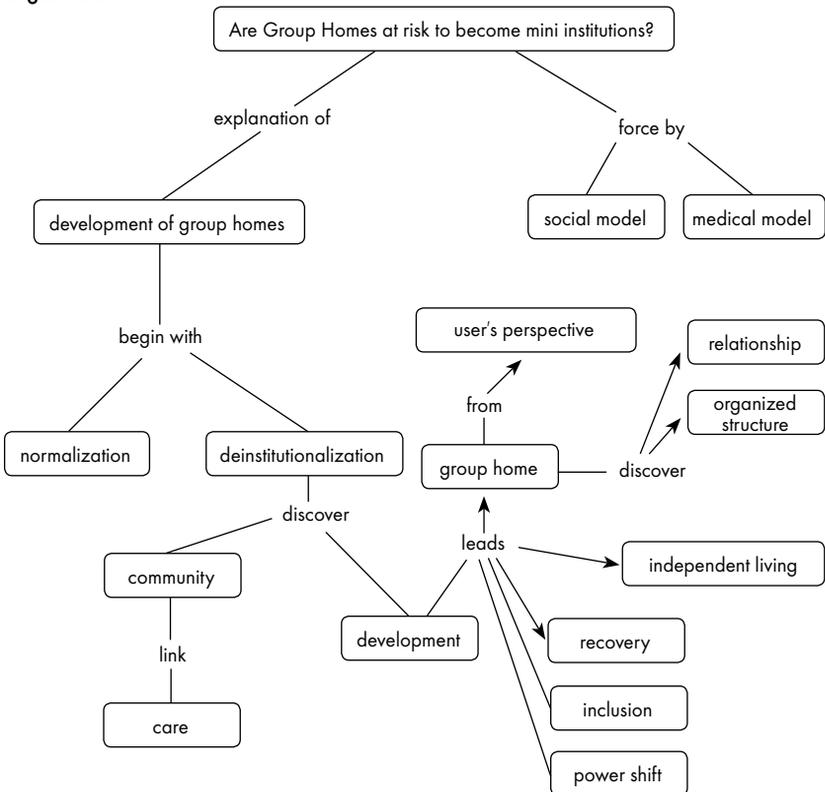


Figure 1.1. shows an example of a concept map and demonstrates the level of understanding that I had it about the topic, before I went into it in more depth.

Before designing a concept map we need to define what we are trying to represent. In this example, undertaken at the beginning of the PhD work, I tried to define what are the main theories, concepts and processes underpinning social work that led Slovenia to establish new structures for people with mental health problems. In the map above we can see that the main focus of my work are group homes for people with mental health difficulties wanting to present the strengths of group homes from the user's perspective.

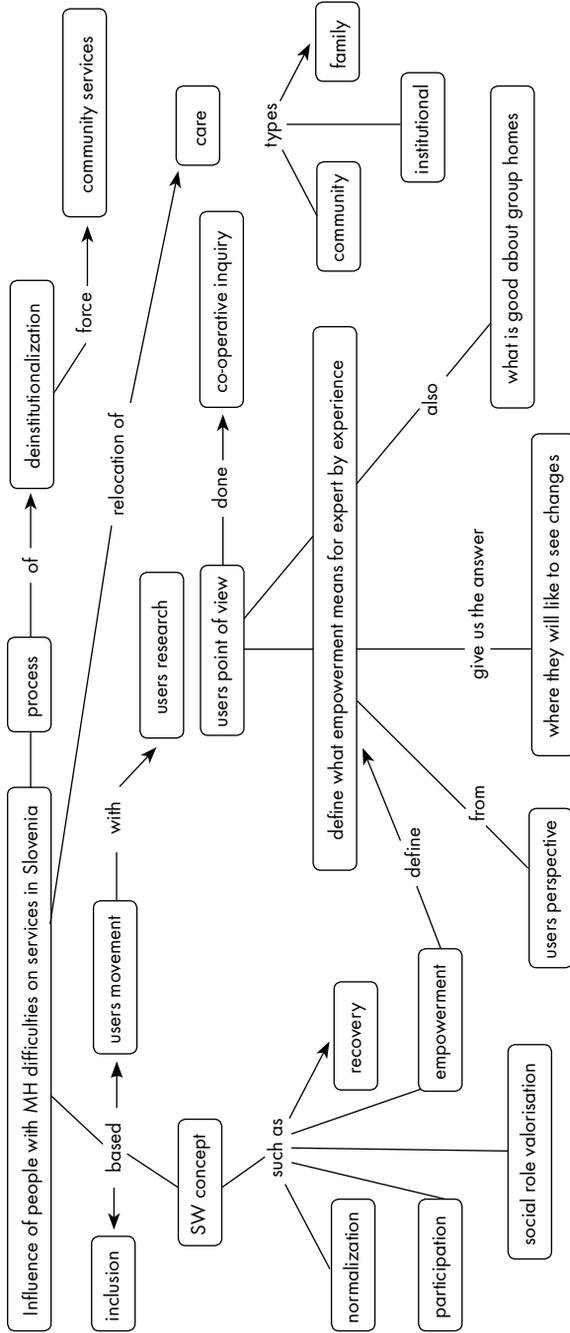
Many authors (Novak, Gowin 1984, Fraser 1993, Freeman, Jessup 2004, Novak, Cañas 2006) suggest that the best way to define the context of the concept map is to construct a focus question. With the focus question we can clarify the issue in the concept map. A focus question in my work might be: *'Are group homes at risk of becoming mini-institutions?'* We would then begin to explain and develop this theme further – as the concept map suggests.

It is important to recognize that the concept map is never finished. It is a process of our development and creation of the new awareness and understanding. The preliminary map (Figure 1.1) represents the basic knowledge in this field that I possessed when I started my PhD. It has increased my understanding in how to organize the theme, defined the theory that the group homes are based on, and created a more focused and more detailed research question. The concept maps change with the acquisition of new knowledge, which influences and alters the focus question, making it more precise. This is reflected by Ausubel (1968), who stated that learning can only take place when a learner applies new knowledge to his/her existing knowledge structure. This new knowledge influences or changes the learner's previous existing knowledge structure. With the new knowledge, the map becomes more detailed and more complex. Similarly, Novak (1977, 1995, 1998) states that by using concept maps we create a new knowledge which shows a relatively high level of meaningful learning accomplished by individuals who have a well organized knowledge structure in a particular area and also a strong emotional commitment to persist in finding new meaning.

Markow and Lonning (1989) also stated that concept maps have been demonstrated to be powerful instructional tool which assist students to clarify their understanding and make explicit connections between concepts. In that way concept mapping can be described as a tool or as a technique for visualising the concept and the relationships between different concepts and as a structure for organising an individual's knowledge. These points influenced my PhD work.

As Figure 1.2 shows, the concept map helps me to clarify the understanding of the topic and shows how knowledge is developed. The maps that follow show extended understanding of the domain.

Figure 1.2



The preliminary map also helped me to discover gaps in my knowledge. By reading around and new learning, the concept map changes and creates new meaning, which is a good way of learning. Novak and Cañas (2006) suggested that when we revise the map, other concepts can be added. Good concept maps usually require three to many revisions. As is seen in the Figure 1.2 the concept map becomes more complex and detailed. Repeating the concept map leads to an improved map with linked resources and also helped me to learn more about the topic. A concept map shows the structure and the organization of my own knowledge and presents how I integrate new learning into existing conceptual frameworks. Through my exploration of the issue I am constantly faced with the challenge of self evaluation and self reflection.

One characteristic of the concept map is that the concepts are usually hierarchically represented but can also be organised in different ways. The ways the concepts are graphically represented depends on each individual. Many authors (Cañas, Novak 2004, Freeman, Jessup, 2004, West *et al.*, 2000) outline that the concepts are represented in hierarchical fashion. I do not feel that this necessarily has to be the case. It is not necessary to put the focus question at the top. The presentation of the concept map will differ from individual to individual. This is a good example when we try to present a historical overview of a particular issue.

The computer software programme for concept mapping allows us to use different shapes for the main concepts and also different colours avoiding the need to present it in a hierarchical fashion with the most general concept at the top. With the different concept maps a deeper and more complex understanding of the issue is emerging.

Figure 1.3 shows an example of the concept map with different shapes and colours and the description of the structure of concept map.

Figure 1.3 demonstrates a map based on the theory of inclusion. Inclusion is presented in many different dimensions: structural, political, economical and environmental. Because many different structures are defined as community services (such as day centres, crisis intervention, and assertive outreach team), my PhD work explores the process of transition from institutions to group homes. I also compare the development of community services in two countries: in the United Kingdom and Slovenia. The development of community services is underpinned by the processes of normalization, social role valorisation, and empowerment, which all promote social inclusion. In the main focus of my work, I explore in practice how the basic concepts of social work, such as participation, empowerment and strength perspectives can be realised through user research. Participation in co-operative inquiry ensures that service users become the researcher and not objects of research. The final questions to emerge were: Do group homes support social inclusion? Has the process of deinstitutionalization in Slovenia been abandoned? Are group homes an interim step towards full social inclusion in the community?

(The process seems to have come to a stop with the continued building of group homes, but no moves towards enabling service users to move out into the community). This information was then compared with processes in the UK, which is further along on the road towards de-institutionalisation and de-hospitalisation.

Concept mapping has been used as a visual aid to show the development of learning and how the connections between concepts (and at the first stage only ideas) become more complex. I found concept mapping useful to assess my understanding of the theme, as a means of self reflection and self evaluation. It also gives me good feedback in enabling me to identify concepts, target my goals and to find the gaps in my knowledge. Concept maps help me to find new connections between concepts and to extend my previous understanding. As was presented in Figure 1.1 to 1.3., I have demonstrated the different complexities in the components of the concept map. The complexity of a concept map aids a learning process where new meanings are obtained by asking questions and getting clarification on the relationships between the old concept and the new concept and its propositions.

It is interesting to note the different ways in which people with different learning styles use concept maps. In the following example we are going to present the use of concept mapping in a different way – based on a more practical and graphical way of using concept mapping with carers.

The use of concept mapping for practice – an example from the UK

Personally I (JF) found it initially very difficult to use concept maps. I found it difficult to organise my thoughts logically in a graphical format on paper. This has been reported by other students in studies on concept mapping (Hsu, Hsieh, 2005). As with all methods, we begin to develop and add learning to our armoury, and interpret and use them in different ways (as Ausubel's theory of meaningful learning suggests). Perhaps because I found the process of concept mapping difficult initially, I avoided using it in its pure conceptual form and developed a practical way in which it could support and develop my learning.

As already outlined above, concept maps in the social work field can be also used in the consultant situation with the service user. Novak (1998) shows how a concept map can be applied to enable the service user to look at their life and identify the positive and negative forces in his / her life and how they relate to his / her wellbeing. Using such a method, can increase the participation of users and move the social worker/client relationship more towards a partnership relationship.

I have used an adapted form of concept mapping in teaching as an effective tool to enable trainee social workers to understand and apply eco-systems theory in mental health. Eco-systems theory, when utilised in social

work, recognises that each person is connected to a complex social web that supports and enables that individual in a different way (Kemp *et al.* 1997). The social worker can begin a dialogue with a service user and use the concept map to represent pictorially their life experiences. It can enable a service user to think about the different relationships she/he might have with different people and their individual roles that they play in his/her life. This graphical system of representation can empower a client as it is a simple process that can be easily understood by the service user, and she/he remains in control of what is written.

How have I applied the process of concept mapping in my research? My PhD is an exploration of the role of carers in the recovery of people with schizophrenia. At the heart of the recovery approach is a commitment to hope and optimism and a belief that the service user with this illness has the potential to live a rewarding and fulfilling life, and will learn to manage his/her mental health issues. It emphasises the journey of life is a learning process as is the journey of mental health. Recovery has been described as "a deeply personal, unique process of changing one's attitudes, values, feelings, goals, skills and/or roles. It is a way of living a satisfying, hopeful and contributing life even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental illness" (Anthony 1993: 13). I have facilitated a steering group of "experts by experience" (including service users, carers, and professionals) to develop a training programme on the recovery approach that will be used as a tool to explore with carers their views of recovery. I am currently recruiting carers to the training programme and interviewing them to ensure they are fully informed about their participation in the training programme and research project.

How did I use concept mapping? As I have interviewed each carer for participation in the programme, I tried to gain a picture of their lives and how they felt about the care they provide. In getting the carers to talk informally about their lives, I used the concept mapping method 'naturally' and spontaneously as I talked with the carers. We talked about their caring role and the way they lived their lives. We spoke together and developed the concept map together.

As I find myself discussing this process with a carer, I find that the concept map flows naturally from this conversation. Hay (2008) has developed a process of dialogical concept mapping. He talks about a process where the teacher and the learner engage in a dialogue, where the teacher/educator is able to see the thought processes that makes the maps, stating that "Dialogical concept mapping makes the *workings* visible and enables feedback anchored in a concrete record of learning processes rather than its finished products" (*ibid.*: 1059). This to me is a process where we engage in a relationship of partnership building with the service user. Novak and Gowin (1984) proposes that

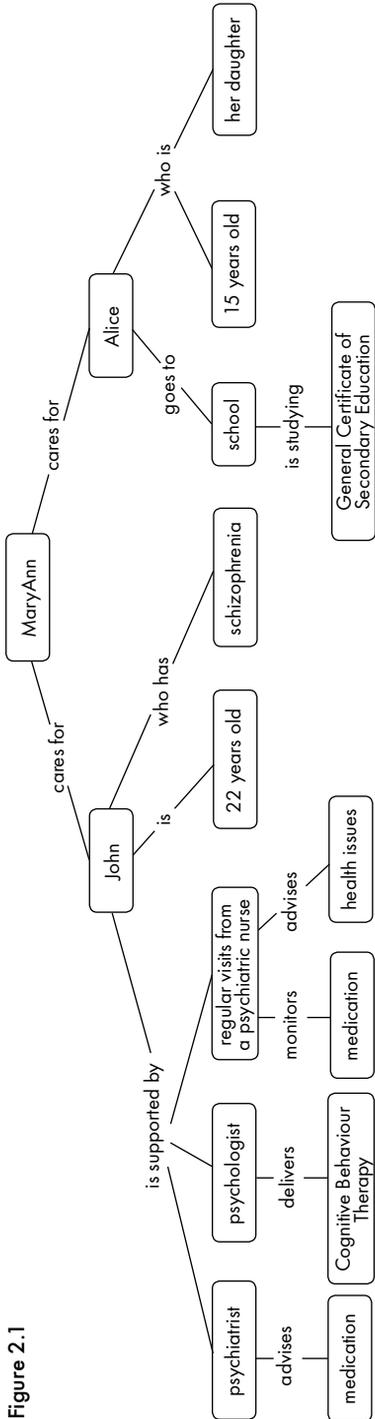


Figure 2.1

concept mapping is based on a relationship of equality and respect – in such a process I can see this learning based on listening and dialogue as a positive and empowering experience.

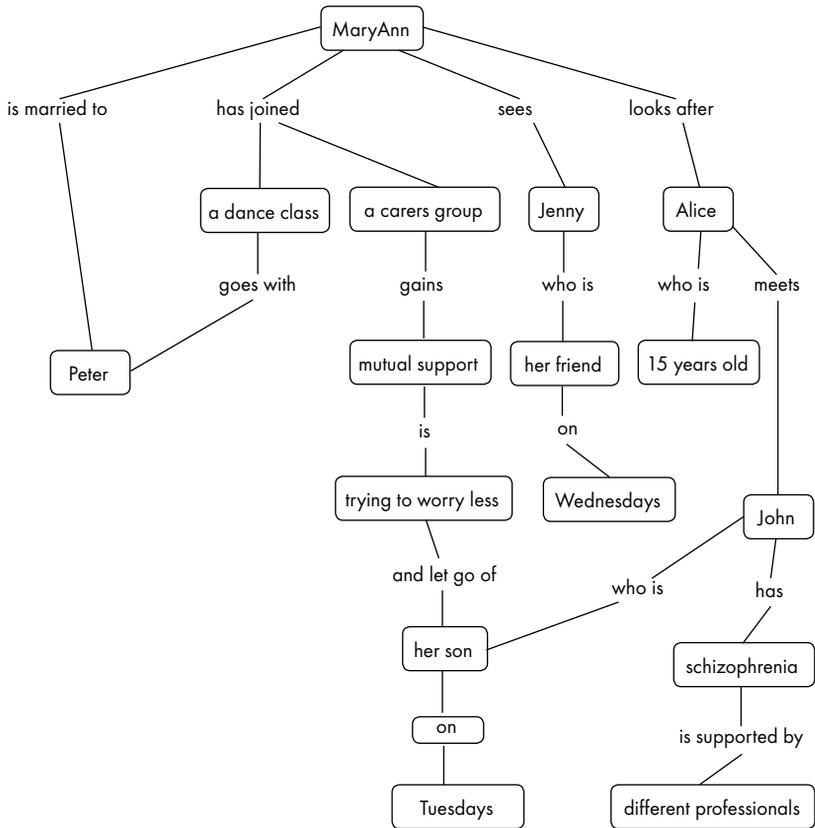
I noted that the carer talked much less about him /herself than the service user or his / her other children. It represented very much the kind of thoughts this person had about his / her life and his / her needs. This map is a composite map based on the conversations I had with a number of carers to show the way they presented their lives.

If I had been more aware of the potentialities of concept mapping, or had designed the research methods in a different way, this concept map could have been used as a process to compare any changes in carers’ behaviour and the way they perceived the relationships with the service user. Due to my own difficulty with using concept maps, I resisted their application in this case. But I find myself using them more and more in my conversations with carers, and it has the potential to be an excellent data collection tool and also very empowering in enabling the carers to see the changes in the way they cared for themselves and the service user. I will use the concept mapping approach to try to capture some of the conversations we have. It will be interesting to see how the maps appear after the delivery of the training. Will they start to think more about their own needs and about their own lives? Will they begin to think about things other than their caring responsibilities? Will they be thinking about trying new activities?

Novak and Gowin (1984) have talked about the development of expert

maps. An expert map is a map that is developed by an expert to show how a concept or focus question can be developed in the most effective way. A map that I have created could begin to show some of the differences in carer activities and thought patterns that might emerge after the training programme. If they begin to represent their lives in the following pattern then we can begin to see changes in how they orient themselves and their caring situation.

Figure 2.2



Here we see Maryann trying new activities, seeing her son less, trying to leave some of the caring to professionals, doing new activities with her husband. The concept map shows automatically the changes in behaviour we will be measuring. In addition, the method has a potential to equalise power and make the research process much more visible to carers – so they can see the changes in their lives. However, as already mentioned above, Marakas and Hornik (1996) have pointed out that in the consulting situation the trained consultant (the expert) is seen as much more powerful than the client.

So how do we equalise power? Possibly we can only acknowledge that power differential and work within it.

This initial resistance may relate to my kind of learning style which utilises language and vocal discussion. But if I apply Hay's (2008) dialogical concept mapping I am able to overcome this resistance. The concept map becomes a process of evaluation that can be used to enable carers to compare their concept map before and after the training programme. It will be an effective way of capturing their lives from their conversations.

Novak and Cañas (2006: 28) stated that the concept map can also be used as an effective tool for evaluation. The latest version of Cmap Tools also facilitated the use of concept map for assessment. For example, "compare concept maps" tool allows the comparison of different concept maps. In our work this comparison is linked with the development of new learning and new knowledge that relatives possess at the beginning of the course and at the end.

My research also compares the situation in Germany to that in the UK. I focus on the province of Berlin-Brandenburg (service provision differs in different areas) and use a concept map to try to represent the services used by 'John'. My investigations so far have been undertaken to understand the service provision, the models used by mental health professionals, the impact of the recovery approach on Germany, and the role of the carer. I began to use a concept map both as an eco-systems map and also as a conceptual map. This was completed on my initial return from Berlin, and has gaps and inconsistencies in it.

The map shows how I consider the differences between practice in Cambridge and in Berlin. Taking one strand I note that there are different arrangements for providing mental health care in Germany, like for instance that the community mental health teams are not routinely formed as in the UK, but can exist as discreet informal relations between different state insurance companies. I begin to see the differing role of the social worker. This a different role to that played by the social worker in a community mental health team in the UK; I can also see the gaps that I don't understand, and can identify the bits I have incorrectly assumed. This map can be shown to a German colleague to visually express how I understand the system – which I know is as yet still incorrect and needs clarification – but the beauty of the concept map is that my gaps in knowledge and incorrect assumptions can be identified quickly. It is interesting to note how this map starts off as an eco-systems map but starts to include concepts, ideas, and research processes. The way that I am beginning to use this map has many similarities with the way concept maps are used in the Slovenian example: it has moved from purely a graphical eco-systems map to a more traditional concept map. This shows the way this technique can be adapted for different uses. We will discuss the further application of concept maps below.

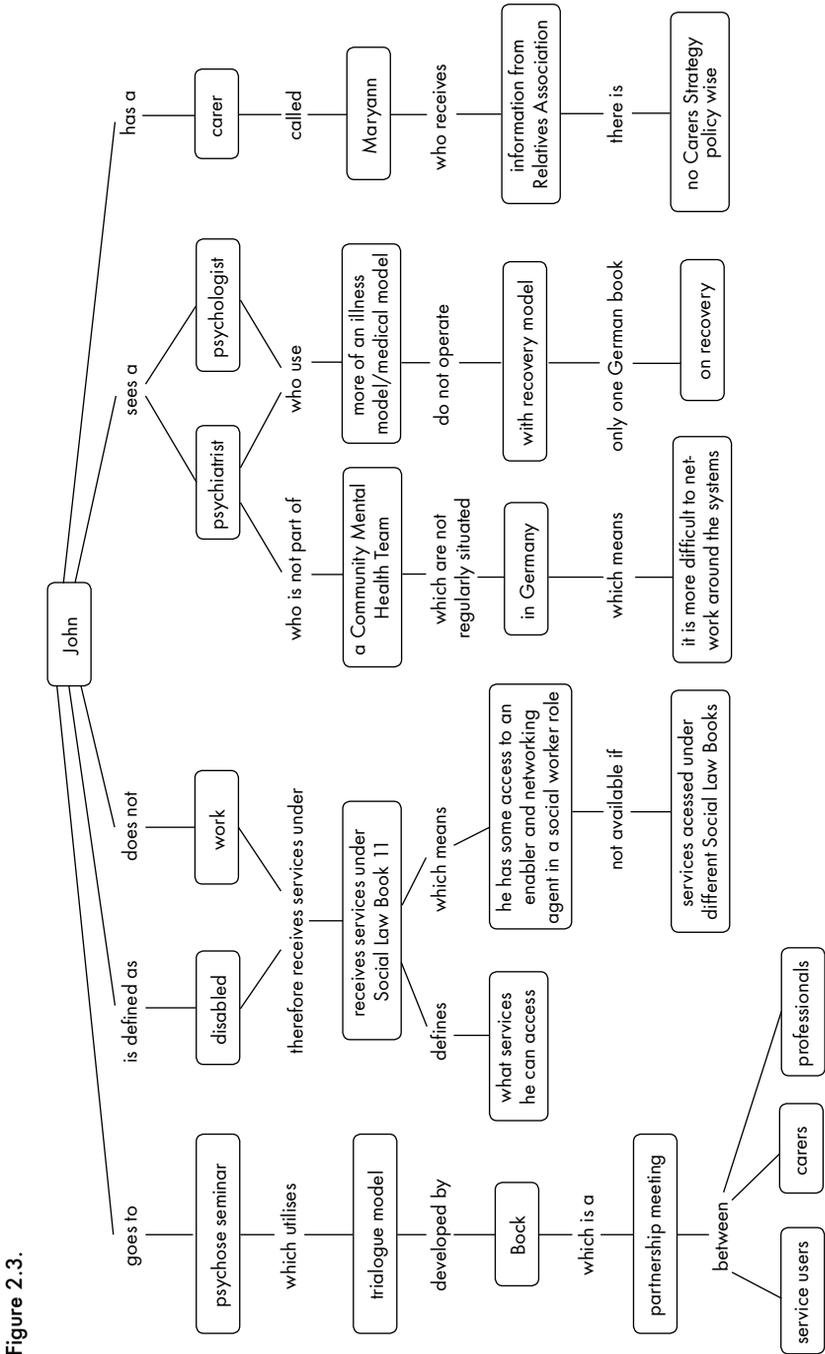


Figure 2.3.

How can concept maps be used to demonstrate the development of learning or changes?

What can we learn from these different ways of using concept maps? The Slovenian example shows how concept maps can be used in their purer form to capture the development of concepts. The UK example shows how it can be used in a more practical application. But how can we use the maps to demonstrate development of learning and development of thought?

Novak and Gowin (1984) developed a quantitative process for measuring the development of learning in students. He proposed that a numerical value is given to each concept, link, and cross link. If a learner completes a concept map initially at the beginning of the course the concept map will show a baseline; as the learner develops his / her learning, a second map completed at the end of the process will show a greater depth and quantity in the concept map.

Daniel C. West *et al.* (2002) tried to demonstrate the difference between the effectiveness of structural scoring and relational scoring at assessing the development of learning using concept maps in medical students who received training about seizures. A concept map was completed before the beginning of the course and after the course. The former used a system based on Joseph Novak's (1995, 1998) quantitative scoring to evaluate the development showed in the concept maps, the latter tried to evaluate changes using a more qualitative process – the concepts and links were weighted according to their quality and importance in seizure management. The structural scores could show the development of knowledge and learning, however the relational scores did not show the predicted change or development of learning.

In the study undertaken by Anghel and Fox (2008), (of which I am one of the authors, J.F.) we experimented with a number of different ways in which concepts maps could be used to measure growth in meaningful learning. We developed a system that combined both of these approaches: relational and structural scoring systems. The maps were scored blindly and showed good interrater reliability. To validate this scoring process, the quality of

the maps was also analysed by two scorers. Our results showed that concepts maps scored in this way could effectively show the development of learning.

If we look at Figures 1.1–1.3, a more traditional use of concept mapping, we are able to see the development of learning in the shape of the concept maps. The former shows a development of maps from single strands and chains to more complex networks. Hay (2007) presents one methodology to demonstrate development in learning, terming the different structures in concept maps as spokes, chains and networks. He notes that if the concept maps change the state after initial data collection, there can be a demonstration of a particular kind of learning. Non learning is measured by a lack of new concepts in the second maps and by an absence of new links. Rote learning is

defined by the addition of new knowledge but the absence of links between the newly acquired concepts and those in the prior map. Meaningful learning is defined by the addition of new links and new conceptual links between the old knowledge and the new.

An analysis of the map used in the English example shows that we can draw certain conclusions from the map. It cannot be scored in a similar way to the maps that P.V. has presented. In Figure 1.1., we can see the carer only thinking about their caring situation, not about themselves and can begin to see things that are lacking in their description of their lives. If they could begin to see the possibilities in their life and produce a map of the 'ideal' life with the carer at the centre it could enable them to begin to think about their own needs and wishes. We could analyse the map in a qualitative way to see the changes in carers' lives before and after the training programme. It would be very difficult to score it quantitatively with the scoring systems developed above. This use of concept maps is less explored in the literature we have found. However the final map, figure 2.3, has a similar potential to show the development of learning as discussed in PV's example, because it is in the form of a more traditional concept map.

Advantages and disadvantages of the use of concept map

One of the strengths of concept mapping lies, as was shown in Slovenian experience, in arranging an article or a presentation. With only a few concepts we can explain the whole content of the article. Using a concept map in a presentation can explain hours of our work with only one slide. In this context it can be used to visually represent this process and enable the viewer to understand the thought processes.

Concept maps help to make clear where we have been, where we are going and where we are. It can be used for self-evaluation and self-reflection. We are able to see what is missing in our work, what is needed to be added and what we need to take out. Concept map can be used as a comparative tool. The Cmap tool allows making the comparison between different concept maps and ensures discovering the commonalities and differences.

Another important advantage relates to the understanding of learning. Novak and Cañas (2006: 5–7) pointed out that "human memory is not a single 'vessel' to be filled, but rather a complex set of interrelated memory system". They argue that concept mapping serves as a kind of "template or scaffold" to help to organize knowledge and to structure it, even through the structure must be built with small units of interactive concepts and propositional frameworks. This enables to reflect on the process and really demonstrate what we have learned – that it is understood as deep learning and not just as surface learning.

It takes a while to be proficient in the use of the software program, and even developing an understanding of how to design concept maps by free

hand can be difficult to grasp. Our experiences highlighted that different people find concept maps easier or more difficult to use. Novak and Gowin (1984) argued that the earlier that concept maps were introduced to students in their education career, the easier they found them. Perhaps from our own experiences we find different ways in which concept maps have been adjusted for use by different individuals.

What we however have realised is that the final map completed in the example from the English research, figure 2.3, has been used in a similar way to the Slovenian example. This shows how while we have began from different starting points in using concept maps, had different responses to their usage, and different results, we have however both learned that we are more connected in the way we use concept mapping than we believed before this comparison.

Conclusion

In this paper we attempted to outline the theoretical underpinnings of the concept and how they have been used in different ways. With two different presentations of the use of concept maps, we have tried to show its strengths. We show that concept maps can be used as a tool to enable learners to learn, to enable the researcher to create a research framework, and for teachers to prepare a presentation, and for social workers to use as a tool to work in partnership with service users. We use it for the work in our PhDs and we find concept maps to be an effective tool to enable us to structure our work, help our writing, explain the stage of our work, understand past and current our developments, and enable us to analyse our data more effectively.

With this article we also want to invite our colleagues not only to use the concept map for learning, but to discuss its use. Cmap tool can be used by anyone and can support the user to exchange their views. We invite you to participate in this dialogue and increase our learning about this effective and useful tool.

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Chapter 12

Can the Development of Doctoral Studies in Social Work Resist the Neo-liberalism within Academia? Some comparisons

Darja Zaviršek

In other words, if there is no possibility of getting an internationally accepted doctorate in social work according to the standards of IASSW/IFSW and European universities who offer Ph.D. curricula in social work, the chances offered by the Bologna reform will be mainly lost.

Silvia Staub-Bernasconi, 2006

When I started to work in social work in the 1970ies we were a kind of bureaucrats. Now we are asked to be intellectuals!

Mirja Satka, lecture on the history of social work,
University of Applied Science Luzern, 2008

I would argue that the aim of social work education should be to enable students to explore the philosophical and professional bases of ethical judgments and actions within social work practice and managerial approaches, and from international and multi-cultural perspective.

Brian Littlechild, 2009

Introduction

When presently in most of the European countries students and academics focus on the negative effects of the European reform of higher education (known as the Bologna reform), almost the opposite is true for a historically less exclusivist social work discipline. Critics of the Bologna reform claim that it has opened the gates for the commercialisation of public universities and the domination of the Anglo-Saxon system of higher education throughout Europe, which means greater standardisation and uniformity of academic institutions. On the one hand, higher education has been losing out in terms of quality and exclusivity, owing to the fact that more people are currently studying at universities than ever before (in 2000, an average of 19.4 percent of EU residents had a higher education; by 2007,

this figure had increased to 23.4 percent) (Kocbek 2009: 33). On the other hand, some see in these numbers the reform's contribution to decreasing the high rate of young unemployed persons (in the EU, for example, 78 percent of young people age 18 are involved in education; in Sweden, this figure is 95 percent) (*ibid.*).

In social work, the same reform has (at least formally) provided an opportunity for the rapid academisation of social work education and facilitated an increase in research activities at schools for social work. Some critical social workers have even noted that this shift – from a highly under-researched discipline one or two decades ago to the desire for research and the utilitarian need to gain as much research funding as possible – has moved the focus of social work academics away from 'real' practice issues (personal communication with a social worker from Slovenia, 2009).

Another development in social work has been taking place parallel to the Bologna reform: the study of the history of the social work profession. Almost all research on the historical roots of the profession in the last ten years has shown (often to the surprise of the researchers themselves) that, within the core of locally specific ideas of social work, the demand for the scientific development of the discipline was undoubtedly imbedded in the development of the profession from its very beginning (Hering and Waaldijk 2003, see also Zaviršek 2005, 2008, Chytil 2009). These demands appeared alongside the charity aspect of social work. Tracing these strains of thought throughout the twentieth century, it seems that in countries where the charitable system of social protection was not dominant, which was the case in the former socialist and communist countries, there have been fewer obstacles to the academisation of social work than in those countries where charitable or religious organisations remained powerful players within the social sphere (for example, Germany, Italy and certain other western European countries). These historical and ideological differences are influencing the development of doctoral studies in social work across Europe.

The establishment of Indosow and its innovative potential:

Challenging the old power relations

Soon after the School of Social Work in Ljubljana became recognised as a 4-year university degree programme and was renamed the Faculty of Social Work – a huge success following decades of struggles and refusal at the hands of more respectable and powerful university disciplines – a small group of teachers at the school decided to initiate an international doctoral study in social work. With support from friends and colleagues from other internationally oriented universities, five schools of social work applied for an EU Tempus grant in 2005. The EU granted the project, valued at half a million Euros, an amount equal to 50 percent of the total project costs; the money

was given to the University of Ljubljana as the leading institution within the project (www.indosow.net).¹

Working on commonalities and differences between five institutions of higher education, the project members became aware of the fact that social work programmes in Europe differ significantly not only at the undergraduate level, but also at the doctoral level. Some key points where differences arise include the formal conditions for the enrolment of doctoral students and the payment of their tuition; the quality and duration of the study; supervision styles and the number of supervisors involved in supporting students; the length of the required doctoral thesis; and differences in forms of doctorates. The search for compromises to overcome these differences in order to create a jointly shared curriculum and a joint programme was an important part of the project, and demanded a great deal of work on the comparative perspective, as well as intercultural communication and a cross-country understanding of specificities in the language, definitions and practice of social work. Indosow had to establish a certain degree of uniformity among the educational institutions involved, but also managed to respect diverse contexts and differences among partner institutions.

Anglia Polytechnic University Cambridge, for instance, offers a Ph.D. programme as well as a professional doctorate (ProfDoc), while none of the other partner institutions offer a professional doctorate in addition to a classic Ph.D. Doctoral programmes in some partner countries, such as Finland, are longer than in other partner countries. Anglia Ruskin Institute of Health and Social Care Cambridge has a 3-year full-time programme on the postgraduate level, but most of the students study part-time and therefore study for at least 6 years. Germany and Slovenia have an open-ended Ph.D. programme. At the Faculty of Social Work Ljubljana, students are required to attend six obligatory doctoral seminars, but the university does not offer a full Ph.D. programme, and its doctoral study is – like that of the Alice Salomon University of Applied Science Berlin (in cooperation with the University of Siegen) – primarily individual-oriented and based on individual supervision. The format of the study reflects former times, when only the very best and most intellectually mature students studied at the doctoral level. At the same time, it creates and tolerates relationships which Michael Vynnytsky, the director of the graduate school at the Kiev Mohyla University, has called ‘the system slaved on a single supervisor’



¹ The partnership institutions are: University of Ljubljana, Faculty of Social Work, Slovenia (the coordinating institution); Alice-Salomon Hochschule für Sozialarbeit und Sozialpädagogik, Berlin, Germany; Faculty of Health and Social Care, Anglia Ruskin University, Cambridge, UK; University of Jyväskylä, Department of Social Sciences and Philosophy, Jyväskylä, Finland and Siegen University, Germany. Other institutions/associate partners include: University of Colombo (Sri Lanka), University of Haifa (Israel).

(personal communication, July 2009). In contrast to Slovenia and Germany, students at the Department of Social Sciences and Philosophy at the University of Jyväskylä have a number of supervisors from different fields involved in their work during the Ph.D. process. The Finnish system does not recognise the (often) strong bond between the student and the supervisor, thereby freeing the student from an (often) over-dependant relationship with an 'all-knowing father/mother' and similarly freeing the supervisor from the (often) unspoken obligation to ensure that the doctoral candidate successfully completes the tasks and finishes the doctoral study, (often) regardless of the actual quality of his/her doctoral work. The UK institutions do not use the European Credit Transfer System, which is used by other western countries and all other educational institutions in the project. There are also differences in tuition fees, from a rather high tuition fee in the UK and Slovenia, to no tuition fees in Germany, where the majority of students receive scholarships in order to be able to conduct full-time research for their doctoral study. In Finland, a national database of doctoral degrees, including those from the field of social work, has been established (Karvinen 2003 in Lyons and Lawrence 2006: 62), which is, at least for the time being, a unique development among European universities. All of these differences made the process of creating a joint international doctoral programme an exciting journey as well as a long and difficult negotiating process.

One of the biggest obstacles – which has been only partially resolved – arose from the fact that, in some European countries with, paradoxically, the longest and strongest traditions in social work, such as Germany and Austria, social work education has been traditionally placed at universities of applied science, which are not eligible to have doctoral programmes at all. The Alice Salomon University of Applied Science Berlin offers a doctorate module for graduate students of social work and other social science disciplines as well as doctoral seminars, but cannot enrol doctoral students. Similarly, St. Pölten University of Applied Science in Austria can educate social workers up to the MA level, but not on the doctoral level. To date, the 'third cycle' of higher education (Ph.D.) has only been available at universities, and not at universities of applied science, despite the fact that the German pioneer of social work education Alice Salomon (soon after the establishment of the school in 1908, she became a well-known social work thinker and internationally known activist), as well as her Austrian counterpart, Ilse Arlt, emphasised the importance of social work becoming a scientifically based profession as early as the 1920s or 1950s respectively (Staub-Bernasconi 2006a, 2007, see also Maiss and Pantucek 2008, Maiss 2009). Since doctoral studies are inevitably linked to research, this barrier alienates social work education and social work practice from ongoing intensive research work.

One of the reasons for this situation is the persistence of classic universities in some European countries in maintaining their unique status as 'real' academic institutions by keeping social work outside of academia. Another reason

might be sought within a traditional charity-based definition of social work closely identified with Christian ideology, which views 'helping the needy' as ideologically more important than academic training and critical research.

Therefore, during the course of the project, it became obvious that both the Alice Salomon University of Applied Science Berlin and St. Pölten University of Applied Sciences would need to find a host institution that would be benevolent enough to carry out the doctoral programme in social work at the university level. This innovation was meant to challenge the old power relations, and it also had political consequences: it sought to ensure doctoral studies in social work for German and Austrian social work students instead of forcing them to find a host discipline to obtain a doctorate. The project initiators' and partners' strategy for finding collaborative host institutions involved negotiations with several universities from Germany and Austria, and was successfully completed in Germany, where, with the support of Prof. Sabine Hering, the founder of the European Network of the History of Social Work, the University of Siegen was willing to play host to Indosow in collaboration with the Alice Salomon University of Applied Science Berlin. Unfortunately, in Austria the educational structure seems to be more reluctant towards such a change. In spite of the initiatives of project partners who, together with social work academics² and professional social workers³, tried to invert the old power relations, the project was not able to find a host university in Austria which would be willing to carry out the doctoral programme in social work.

Another set of power relations that was challenged by Indosow is linked to the fact that Indosow itself was initiated by an eastern European school for social work, a development which disturbed and disrupted the hitherto taken for granted dominance of western schools. The importance of this power shift has to be understood in the context of James Midgley's (2008) analysis, which showed that the relationships within international social work exchanges were not based on reciprocity, but were unilateral, meaning that the western approach in education for social work was dominant and exported to other parts of the world. The unilateral character of these relations is still in evidence today, especially in research (even comparative research) and academic writing. Almost without exception, social work academics from the west refer to and quote western authors from Anglo-Saxon countries,



² See the conference directed by Prof. Marianne Gumpinger with the title *Doktorhut fuer SozialarbeiterInnen?* Upper Austria University of Applied Sciences Linz, March 10 2008. <http://www.fh-ooe.at/campus-linz/aktuelles/fh-ooe-news-linz/fh-ooe-news-linz/article/doktorhut-fuer-sozialarbeiterinnen/> (July 17 2009).

³ See the international symposium with a double meaning hidden in its title *Sozialarbeit hat Recht*, organised by the Association of the Professional Social Workers from Austria in Vienna, November 23-25 2008. <http://basw-bg.com/doc-published/Conference-Austria%202008.pdf> (July 17 2009).

including non-western authors who migrated to the west (and the same is true for the majority of the non-western writers). Despite an increase in comparative research written and published internationally by non-western writers, the work of these authors is not used as a point of reference in written texts (this book is no exception). It seems that when promoting equality, many social work academics do so not for themselves, but for others (politicians, professionals, lay people, police, other social sciences).

The development of doctoral studies in different countries: Some comparisons

As mentioned above, only since the year 2000 – on the basis of the Bologna reform – have a number of schools of social work throughout Europe and beyond been developing postgraduate studies in social work. In addition, the Berlin Communiqué (2003) made sure that research has become an inevitable part of the activities within social work departments⁴, together with doctoral studies and the promotion of interdisciplinary and inter-institutional activities for improving higher education in Europe (Labonte-Roset 2005, Lyons 2003). Now more than ever, the internationalisation of social work schools is becoming an everyday reality and even a 'mainstream activity' (Midgley 2008: 39). The recent establishment of the first European International Doctoral Studies in Social Work – Indosow – is one result of these relatively new processes.

In some European countries, schools of social work have developed Ph.D. programmes/studies, while in other countries (Austria, Italy, the Ukraine and others), the doctoral level can only be attained within other social science disciplines. Some countries have developed all three levels of higher education, including doctoral programmes (the UK, Sweden, Portugal, Brazil, India, Finland, the US, Hungary, Slovenia, South Africa, Estonia, the Czech Republic etc.) (Labonte-Roset 2005, see also Staub-Bernasconi 2006a, Chytil 2009). An early comparative analysis encompassing 12 European countries found that different universities in the EU have different approaches to doctoral programmes in social work; these differences include programme location, the duration of the study, the involvement of a 'host discipline' etc. (Laot 2000). Various studies have revealed some interesting differences between countries:

1) Programme location

Some programmes are located at universities, as is the case, for instance, in the UK, and some are located at colleges linked to the university, as is the case in Portugal (Laot 2000).



⁴ A rare exception is France, which does not yet offer social work training at universities or at universities of applied sciences (Labonte-Roset 2005).

2) *The establishment of the doctoral schools*

Some doctoral programmes are organised within new structures at universities – doctoral schools – while others remain under the existing structure. In some countries, such as the Ukraine, the doctoral schools aim to ensure an interdisciplinary perspective within individual doctoral programmes, with a portion of courses being offered to students in all doctoral programmes. Doctoral schools make sure that students are supported not only individually, but also as a cohort group, and that they are closely linked to the university where they study (Ali and Kohun 2006).

3) *Duration of study*

Some programmes are of a limited duration, as in the UK, Portugal and the Indosow programme, while others do not require students to complete a Ph.D. thesis within a set timeframe. The duration of the study depends on whether students are studying full-time (the Ukraine) or part-time (the majority of European universities).

4) *The need for a 'host discipline'*

Many European countries do not grant a Ph.D. in social work (Austria, the Netherlands, Greece, Switzerland etc.), but require social work students to choose a 'host discipline' for their doctoral studies (frequently selected disciplines include sociology, social pedagogy, applied social sciences, societal science and philosophy, education, psychology and social policy). In the Ukraine, for example, where there are at least thirty schools of social work at the university level throughout the country, social workers who are interested in studying at the doctoral level (called *aspirantura*, which confers the title of 'candidate of science', the first step in a process ending in title of 'doctor of science') most often choose sociology, social relations, social policy or even the 'psychology of social work' as their host discipline; none of these study programmes are offered at the schools of social work.

5) *The need for a 'host university'*

As explained above, the Indosow programme has launched an innovation by finding a 'host university' which agreed to carry out the programme in cooperation with a university of applied sciences. So far, this model has been introduced in Germany; in Austria, on the other hand, a host university could not be found.

6) *Different models of doctoral provision*

There are three different models of doctoral provision in Europe and elsewhere:

- Ph.D. (the most common format for original, scientifically based research work);
- Professional Doctoral studies (well-established in the UK and Australia, for instance). Those who favour this type of doctorate claim that the professional doctorate ensures close collaboration with practice and the work place of the candidate (a triangular system between the student, the supervisor and the professional work team at the work place) and rightly reduces the status of the university as the exclusivist place of the creation of new knowledge and science. On the other hand, those who are critical of the professional doctorate emphasise the dominance of the neo-liberal tendencies in education which seek to transform the university into a factory for the production of the evidence-based and positivistic knowledge-based research that justifies policy changes in the social realm. This danger is evident in situations where an applicant is paid by a professional organisation to pursue a professional doctorate (Fink 2006).
- Ph.D. by publication (a certain number of articles published in journals scientifically recognised by the SSCI; countries where this system is found include Sweden, the UK, and Slovenia).

7) *The development of the joint doctoral programme*

Indosow – International Doctoral Studies in Social Work – is the first joint doctoral programme featuring the mutual recognition of doctoral diplomas to be established in Europe. However, it goes beyond Europe through the inclusion of associate partners in the Middle East and Asia, thus providing an opportunity for doctoral students to get involved in a comparative study of social work processes, social welfare and policy systems.

The programme promotes mobility, international supervision (each student has one local and one international supervisor), comparative research and learning from different locally specific contexts. The basic conceptual principles on which the shared programme is based are the social work theories and principles of social justice, inclusion, anti-discriminatory action, diversity, the right of self-determination and agency. Alongside the doctoral study programme, the founding members of Indosow have established a network of academics, practitioners, user groups and groups of carers, who provide both a source of reflexive knowledge and a foundation for good practice. In the last couple of years, Indosow has developed high-quality doctoral scientific meetings, seminars and exchanges between teachers, supervisors and students of social work and created opportunities for a scientific exchange of literature, concepts, applied studies, methodologies and current ideas in social work and social welfare and for the development of social work science in general.

Despite several differences in the doctoral programmes at different universities, the development of the doctoral studies and programmes in social work attains to several commonalities, including:

- Providing an opportunity for social work students, professionals, and researchers to obtain all three cycles of higher education without having to search for a 'host discipline', thereby preventing what Staub-Bernasconi (2006) has called a 'dead-end of social work education';
- Ensuring greater public recognition for the science and profession of social work;
- Making sure that academic knowledge, research and public debates about social work and policy are intertwined and enrich each other and that the academisation of social work contributes to the well-being of service users;
- Encouraging the unification of major stakeholders on the regional, national, and even international level (joint congresses, team work, research work);
- Ensuring the development of social work theories and the emancipation of social work from its old-fashioned dependency on other social science disciplines.

The last item is especially important, since even the global definition of social work (IASSW/IFSW 2004) does not recognise social work as an academic discipline with its own theoretical foundations. Instead of emphasising the scientific knowledge base of social work, it speaks of 'theories of human behaviour and social systems'.⁵ Staub-Bernasconi (2006) pointed out some reasons for the persistence of the distinction between the 'scientific' social science disciplines and social work as 'just a profession' without its own scientific knowledge base: a.) the vast variety of social work services in a number of welfare and health care systems such as education, psychiatry, law; b.) the fragmentation of social work into many different occupations, such as rehabilitation, care management, social management etc., prevents the formation of a common scientific knowledge base of social work.

The academisation of social work: A way to strengthen the discipline or a virtual endeavour?

It is often assumed that the academisation of social work and the focus on (comparative) research has a unilaterally positive effect on professional practice and will inevitably strengthen the discipline. This assumption has to be



⁵ The full definition reads: 'The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilising *theories of human behaviour and social systems* (emphasised by D.Z.) social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.' http://www.ifsw.org/cm_data/GlobalSocialWorkStandards2005.pdf. (July 10 2009).

questioned. It is precisely the positioning of academia in today's world, in conjunction with the re-focusing of academic knowledge at universities in response to pressure from the corporate and political spheres, which is transforming the academisation of social work and research activities into a virtual endeavour which does not support greater coherence, professional autonomy and critical thinking in social work.

It would even seem that the opposite is true: the two different societal sub-systems – the social realm of neo-liberal states and academia – actually encourage each other's dependency on market- and profit-oriented thinking. In spite of the expectation that academic processes would strengthen critical reflection upon the hybrid, dual and heterogeneous mandate of the profession manifested in the multiple roles of social workers (helpers of the needy, bureaucrats of the state, welfare officers, managers and advocates), it seems that neo-liberal, (nearly) bankrupt states have had their way in determining academic education. Critical thinking is no longer necessarily a constitutive part of academic discourse, nor is an orientation towards social action, development, change and social movements an inevitable component of social work curricula. It is therefore obvious that academisation does not inevitably strengthen the profession's autonomy and social work's ability to engender social change and critical reflection. The problem is particularly acute in cases where:

- Academic processes and current social work practices demand *utilitarian knowledge without theoretical reflection*;
- There is a *widening gap between scientific, reflected knowledge and social processes* that happen in the practice;
- Social work is being developed at the level of higher education (the development of social work departments on the bachelors, masters and doctoral level), but, at the same time, the *social work profession is losing its generic professional autonomy through fragmentation into many different occupations (case manager, care planner, personal assistant, child's advocate etc.)*;
- Persons enrolling in doctoral studies are *primarily interested in upgrading their social work or professional education, and not in social change*.

Let's take a closer look at some examples. The first process described above can be observed in the widely recognised growing demand that social workers be able to carry out specific tasks for a particular service user, known as the managerial approach in social work. Littlechild (2009) describes it as a process based on the assumption that every social work activity can be managed in a rational way, without taking into account the emotional and social experiences of professionals and clients, power imbalances, or the ideological and value system on which actions are based:

Managerial attempts to try to make social work constantly more rational and predictable are having the consequences of deflecting social work from the essential elements which constitute its main strength. Traditional social

work expertise has been built on the ability to establish relationships with a wide variety of people, survey the environment for resources and bring these together on behalf of service users, to negotiate with various individuals, groups and organisations and to mobilise their energies, and to enter other worlds and meanings in order to offer help. (*Op. cit.*: 242)

This expectation makes social work into a utilitarian profession susceptible to being used and misused by particular leading power players within the welfare sphere. As Karen Lyons (2003: 560) observed, 'social workers are increasingly seen as front line workers (implementers of social politics) who must be "governed" (monitored, controlled, accountable)'. This development is not restricted to countries with a modest critical social work tradition. In western Europe as well, social workers are again becoming social administrators, who are responsible for seeing that persons entitled by the state receive social transfers (welfare money) according to the law and based on the principles of formal justice. In spite of social work's academic development and the 'third mandate' derived from its theoretical foundation and critical standpoint (Staub-Bernasconi 2007), in everyday practice, social work skills are being reduced to the skills primarily needed to serve the interests and needs of the state instead of the service user and the critical profession itself. This development casts social work 'back in time'. In the former Yugoslavia, for example, state socialism was a time when social work was defined as a profession that carries out the goals of social policy, and an indigenous or locally specific understanding of social work was related to its utilitarian function, which was delineated by the extent to which social workers were able to serve the political aims of the state (Zaviršek 2005, 2008).

Today, the same processes can also be found in the educational sphere, in what is called 'competence-oriented social science knowledge' (also supported by the Bologna reform). This implies a preference for more task-oriented knowledge as opposed to knowledge grounded in theory, and is intended to produce social workers who would be instrumental to the demands of state institutions. Some scholars have already observed a shift in the focus of social work curricula towards 'competence-based social work programmes' (Lyons and Lawrence 2006). Competence-based social work programmes can yield certain positive results, such as professionals who follow strict procedures and are able to use various social work techniques, regardless of their personal orientation and values. On the other hand, this type of curricula is marked by a lack of theoretical paradigms, critical knowledge, and an understanding of the historical, ideological and ethical paradigms on which social work has been historically based and fails to partake of or convey an understanding of how the professional skills and their implementation are inseparable from the value base, personal ethics and orientations of social work professionals. Yan and Tsang (2008) provide an exemplary description of this rather disconcerting development (the reduction of education for social work to technical

skills and the erasure of an understanding of social work ideas and values) in the Chinese context:

Whereas the idea of science, especially understood in a positivist-empiricist framework, has been subjected to critical scrutiny and challenge in Western social work discourse in the last few decades, Chinese social work scholars promote the use of scientific methods by professionally trained workers or evidence based practice as a defining feature of social work. This rhetoric presents social work as a scientific and apolitical form of helping. Members of this new profession are thus equipped with technical knowledge in the science of helping and are, therefore, less likely to be seen as advocates and practitioners of a subversive value system. (*Op.cit.*: 195)

While on the one hand, schools of social work promote the 'scientisation of social work' in the positive and negative forms mentioned above, on the other, neo-liberal states are responsible for the de-professionalisation of social work. For example, national governments are not willing to open new workplaces for professional and critical social workers, but are rather interested in employing masses of unemployed and non-professionally trained workers in the social sphere. It is a paradox that, at a time when social work schools are witnessing both a horizontal (number of schools and programmes) and vertical (level of degrees offered) expansion, governmental bodies are evermore keen to employ less trained workers, pursuant to their goals of controlling the social sphere, decreasing the unemployment rate, and maintaining social stability through non-critical masses of welfare workers.

In Slovenia, for instance, anti-racist social work was only developed in the past couple of years as a part of the core social work curricula on the undergraduate and postgraduate level; the very first Ph.D. student presented a thesis on ethnically sensitive social work practice with the country's Roma population in 2009 (Urh 2008, 2009). In the meantime, however, the ministry responsible for social welfare and policy has installed so-called field workers for Roma at various welfare institutions across the country and, by doing so, has brought some people back into the sphere of paid employment. These poorly paid and poorly trained workers found themselves unemployed after the Slovenian companies they had been working for were defeated in competition with companies that employ cheaper, globalised proletariat.

As field workers for Roma, they became an instrument of both the government and the social workers at the local centres for social work, as they have been asked to visit Roma settlements and deliver field reports about the needs of these people. Instead of employing recently graduated social workers who have been educated for anti-racist social work practice, the state employed semi-skilled workers to provide some 'help', but also to maintain the status quo and achieve one of the government's economic aims: reducing the unemployment rate and, consequently, outlay for the social sphere to the greatest possible extent. In the meantime, new generations of trained social workers

remain unemployed, despite their academically based knowledge about ethnically sensitive social work practice. Furthermore, older social workers who are already employed are asked to stay in the office and work in social administration, that is, deliver welfare money to those entitled to receive it. If a positive consequence of this kind of de-professionalisation is that some people with experiences similar to those of service users get involved in welfare activities, a negative consequence is the reduction of professional social work activities to those of 'state bureaucrats' who deliver welfare transfers according to the formal system of justice defined by the social policy of the state or private humanitarian (religious) organisations.

Similar processes have been noted in China. Despite the rapid growth of schools of social work since 1989 (there are more than 200 schools in the country, and this number continues to grow; see chapter 9 in this book), the government has employed millions of low paid workers in newly developed community services in order to serve its economic interests through the employment of newly unemployed workers who were previously employed within the state social apparatus or young unemployed persons (Yan and Tsang 2008). At the same time, the government intended to lessen the welfare burden by establishing a large number of state-controlled community centres. Yan and Tsang have shown how serving social needs has been interrelated with serving the political and economic needs of the state, which is interested in modernising its professionals through the implementation of a new social science discipline, but, at the same time, is not keen to challenge the existing social order. Critical social work would inevitably clash with the Chinese understanding of democratic rights and social justice in the areas of disability, gender, ethnicity etc.

The third example comes from the Republic of Kosovo (founded in 2008), where international social work academics, together with a handful of domestic university professors, have tried to establish social work education at the university level.⁶ In Kosovo, as in other parts of Yugoslavia, social workers had been active since 1959; during the first decade of socialism, local centres of social work were the basic welfare institutions. As late as the 1990s, there were over thirty such local centres in what is today the Republic of Kosovo. Social work was carried out by people holding university social work degrees, just like everywhere else in Yugoslavia, which was the only communist country to have developed a system of professional social work (Zaviršek 2005, 2008). Since the beginning of the year 2000, different international stakeholders, including the United Nations Interim Administrative Mission in Kosovo (UNMIK) and



⁶ See the work done by prof. Ruth Seifert from the University of Applied Sciences Regensburg, Germany at the Pristina University. Cf. Seifert, R. (Ed.) (2004), *Soziale Arbeit und kriegerische Konflikte*. Muenster: Lit.; Social Work in South Eastern Europe, *DAAD Newsletter* 1, 2008. http://www.daad.de/imperia/md/content/hochschulen/stabilitaetspakt/newsletter/1_2008_en.pdf (July 20 2009).

numerous foreign humanitarian and nongovernmental organisations and experts in the social field, have set out to restructure the welfare system. Instead of transforming and improving the social and health systems and creating a welfare society in cooperation with the local population, these international players erased what was left from the past in order to establish a completely new system based on privatised social services and private capital.

In order to achieve their goal, the new international power players abandoned social work as a profession and created the impression that 'there was nothing' in Kosovo prior to the arrival of international organisations and security forces. Social workers and pedagogues employed as social workers in the social field got a new official name: *menagjer i rastiti*, which is an Albanian translation of the American 'case manager'. The reduction of social work to 'case management' implies the erasure of the theoretical foundation of the social work discipline and, consequently, its de-professionalisation and de-politicisation. Social workers and pedagogues were dismissed by the international organisations not because they were useless, but rather with the aim of creating conditions for the privatisation of the welfare society and its social institutions. Social services are increasingly becoming an object of the market economy introduced by the forces of neo-capitalism. In order to secure the success of this operation, the professional identity of those who had been working in the social field for decades and who believed in the value of the social state had to be completely destroyed. One way to destroy professional identity is by taking away the name that, among other things, constructs that identity. The introduction of a new name affects the persons' professional identity and helps to destroy the roots of social work.

These three examples show that, on the one hand, social work has developed its own theoretical foundation of research and academic credibility; on the other, it has come to be widely viewed as a tool in the hands of social policy welfare players (politicians, religious humanitarians, international stakeholders) who are not only constructing welfare regimes, but also pursuing their own particular political goals. Task-oriented social work knowledge and know-how without a foundation in critical theory can easily be achieved, especially in countries which are characterised by a modest degree of service user involvement and a short history of social movements, such as Slovenia, China and Kosovo.

These are only a few examples of how the gap between social work as an academic, research-oriented discipline and as a practice profession is widening. In other words, although the interest in research, academic work, and social work publications displayed by academics and professionals within the discipline has never been greater and continues to grow (Lyons 2003, see also Labonte-Roset 2005), social work is becoming increasingly structurally marginalised, instrumentalised and de-professionalised in many countries in different parts of the world.

As emphasised above, the academisation of social work does not inevitably strengthen the profession's autonomy and social work's ability to generate social change and critical reflection. Yan and Tsang (2008) provide a radical interpretation of these developments when they claim that, in China, for instance, 'social work practice exists mostly in the virtual world of academic discourse' (*op. cit.*: 196). This is especially true in cases where doctoral studies target persons whose primary intent is upgrading their formal education. It is important to stress that, in countries with a modest history of academic social work and social work research (as is the case in eastern European countries), a relatively high number of doctoral candidates are coming not from social work, but from other disciplines, such as nursing, social pedagogy, and social management, many times in search of a quick and easy promotion. In some countries, social workers and other welfare officers who work in governmental jobs at ministries, welfare departments and the like are returning to the university to upgrade their formal degrees in ever greater numbers.

In order to prevent this, the new doctoral school at the Kiev Mohyla University in the Ukraine decided to accept only full-time doctoral students (personal visit and communication, July 2009). Welfare officers from different ministries and directors from large public care institutions or welfare departments were identified as those who would be most interested in upgrading their education, and, it was felt, this pragmatic view on education implies indifference towards the deeper values of social work, including its commitment to change and ethical principles (although, regardless of their initial motivation, welfare officers could potentially gain new perspectives on their work in the social sphere from the programme).

Something similar can be observed in Slovenia, a country with a population of two million and only one school of social work. In such a small country, it often happens that doctoral students are supervised by peers, long-time colleagues, or even friends. These types of familiar relations often negatively affect the doctoral process, as personal relationships inevitably influence the quality of the doctoral study. Not only does the dependency of the doctoral candidate on his/her supervisor hinder the quality of the doctorate. More frequently, it happens that the supervisor is dependent on his/her candidate in cases where the candidate holds a politically or institutionally powerful position which can affect the supervisor's access to research money, extra job contracts, etc. The one-supervisor system, as already pointed out, actually enslaves both the student and the supervisor, who is often expected to ensure that the student succeeds in the study regardless of his or her capabilities for analytical thinking and research work. For this reason, the single supervisor system has been avoided in many countries through systems that use multiple or external supervisors (as is the case at Hong Kong University and Hong Kong Polytechnic University and in the Indosow programme).

In their analysis of how the Chinese government is installing a particular social work which would serve the political agenda of the state, Yan and Tsang (2008) revealed a similar phenomenon. The government wants to modernise the social system, a process which includes academically upgrading those professionals who already work at ministries in the social sphere, but, at the same time, wants to keep the existing power order intact.

Again, parallels between the current situation and 1950s socialist Yugoslavia can be found. Looking to upgrade the formal status of welfare officers already working at various jobs within the social sphere, the communist leadership introduced the possibility of a quick diploma in social work (two-year higher education with a system of scholarships, also for those who had only completed elementary school) (Zaviršek 2005, 2008). The government made use of those persons who had already shown a commitment to the new political system (since they had been active in the partisan struggle) and awarded them with a diploma in 'socialist social work'.

Concluding remarks: Resisting neo-liberalism in academia

All of these examples show that, besides its importance for the development of doctoral studies and comparative research in social work, the critical perspective implies refusing to let doctoral studies become a virtual endeavour of academics or of those who would like to get their hands on a Ph.D. without having any influence on professional social work practice. Therefore, truly critical social work academics and professionals would rightly reject doctoral studies and programmes which have no impact on social change, social justice, and lessening inequalities and discrimination. Not only a 'Ph.D. fit for publication', but a critical and analytical Ph.D., which would reflect current inequalities and people's struggles, is what is demanded within the academisation of the social work profession.

Having been constantly in danger of being subsumed by other, more 'powerful' disciplines, for social work, the development of doctoral studies means academic independence from other social science disciplines. However, where they once faced the threat of being subsumed by traditional social science disciplines, social workers must now deal with attempts to force them to merge with newly established applied social science disciplines lacking critical theoretical thinking and traditions, such as 'management in public health' or 'social administration'. Where the past dominance of traditional disciplines came from within academia itself, the new form of dominance comes from 'without'. The corporatist logic of the higher education business, as well as the profit-oriented social business, demand courses and subjects which forego theory in favour of more practical and managerially oriented approaches (social and health management, social administration and financing etc.).

The corporatist orientation of education is not interested in viewing social work as a social science discipline, but rather as an agency for 'helping the needy', wherein the particular state defines who the needy are, while the profession is only free to choose the technical tools it will use to alleviate a portion of the suffering. In such a context, the powerful concept of empowerment has been replaced with the much less critical 'strength perspective'. This move is in line with another well-known social work slogan which has also been used by international banks when advertising their services in poor parts of Asia or Africa (advertisements on the BBC): 'helping people help themselves'. This shows how, in today's world, social work ideas might easily merge with neo-liberal ones.

Therefore, it is important for social work academics to develop ways to create and sustain reflexive, theoretically based, critical research-oriented doctoral studies based on the interdisciplinary and comparative perspectives which could support and strengthen social work. This chapter advocates for the development of this kind of studies and underscores the huge need for social work doctoral students who are willing and able to generate, over the course of their doctoral study, critical, reflective and transformative scientifically based social work knowledge, ideas, values and ethics which go beyond the formal descriptive knowledge demanded by either current welfare and social policies or today's academia.

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