

# Co-creating Processes of Help: Collaboration **with Families** in the Community

Edited by Nina Mešl & Tadeja Kodele



Univerza v Ljubljani



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# CO-CREATING PROCESSES OF HELP: COLLABORATION WITH FAMILIES IN THE COMMUNITY

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# Notes on the Contributors

Ph. D. **Gabi Čačinovič Vogrinčič**, Bachelor of Psychology and family therapist with the European Certificate of Psychotherapy, is a professor emeritus at the Faculty of Social Work, University of Ljubljana. In Slovenia, she was the first who developed family psychology. She is the author of the following concepts: the working relationship and the individual working project of help, the project group in the foster care system, the co-creative working relationship in school. At the Faculty of Social Work, UL, she developed social work with families master's program. She managed and participated in many scientific research projects in various fields. Lastly, she participated in the project "*Strokovne podlage za nadaljnji razvoj in uresničevanje Koncepta dela Učne težave v osnovni šoli*" [Professional Basis for Further Development and Implementation of the Concept of Work "Learning Difficulties in Elementary School"] and as the leader of the subproject *Soustvarjanje učenja in pomoči* [Co-creation of Learning and Help]. She presented her work at numerous domestic and foreign conferences and congresses, and in scientific and professional journals. She is the author and co-author of several scientific monographs and manuals, some of the recent ones being: *Vzpostavljanje delovnega odnosa in osebne stika* [Establishing Working Relationship and Personal Contact] (2005), *Socialno delo z družino* [Social work with families] (2006), *Soustvarjanje v šoli: Učenje kot pogovor* [Co-creation in school: Learning as a Conversation] (2008), *Učne težave v osnovni šoli: Problemi, perspektive, priporočila* [Learning Difficulties in Elementary School: Problems, Perspectives, Recommendations] (2008) and articles in scientific monograph *Učenci z učnimi težavami: izvirni delovni projekt pomoči* [Pupils with Learning Difficulties: Individual Working Project of Help] (2011) and the manual *Otrokov glas v procesu učenja in pomoči* [A Child's Voice in the Process of Learning and Help] (2013).

Ph.D. **Lea Šugman Bohinc**, Assistant Professor, is the Head of the Chair of Theories and Methods of Help at the Faculty of Social Work, University of Ljubljana. She is a systemic psychotherapist with a European Certificate of Psychotherapy (ECP). She lectures on the epistemology of social work, supervision, group dynamics, help with art, a dialogical approach to the co-creation of support and help and several courses at the postgraduate level. She lectures in the undergraduate and postgraduate programmes of the Faculty of Education, University of Ljubljana, and the Faculty of Psychotherapy Science of the Sigmund Freud University in Ljubljana. She researches the transdisciplinary science of complexity, such as cybernetics and synergetics, in the processes of generating new patterns of organisation in various areas of collaboration – particularly in the contexts of

help and education. Some of the central themes of her research interest are the epistemology of help, postmodern collaborative, participatory, narrative and dialogic approaches to help, effectiveness and help processes, social work in involuntary interactions, etc. She is the author of the series of scientific articles, co-author of the scientific monograph *Življenjski svet uporabnika: raziskovanje, ocenjevanje in načrtovanje uporabe virov za doseganje zelenih razpletov* [Life-world of the User: Research, Evaluation and Planning of the Use of Resources to Achieve the Desired Outcomes] (2007), editor and co-author of the scientific monograph *Učenci z učnimi težavami: Izvirni delovni projekt pomoči* [Pupils with Learning Difficulties: Individual Working Project of Help] (2011) and the co-author of a manual for kindergartens, schools and parents *Otrokov glas v procesu učenja in pomoči* [A Child's Voice in the Process of Learning and Help] (2013).

Ph.D. **Nina Mešl**, Bachelor of Social Work, is an Assistant Professor at the Faculty of Social Work, University of Ljubljana. She completed the experiential gestalt family psychotherapy course. Before employment at the Faculty, she carried out practical work in the field of social work with young people and families. She has participated in many scientific research projects in various fields and is the head of the current project *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*. Her fields of research and development are social work with families and theories of help in social work. In recent years, she has been researching and publishing on different uses of theory in practice, and approaches to the development and use of knowledge. She presented her research work at several domestic and foreign conferences and congresses, in scientific and professional journals and scientific monographs. She is the author of the scientific monograph *Razvijanje in uporaba znanja v socialnem delu z družino: procesi soustvarjanja teoretskega znanj v praksi* [The Development and Use of Knowledge in Social Work with Families: the Processes of Co-creating Theoretical Knowledge in Practice] (2008), co-author of two monographs *Vzpostavljanje delovnega odnosa in osebnega stika* [Establishing Working Relationship and Personal Contact] (2005) and *Socialno delo z osebami z demenco: raziskovanje potreb oseb z demenco in odgovorov nanje* [Social Work with People Suffering from Dementia: Researching the Needs of People with Dementia and Answers to Them] (2011), author of chapters in the scientific monograph *Učenci z učnimi težavami: izvirni delovni projekt pomoči* [Pupils with Learning Difficulties: Individual Working Project of Help] (2011) and editor of the manual *Otrokov glas v procesu učenja in pomoči* [A Child's Voice in the Process of Learning and Help] (2013).

M.Sc. **Tadeja Kodele**, Bachelor of Social Work, is a Research and Teaching Assistant at the Faculty of Social Work, University of Ljubljana. She is currently involved in learning experiential gestalt family psychotherapy. She is a Ph.D. student at the Faculty of Ed-

ucation, University of Ljubljana, where she is preparing a doctoral thesis *Participacija učencev v procesu reševanja njihovih učnih težav* [Pupils' Participation in the Process of Solving Their Learning Difficulties]. Her research interests mainly cover social work with families and social work with children and adolescents. She has participated in many scientific research projects in various fields. She presented her research work at several conferences and congresses and in scientific journals. She is co-author of the scientific monograph *Pogovarjajmo se: Skupnostni pristop v šoli* [Let's Talk: Community Approach at School] (2010), the author of chapters in the scientific monograph *Učenci z učnimi težavami: izvirni delovni projekt pomoči* [Pupils with Learning Difficulties: Individual Working Project of Help] (2011) and co-editor of the manual *Otrokov glas v procesu učenja in pomoči* [A Child's Voice in the Process of Learning and Help] (2013).

**Ana Jagrič**, Bachelor of Social Work and systemic psychotherapist working under supervision, is a Research and Teaching Assistant at the Faculty of Social Work, University of Ljubljana. She collaborates in the implementation of undergraduate social work study courses, such as Psychology for Social Work, Supervision in Social Work, Dialogical Approach to Co-creation of Support and Help and Epistemology of Social Work, as well as being one of the leaders of the Centre for Practical Studies. The areas of her research, development and practical interest are: cybernetics and synergetics in psychosocial processes of help, social work in involuntary transactions, dialogic and narrative approaches of help, externalization, hypnosis and everyday trance in social work, supervision and peer supervision in social work. She is a Ph.D. student at the Faculty of Social Work and her research focus is on narrative therapy, in particular externalization. She has presented her research work at several conferences.

**Patricija Vidonja**, Bachelor of Social Work, is a researcher at the Faculty of Social Work, University of Ljubljana. She participates in the project *Helping Families in the Community: Co-creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*. In the past, she was the president of the Pomurje Association for Strengthening Social Work and the director of the "Zbujdi se!" festival [Wake up! Festival] (a festival of volunteering and social inclusion). She is currently a vice president of the association and mentor to first-year student of the Faculty of Social Work. She was a member of the Group for the organisation of traineeships in social protection, and the editor of the *Po moč* [For strenght] newspaper (the newspaper of social work students). Her areas of interest are: social work with families, foster care, social work in the field of handicap and the systemic regulation of social protection.



**M.D. Mari Nordstrand** is an Associate Professor in Social Work at the Norwegian University of Science and Technology, Faculty of Health and Social Sciences. She lectures in models of social work task-centred approach, solution-focused therapy and motivational interviewing), supervision, addiction problems, group dynamics. She lectures in the undergraduate and postgraduate programs of the Faculty. She has been leading several projects both national and local. She presents her work at domestic and foreign conferences and congresses, and in scientific and professional journals. Mari Nordstrand is author and co-author of several books and articles, some of the recent ones being: *Supervision in student placement – an exploratory study* (2016), *Maria – experiences with social welfare system from childhood till adult* (2012), *40 years of wandering on paths in Social Work* (2012), *Use of critical reflections in supervision by using Lehmann's model* (2011), *A changing context for Social Work: Norway* (2010) and *From thinking to acting... The use of critical reflection in supervision* (2010).

**Ph.D. Nina Schiøll Skjefstad** is an Associate Professor of Social Work at the Norwegian University of Science and Technology, Faculty of Health and Social Sciences. She lectures in the undergraduate and postgraduate programs of the Faculty. Her fields of interest are social work in contemporary society, especially seen in the light of New Public Management, social policy and the organizational context. Further, how these factors influence social work practice. Keywords are user participation and how to develop a relation based on recognition. She presents her work at domestic and foreign conferences and congresses, and in scientific and professional books and journals. Nina Schiøll Skjefstad is the author of the Ph.d.-thesis *Social Work in the Transition to NAV – Challenges to a Practice Based on Recognition* (2015), the article *Is there Room for Social Work in NAV?* (2013) and the book chapter *User Participation in the Light of Theory of Recognition* (2012). She is the co-author of the articles and book chapters *Recognition, Empowerment and User Participation* (2015), *User Participation in the Work Ability Assessment* (2013), *Seven Reasons why the Word need Social Work* (2012) and *Recognition as a virtue in social work practice* (2011). She was co-editor and author of two chapters of the book *Social Work in the Social Services and NAV – Close Up!* (2007).

**Ph.D. Saša Ceciĉ Erpiĉ**, Bachelor of Psychology, is an Associate Professor of Developmental Psychology. She lectures in the undergraduate, postgraduate and doctoral programmes of the Faculty of Sport and holds following courses: Developmental Psychology, Psychological Aspects of Physical Activity for Health, Social Skills for Teachers and Sport Coaches, and Developmental Psychology in Sport. Her research interests combine developmental psychology and the psychology of sport and physical activity. She is a pioneer researcher of sports career development in Slovenia; in the last 10 years, she has formed a

group of young professionals who continue the objectification of processes and developmental factors of sports careers. Her questionnaire on the characteristics of sports career termination is used in several countries and serves as a basis for the further development of instruments in the field. Lately, in addition to the development of the sports career and pedagogical-psychological aspects of physical education, she has been increasingly focused on studying the psychological factors of physical activities and health-centred forms of physical activity. Her bibliography comprises more than 240 works published in Slovenian and English. She is the author of 26 scientific articles and 11 chapters in scientific monographs, including two monographs published by major international publishing houses. In 2002, she published the scientific monograph *Konec športne kariere: razvojno psihološki in športno psihološki vidiki* [Ending Sports Career: Developmental Psychological and Sports Psychological Aspects] and is the co-author of two monographs, one university textbook and one manual. She regularly presents her findings at major scientific sports psychology and developmental psychology conferences, and has been an invited lecturer nine times; she lectured as a guest at several European universities. She was the editor in chief of the scientific journal *Kinesiologia Slovenica* for ten years and is a field editor of the journal *International Journal of Physical Education*. She is an active member of the European Federation for Sport Psychology.

Ph.D. **Petra Prevc**, Bachelor of physical education, is an Assistant at the Faculty of Sport. She participates in the following courses: Neuro-mechanical Basics of Movement, Movement in Water, Physical Activity of Children and Youth, and Physical Activity of Elderly, People with certain Chronic Diseases, Acute and/or Chronic Injuries and Musculoskeletal Disorders. Occasionally, she also performs measurements of top athletes that are carried out within the Kinesiology laboratory. She has participated in scientific research projects and regularly presents her work at conferences and in scientific and professional journals. Her research area is primarily linked to physical activity for the elderly.

Ph.D. **Katja Tomažin**, Bachelor of physical education, is engaged in different areas of sports science. She transmits her knowledge to the students of the Faculty of Sport in the following courses: Neuro-Mechanical Basics of Movement, Training for Coordination, Physical Activity of Children and Youth, and Physical Activity of Elderly, People with certain Chronic Diseases, Acute and/or Chronic Injuries and Musculoskeletal Disorders. As a lecturer, she is involved in many training courses for professional staff in sport, and professional and scientific congresses. She is a member of the Kinesiology laboratory, where she participates in measuring top athletes. Her bibliography comprises thirty scientific articles and several professional contributions; she has issued two university textbooks as a co-author.

**Marija Tomšič** is an occupational therapist and lecturer at the Department of Occupational Therapy of the Faculty of Health Sciences, University of Ljubljana. She is a long-time researcher of occupational therapy in the field of gerontology. In the context of clinical work and clinical practice, she has been developing a programme of occupational therapy at the user's home for more than a decade. For several years, she has been involved in research projects as a member of the project group. Currently, she is leading researcher of the Faculty of Health Sciences project *Active and Quality Ageing in a Domestic Environment*. She is the author of numerous professional and scientific articles, including the higher education textbook *Delovna terapija na nevrološkem področju [Occupational Therapy in the Neurological Field]* (2012). She presents her research work at home and abroad, at world and European congresses of occupational therapy. She has been a guest lecturer in Belgium and Finland for several years.

Prof. Ph.D. **France Sevšek** is a Full Professor of Biomechanics at the Faculty of Health Sciences, the University of Ljubljana. He earned his Ph.D. in physics at the Faculty of Natural Sciences and Technology, the University of Ljubljana, and worked at the Jozef Stefan Institute, later at the Faculty of Medicine, and is currently employed at the Faculty of Health Sciences. His research was mainly focused on studying the mechanical properties of cell membranes and the analysis of balance when standing upright. He established two laboratories, developed laboratory measurement procedures and dealt with the analysis of measurements and computer simulation. From 2006 to 2013, he was the dean of the Faculty of Health Sciences, where he currently lectures. He is a (co)author of numerous scientific articles in the fields of biomechanics and biophysics – his bibliography by Sicris comprises 206 units, of which 33 are articles in prestigious international journals, which have been cited 136 times in the last ten years.

Ph.D. **Darja Rugelj**, BSc. (Physiot.) and BSc. (Org.) is an Associate Professor at the Faculty of Health Sciences, University of Ljubljana. She has developed the Neurophysiotherapy area at the Faculty of Health Sciences and holds three core courses for undergraduate and postgraduate studies in physiotherapy. She also participates in the educational programmes of Occupational therapy and Orthotics and Prosthetics. She wrote a basic textbook for the courses she teaches. As a researcher, she conducted a number of basic and applied projects, and studied motor control and effects of exercises on posture and balance. In this area, she has published several scientific articles in journals with an impact factor of over 3. She was leading researcher of basic project: Effects of Changing Sensory Input on the Pre-Adjustment Posture. She has led programmes in the funded by of the Municipality of Ljubljana on the theme of promoting physical activities for the elderly and vulnerable population groups in the Municipality of Ljubljana. She regularly presents

her research work at international scientific conferences and ensures the implementation of research culture through mentoring students at the undergraduate and doctoral levels. She is the head of the biomechanics laboratory at the Faculty of Health Sciences.

# Editors' Preface

For several years, the idea of a scientific monograph that would allow us to present **the concepts of social work** that have been developed in Slovenia over the last three decades to the foreign public<sup>1</sup> matured in discussions with colleagues at the Faculty of Social Work, University of Ljubljana. In 2015, when we planned the work within the “*Helping Families in the Community: The Co-creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*”<sup>2</sup> project, the idea obtained more firm basis. It is with great pleasure that we present a monograph in which the knowledge we have developed over several years interweaves with the results of the current research, where we tested and upgraded already developed knowledge.

In the introductory, longer part of the monograph, several sections are devoted to the presentation of **social work with families** and specific concepts developed in Slovenia. We, the lecturers at the Faculty of Social Work,<sup>3</sup> collaborated together with social workers and people who need support and help. For many years, we have walked together outside the common routes and developed a new paradigm of understanding support and help processes. Social work and social work with families – the area that is more thoroughly presented in the monograph – is considered a collaboration process in which we develop opportunities for the desired changes with all the participants in a working relationship of co-creation. We co-create – together we create the new, as Gabi Čačinovič Vogrinčič, the author of the first chapter, would point out.

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- 1 The concept of a working relationship of co-creation presented in this scientific monograph was developed in the context of living in the West. Despite that, the concept of the co-creation of help and desired outcomes is new for the Western world as well. With the presented knowledge and methods, we pave new paths. The concept of co-creation is possible and necessary regardless of the environment in which we live. Valuable experience of collaborating with our colleagues from Sri Lanka, where we co-operate by developing social work study at the University in Colombo, also confirms this. When we developed the curriculum for social work with families, we respectfully joined our colleagues and together researched family lives in the “other part of the world” and co-created new understandings for practising the co-creating processes. New confirmation that the concept of co-creation exceeds the European borders came from the thesis of our colleague from Sri Lanka, where she presents wide and argumented research into social work in hospitals and confirms that the concept of co-creating with everybody involved is a possible and necessary way. In the working relationship of co-creation we see an opportunity to overcome the traditional division of the world.
  - 2 The scientific monograph was created within the project, which is funded by the Norwegian Financial Mechanism and the Government Office for Development and European Cohesion Policy for the period from 16 February 2015 to 30 September 2016.
  - 3 The Faculty of Social Work, University of Ljubljana is the only educational institution that educates in the area of social work in Slovenia. At the undergraduate level, the education lasts 4 years, and one year at the post-graduate level. In a joint program with some other faculties of the University of Ljubljana, doctoral studies are also implemented.

New knowledge was also co-created within the framework of the aforementioned project carried out under the Norwegian Financial Mechanism 2009-2014, in which the University of Ljubljana (Faculty of Social Work, Faculty of Sport and Faculty of Health Sciences) cooperated with two partners – with Norges Teknisk-Naturvitenskapelige Universitet from Norway and the Association of Friends of Youth Ljubljana Moste-Polje. In the project, we derived from a number of objectives, which were aimed at co-creating changes with family members in order to reduce health inequalities in forming help model for families in a community and in the training of professionals for work in the areas of the cooperating faculties<sup>4</sup>.

The second part of the monograph encompasses the rich diversity of project partners in the presentation of **various topics related to family life**. In this project, we all shared the idea of collaboration and action research with families in order to develop new knowledge for reducing social exclusion and strengthening human health.

Cooperation on the project has provided the opportunity to test already developed knowledge and to develop new understanding and knowledge, with a focus on support and help to families that face many challenges. All the families involved in the project had experienced poverty (a growing number of people in Slovenia are living in poverty). We know that there are not many life contexts that can provoke more uncertainty and adversity than poverty (Maholmes, 2014, p. 4), and that life in poverty affects human health, family relationships, the role of the family in the community, etc. In this project, we wish to mobilise the resources of the family members and encourage them to co-create the desired changes. The aim was to establish collaboration with families with complex psychosocial problems that system programs often fail to reach in a way that is beyond help fragmentation. The help fragmentation and the entry of a number of professionals into family life is a common problem in helping families with multiple challenges (Walsh, 2006; Melo & Alarcão, 2011; Bouwkamp & Bouwkamp, 2014). **In the individual working project of help and collaboration**, we wanted to link all the resources in **the community** and thus contribute to the desired changes.

In the introductory chapter, Gabi Čačinovič Vogrinčič presents the doctrine of social work with families developed in Slovenia in which the focus is on mobilising family members to achieve the desired outcomes, and the work at the level of family dynamics and changes that the family needs in order to find a solution. The reader can learn about the concept of co-creation in a working relationship and the concept of an individual

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<sup>4</sup> See more about the project at: <http://spdse.splet.arnes.si/>

working project of help, which were the basic starting points for cooperation with families that face many challenges within the project framework.

This is followed by a chapter on social work as a science, profession and art. Lea Šugman Bohinc has created a scientific epistemological framework for the understanding and professional behaviour that has been researched and developed by other authors of the present monograph. It becomes evident that epistemological constructivism, which is the basis of postmodern approaches to collaboration, involves built-in synergic general principles and forms the basis for postmodern social work with families.

In the third chapter, the authors Nina Mešl and Tadeja Kodele present a model of the collaboration processes of social work with families in a community that shows developed contemporary theoretical knowledge that we can use in social work with families. At the same time, they open up another important topic related to the education of future social workers so they are able to share their theoretical knowledge with people and interlocutors in the work process. Only in this way can we enable the co-creation of desired outcomes. The authors present a reflexive method of practical learning, in which students reflect on their own behaviour and develop new skills that can be verbalised in support and help processes.

In the fourth chapter, authors Ana Jagrič and Patricija Vidonja give readers an example of a support and help process between a social worker and an interlocutor and her family. They present how social work with families in a community, the use of the concept of a working relationship of co-creation and an individual working project of help contributed to an interlocutor being able to achieve the desired outcomes.

The fifth chapter presents the topic of the use of motivational interviewing in the context of working with people who face many challenges. Mari Nordstrand and Nina Skjefstad present the idea of motivational interviewing and its use in the Norwegian social security system.

In the sixth chapter, Sasa Ceci Erpič, Petra Prevc and Katja Tomažin write about the importance of physical activity for families experiencing poverty. The authors present a model of physical activity intervention, named as »Will for Movement and Movement for Will«.

The monograph is completed by a topic significant for families with an elderly person. Marija Tomšič, France Sevšek and Darja Rugelj present the importance of care for the mobility of elderly people for life within a community. One aspect of mobility is also the safe use of local public transport. The authors present the results of the analysis of the



possible use of public transport in Ljubljana, the capital of Slovenia, and sports training developed to improve the mobility of elderly people.

The diversity of topics reflects the diversity of family life and the diversity of topics<sup>5</sup> gathered in a joint project aimed at co-creating the desired changes to reduce social exclusion and promote family health.

A few words about the terminology used.

First, the definition of the family. We know that there is an intensive pluralisation of family forms and lifestyles around the world. In contemporary social work with families, **openness to a diversity of family forms** is an essential precondition. In social work, we move away from the question of what is a “good” or “healthy” form of family. We need open and accepting definitions that remain flexible in connection to what we see and hear from the families themselves. We explore with the family, looking at how the family members live, what they need, and how individuals and the family define the family (Čačinovič Vogrinčič 2006, p. 118).

When we write about the families involved in the project, we tend to use the term: **multi-challenged families** (Melo & Alarcão, 2011). These are families that are usually considered vulnerable families (Sharlin & Shamai, 2000), multi-stressed families (Madsen, 2007) and problems (Walsh, 2006). In daily life, they face numerous internal and external stressors that are often associated with difficult living conditions, which leads to overload and destabilisation in a family. Many of them fail to meet the basic needs, and constantly face various challenges (e.g. job search with little possibility of employment, low incomes for survival, the inability to help children with school matters, or the burdens of disease, addiction, abuse, violence, oppression and homelessness). Above all, all these families experience poverty (Melo & Alarcão, 2011). We decided to use this term mainly because we wanted to emphasise that the families involved in the project are much more than the problems they face. In collaboration with them, we were not focused on “what is missing and what should be” but on “what is and what could be” (Madsen, 2007).

Helping families in a community within our project is seen as helping families conducted in people’s homes, i.e. in a community where the family lives. In the individual working projects of help and collaboration co-created with the family, we also link together other resources in a community that can support a family on the path to the desired changes (e.g. school, centre for social work, charitable organisations, relatives, neighbours).

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<sup>5</sup> This diversity of topics also includes the diverse methodological approaches of individual authors. The methodology used for the preparation of the text is presented in each section.



We are still looking for appropriate new terms for people who need support and help. The most frequently used term in Slovenia is “service user”, however this no longer corresponds to the new paradigm of collaborative social work. The term “user” defines the role of a social worker and a person with whom we cooperate in conversation too unilaterally – it constrains them with the definition that someone needs something that the other side has and is willing to give. In the text, we often use the word interlocutor, person, collaborator, **expert in experience**, and sometimes also user. Interlocutor and collaborator better overcome the distinction between “us” and “them”, and capture the specificity of collaboration in social work between an appreciative and accountable ally and expert in experience.

The challenges of economic disadvantage are complex and multidimensional. Material resources that can break the cycle of poverty and related problems are essential. Topics in the text show processes of support and help to families at the micro and meso level. At the same time, we do not wish to diminish the importance of the social changes that are necessary to overcome the inadmissible conditions in which people live. We derive from the position that it is unacceptable that the state does not ensure the conditions for a decent life for families. The monograph presents processes that **enhance the resilience of family members**, but we consider them processes that must be carried out together with necessary system changes for which we must all strive.

Knowledge in sciences and professions that deal with helping people constantly evolves through research, the **reflexive use of knowledge** and individual working projects of help. The material included in the present monograph is considered valuable knowledge that we have developed in the collaboration processes of researching with people, as possible support for co-creating the desired changes, and as a basis for the continued development of the knowledge that is already being carried out.

Nina Mešl, Tadeja Kodele  
September 2016

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**Gabi Čačinovič Vogrinčič**

# Social Work with Families: the Theory and Practice of Co-Creating Processes of Support and Help

## Abstract

In the first chapter, the author presents the doctrine of social work with families that was developed in Slovenia, research on its application in practice, and the production of new knowledge in practice for the development of both theory and practice. The subject of processes of support and help to families that face many challenges is the co-creation of changes and desired outcomes. The author presents the application of the co-creation concept in a working relationship, the concept of the individual working project of help and social work language. Social work with families is implemented at two levels: at the level of mobilisation for desired outcomes, and at the level of family dynamics and the changes required in order for the family to achieve the solution. The focus is on the processes of change and help that connect experts in experience, family members, and professionals, their appreciative and accountable allies in the co-creative space open for conversation.

**Keywords:** *working relationship, individual work aid project, work with families at two levels, experts in experience, appreciative and accountable ally*

## Introduction

Social work with families has always been an important area of social work. With Luepnitz (1988), we could say that **helping families commenced as a social work**. Even more, social work with families significantly contributed to the development of knowledge on the family and how to help. The social work required special knowledge on how a family operates and how to help this community and its individuals.

**Psychological knowledge** of the family was included in the study programme at the Faculty of Social Work, University of Ljubljana, in the nineteen eighties. It is interesting that social work is the first of the helping professions in Slovenia that required family-psychological knowledge in practice. In the eighties, we launched a Social Work with Families course (shorter duration) – in parallel with the development of the Family Psychology course, which was an elective course at the time. The course was the first attempt to establish a doctrine of social work with families. Work with individuals, group work and community work, as we said in the language of the profession, required a necessary complement of knowledge on collaboration with families – work with families.

Resolving many problems and facing numerous challenges within social work departments requires **co-creative family participation** so that all voices are considered in the instrumental definition of problems and planned changes. Families face many challenges and need help and collaboration. Sometimes family collaboration is required as a source of support and strength for a member; sometimes we need to intervene in order to protect a member that is endangered by the family, or a family that is endangered by a member; and sometimes families need our support and help to make the changes they require; sometimes it is about discovering and mobilising support institutions in a community, sometimes about the mobilisation of existing or the creation of new social networks.

Social work with families covers **the plurality of family forms and transformation processes**, as well as changes to family life. Švab (2001, p. 179) notes that it is not possible to make an unambiguous definition of the family and believes that this is not actually required. We need knowledge of the plurality of family forms and the opposites within family life, which are defined by sociology. Family life is complex, diverse and changeable. A social worker, together with the family, explores the characteristics of family life. He/she joins the family as it is, defined by itself. The family remains an important community in people's lives – the changes are directed more to the creation of new forms of life within a family than to the crisis and to its end. In the co-creative process, a social worker connects everyone who may be involved in the changes required by a family in order to be able to adopt a number of challenges, solve distress and realise its potential.

The family is **an important natural social network** that has to be mobilised, where possible, says Lüssi (1991) in the social and ecological principle of systemic social work. In the helping process within social work with families, it is about discovering and co-creating favourable outcomes for everyone involved in the solution. We work with the family and its members. The aim is to explore and help create better conditions for the life of the

individual in or outside the family, or to support a family, to be able to sustain, transform or separate it as a community.

The **subject of social work with families** is defined as the co-creation of support and help to the family in solving complex psychosocial problems. The established working relationship provides an instrumental definition of the problem and the co-creation of solutions so that the strength of the family itself is mobilised in the collaboration process. The social work with families is carried out as **an individual working project of help** (hereinafter: IWPH), which is co-created through communication, negotiation and the joint search for solutions so that those involved in the problem become involved in the solution. At the centre are processes of help and thus paradigm changes enabled by the co-creation process. Family members, experts in experience and social workers, their appreciative and accountable allies, can connect in the space opened to conversation.

Within the working relationship, we invite a family to work **at two levels**. The first level is the level of co-creating the solution – the level of the part of the conversation that aims to solve the problem. However, social work with families cannot be successful if the working relationship and individual working project of help do not involve family dynamics or changes for greater transparency, which the family needs on their path to co-creating solutions.

Today we have designed theoretical concepts, doctrine and methods of social work with families. Key concepts that provide expert, competent work are the concept of co-creation, the concept of the working relationship, the IWPH concept and the concept of working with a family at two levels. To that, I further add the language of social work – the new, autonomous language of the profession that verbalises social work processes.

Focusing on co-creative social work processes doesn't mean underestimating or even denying the harsh reality of families, their inner conflicts or their social context. The co-creative process, where we remain with our users providing help and support in the face of institutions and obstacles in the community as part of individual projects of help, built on empowerment and the strength perspective, make possible the users' participation in the solutions they need and can realize. Self-respect, dignity and the power to work for solutions starts in a social work relationship where the family experiences respect and collaboration from the social worker and help in the co-creative process. Working on the first level challenges the social reality on the micro, mezzo and macro levels when searching for possible solutions and changes. Working on the second level means always creating open spaces for confronting conflicts, working with conflicts, and co-creating solutions.

## The Working Relationship of Co-Creation

Within and for social work, we have developed **the concept of co-creation**. The concept of co-creation defines both the relationship and the process of help. The relationship between family members and a social worker is the relationship between **experts in experience** and an **appreciative and accountable ally** who establishes and protects the processes of research and participation in the desired outcomes. The focus is on the process, on the contribution of each participant who contributes to the instrumental definition of the problem and to the solution. The prefix “co-” is appropriate because it is about co-operation, co-research and co-creation performed by co-speakers, co-partners and co-workers in the helping process. Changes, new learning and new meanings are co-created. The word co-creation denotes an important, key element of the process: it is all about creating the new – something that has not been in the process, newly co-researched.

I developed the concept of the **working relationship** in practice. In social work, we need knowledge on how to act and establish a relationship in social work processes. I did not have any support on how to act and did not obtain an answer to the question of how to work, even though I already knew how important it was to establish and maintain a collaborative relationship. The solutions were recorded in administrative and legal language as defined by institutions. It seemed that all the solutions had already been determined and that the processes of support and help were insignificant.

In social work practice, I had to learn about the importance of establishing and maintaining collaborative and research processes. The word **work** – a key, precious word that marked our profession – helped me. It is all about work, collective work, and collaboration in solving complex psychosocial problems. Firstly, I verbalised work in the process of support and help as working together – today it can be seen as the co-creation that involves everyone who contributes to the desired changes. The second keyword is the **relationship** between those involved in the processes of help. In what relationship are we able to perform social work? What is specific in a social work relationship? How can we establish a relationship in order to realise the co-creation process? During years of practical work, I formed the concept of the working relationship<sup>1</sup> as support for social work processes.

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1 Postmodern, constructivist concepts placed the relationship in the process of help in the centre of attention. I quote a few of the fundamental works, which may justify the paradigm of co-creation to support changes: Parton, O'Byrne (2000) *Constructive Social Work*; Adams (2003) *Social Work and Empowerment*; Pease and Fook (eds) (1999) *Transforming Social Work Practice*; Braye and Preston-Shoot, (2003) *Empowering Practice in Social Care*; Blundo, Greene and Gallant (1994) *Human Behaviour Theory: A Diversity Framework*.

For many years, I described and taught the concept of the working relationship by presenting and linking theoretical concepts of several authors, and naming the contributions of individual authors as elements within it. During years of practical work, the concept of a working relationship developed – an original and useful support to create a relationship between appreciative and accountable allies and experts in experience that forms social work processes. The concept of the working relationship, which has been successfully used in practice, includes an agreement on collaboration, the instrumental definition of the problem and the co-creation of solutions, the personal leading, the ethics of participation, strength perspective, dealing with the present (co-presence) and actionable knowledge.

Below I present the process of developing the concept of the working relationship in practice and thus the process of the production of new knowledge in both theory and practice.

I learned about the working relationship from Vries and Bouwkamp (2002) in an experiential family therapy school where in the nineties I experienced that the relationship within the process of help is the most decisive factor for help and change. The shift from a therapeutic relationship to a working relationship is a logical step in social work. Yes, it is about the work, or better yet, **the collective work**. Matter (1999), the author of the monograph *Sozialarbeit mit Familien*<sup>2</sup>, places the relationship at the centre in the processes of support and help. She uses the term ‘helping relationship’, and adds another important concept – the working alliance as a prerequisite for successful work. Therefore, the working relationship is actually a social work relationship.

In practice, I have seen how important the initial ritual invitation to decide on collaboration is. The working relationship starts with an **agreement on collaboration**, which contains a worded agreement on how we will work – the concept of the working relationship and the co-creation of help. In the agreement on collaboration we use the language of social work and arrange a working relationship between appreciative and accountable allies and experts in experience. Following the agreement on collaboration we join the family. The ritual agreement contributes to the sense of safety in a space that is opened for conversation. We must not commence work without establishing a working relationship and ensuring co-creative work, help and collaboration.

Lüssi’s key work (1991), *Systemische Sozialarbeit*<sup>3</sup>, placed social work practice into the system in the context of “participants in the problem,” together with “participants in the

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<sup>2</sup> Translation: *Social Work with Families*.

<sup>3</sup> Translation: *Systemic Social Work*.



solution,” and also focused the work of support and help on changing the system and circumstances. The methodical principle of the instrumental definition of the problem, in its concept of methodological principles of systemic social work, has become an important pillar of support in the relationship and the co-creation of changes. The instrumental definition of the problem by Lüssi invites all those involved in the problem to explore their potential part in a solution – or in other words, discussing a problem is already instrumentalised in searching for solutions. In the concept of the working relationship, this element is formulated as **an instrumental definition of the problem and the co-creation of solutions**.

**Personal leading** is a form of action support that I borrowed from Vries and Bouwkamp (2002): “work personally, concretely, here and now”. A respectful relationship cannot be impersonal. Personal means that we take people seriously and respond personally, share our experience and are focused on the work. The vast majority of conversations in social work are focused on solutions, because social work is defined by the orientation towards solutions. Therefore, we are talking about personal leading and personal responsibility for the process. The conversation on resources, the exploration of the desired outcomes, the necessary changes that occur in the co-creative process is ensured if the personal leadership of a social worker provides a co-creative process as an orientation towards solutions in a manner that involves everyone. The social worker personally responds: shares experiences or stories that provide an alternative aspect on possible solutions; acts empathetically, personally responds to developments in the relationship that arises. Vries and Bouwkamp (2002) talk about engaged communication that enables new experiences in managing words, self-respect and discovering own strength sources in a working relationship. In social work, the users’ experience of self-respect and dignity can be only the result of personal dialogue and collaboration.

An agreement on collaboration, the instrumental definition of the problem, co-creating solutions and personal leadership have proved to be the three key elements that allow social work in ways that **co-create support and help**. However, they did not suffice or fully protect paradigm changes in processes of help as co-creation that ensures the participation of users and protects the time so that new, unique solutions can occur. I added four theoretical concepts that have proved to support co-creation in the working relationship.

The concept of **the ethics of participation**, according to Hoffman (1994), obliges us to hear all interlocutors, all voices in the working relationship. Hoffman provided support for the establishment of processes of support and help that includes all participants, both social workers and users. The author indicates (Hoffman, 1994, p. 23) that an objective



observer is replaced by collaboration, in which no one has the final word – collaboration, in which no one needs to have the final word, only a continuing conversation. I quote:

»[...] the ethics of participation emerges as a new core value of social thought and action and replaces the search for “cause” or “truth”.« (Hoffman, 1994, p. 23)

Hoffman clearly indicates that the professional resigns from a position of power, which does not belong to him/her: from the power of possessing the truth and solutions. The power of the professional is replaced by a delicate joint search, exploration and the co-creation of new. The social worker must now withstand the valuable uncertainty of search and personal involvement together with the similar uncertainty of interlocutors.

The concept of **strength perspective** in social work practice also paradigmatically changes the understanding of help and collaboration processes. Saleebey (1997, p. 3) says:

»Practicing from a strengths orientation means this – *everything* you do as a social worker will be predicated, in some way, on helping to discover and embellish, explore and exploit the clients’ strengths and resource in the service of assisting them to achieve their goals, realize their dreams and shed the irons of their own inhibitions and misgivings.«

Hoffman describes a therapeutic process and Saleebey social work, but the change is clear in both: the help needs to happen in a relationship that is co-created when a professional joins a person in such a way that they both explore his/her resources, strength, good experience, knowledge and talents. Finally, the relationship that redefines processes of help as a co-creation of the desired outcomes from the strength perspective is at the centre of attention.

From the strength perspective, we ask about the desired outcomes, dreams and hope; we ask about resources, support in the community, positive past experiences, etc. Saleebey (1997, p. 4) says:

»The formula is simple: Mobilize clients’ strengths (talents, knowledge, capacities, resources) in the service of achieving their goals and vision and the clients will have a better quality of life on their own terms. Though the recipe is simple, as you will see, the work is hard.«

I was surprised when I first read this statement. The concept of strength perspective in social work provided relief and a firm support so I did not quite believe in the “hard work”. However, long experience revealed that Saleebey was right. Moving towards acting from the strength perspective requires **decisiveness and hard work** in obtaining new knowledge. The relationship defined by acting from the strength perspective is not at all usual for a social worker or interlocutor. In the process, we truly co-create the new – new

knowledge, new learning. The decision to act from the strength perspective is, therefore, a necessary professional decision.

The concept of help based on the ethics of participation and strength perspective newly defines the present by defining new sources of strength and meaning as a filigree process, and by restoring old ones.

I was initially encouraged to work according to the concept of the working relationship by a personal experience of **dealing with the present** in social work processes. I learned from Vries about the “here and now” and I understood that the present is an extremely valuable time for people – the only time when we can establish relationship and work. In the social work practice and in the lives of families, I observed something that Braunmühl (1979) called the fear of the present. He talked about how parents bereave themselves and their children of the present, as we are quickly and vividly in the past or we skip the present and are already in the future. A similar situation occurs in social work processes: we analyse the past, then quickly skip to the future. Parents and professionals make decisions without protecting the area of the present where agreements, changes and learning occurs.

Therefore, dealing with the present is an important element in a working relationship. The present is guarded for the collaboration and uncertainty that it brings, as we work, and are in the middle of the process, and do not propose or convince people about the desired outcomes, since everything has yet to be co-created. The working relationship directs the professional **towards the present**. The present, the time we are in the working relationship with people, the time used for collaboration is the most valuable time in projects of help. In social-working conversations, time is protected so that the conversation can occur, develop and end. So that it can continue. In order to experience respect and competence, it is necessary to provide time where understanding and communication can occur, and the process of co-creating solutions begins. We need a closely guarded present in order to enable the experience of collaboration that respects competence and uniqueness.

We do not deny the past, we move closer to a person who wants to talk about the past; however, we must keep in mind that our aim is to help co-create a solution. In connection to the past, we are interested in exceptions and positive experiences in the process of help. Andersen's (1994) concept of co-presence falls within the existent defence of the present. According to Andersen, this means focusing on listening and being available for compassion and conversation.

»The listener not only accepts a story but, with his/her presence, promotes the act of creating a story. This act is the act of formation of the self.« (Andersen, 1994, p. 66)

**Actionable knowledge** complements the concept of a working relationship – indeed, it is required. Actionable knowledge in social work is knowledge that is shared with people; we jointly use it in a working relationship. In my interpretation, there are two sets of knowledge. I named the first set as the set of social work and the second as the use of professional knowledge in processes of support and help.

The first set involves the use of **social work language**. At work, we verbalise the working relationship, enable and name the experience of co-creation and the instrumental definition of the problem, strength perspective, dealing with the present, etc. At the same time, we connect with the language of the user in order to better understand him/her. In the first set, we create a social work process.

The second set involves dealing with the expertise and knowledge of the social worker, who has psychological, sociological, socio-political and legal knowledge that is beneficial in the process of help. The key task is to repeatedly provide and transmit expertise so that people can benefit. Contributing knowledge is the first step, which is followed by exploring if and how the information is useful in processes of help. We always connect with people with an invitation to investigate and determine whether our findings or information is of any help during work on the desired outcomes.

I extended and upgraded the concept of actionable knowledge based on the concept of Israeli professor Rosenfeld (1993). The key concept for social work defines the specifics of knowledge developed in social work and its use. Rosenfeld (1993) considers the knowledge that may be converted or translated into action in the social work process. Lüssi (1991) believes a similar thing when he warns that in social work we should not be without words. In the concept of a working relationship that we have developed, a social worker who is not without words, because he/she has actionable knowledge, knows two things: a) establish and maintain a working relationship and the context of social work conversation and b) share expertise with users in the process of co-creating transparency and interpretations.

Let us once again write down the formulated definition of the working relationship concept. A working relationship encompasses the agreement on collaboration, the instrumental definition of the problem and the co-creation of solutions, the personal leading, the ethics of participation, strength perspective, dealing with the present (co-presence) and actionable knowledge.

## In a Working Relationship, Social Work Language is Spoken.

A social work language is being created that reflects the **new autonomy of social work science and profession**. This is a new language, the language of changes in the perception of the social work process, the language of the new paradigm of co-creating help and practice research as it puts into words the culture of co-creating the new. It is a language that is able to explore and describe the processes of help for social work science in a social-working manner. My thesis is that the science and profession require respectful conduct and the disciplined use of social work language in theory and practice (Čačinovič Vogrinčič, 2010). Always, without exception. I have indicated that we need a language of the profession that is created during the research of theory and practice within practice, and we need to decide to develop and use it by sharing it with people who come for support and help.

The keywords of the new social work language that were required and used in the text so far: co-creating help and collaboration, working relationship, IWPH, strength perspective, ethics of participation, appreciative and accountable ally, expert in experience, two-level work with families in social work. These words form the basis of the new language and describe the applicable theoretical concept of doing.

A number of arguments support my thesis. Social work language is important because it verbalizes the peculiarities of processes of help and the concept of help in social work by describing the **acting in practice**. The social work language is the language of changes as it verbalizes the smallest realisable steps toward the desired outcomes. It is the language of appreciative and accountable allies, the users who are experts in experience in processes of help. The social work language speaks strictly from the strength perspective – in the process of help and support, resources and desired outcomes are being explored. In collaboration with other disciplines, we speak the language of social work as it allows us to define and name the specificities and the share of social work in joint projects.

The first task of the social worker in working with a family is **to establish a working relationship**. We must learn how to act within that relationship because we need to ensure the co-creation of help. Each element contributes its share so that the interlocutor can remain the expert in experience in the co-creative process.

When a social worker establishes an agreement on collaboration with a family and thus shares the social work language, it is important that he/she addresses all family members, **to open space for everyone**. Special attention is given to children so that his/her voice is not drowned out. As we have already indicated, the first task is to join a family and commence there, where the family invites us. Every member of the family enters with

an instrumental definition of the problem and his/her contribution to the solution. This also applies to a social worker. In the process of co-creating solutions, we are able to more clearly see where we are and what we want to decide on, what it is in the present that we wish to protect and pass on to the future, and what is better left in the past. The ethics of participation protects the collaboration of all; the strength perspective creates envisaged changes. When working with a family, actionable knowledge of family psychology and family dynamics support the work at the second level, since in the processes of help we need to explore and support the necessary changes within the family itself. In a working relationship, we co-create IWPH. The invitation to co-create a working relationship includes **mandated families and involuntary service users** as well. In the established working relationship, the social worker joins them in their reality, their anger, their rejection. He/she is their appreciative and accountable ally, respecting and acknowledging them as experts in experience in their involuntary participation. The working relationship co-creates the time and space for working on the good outcomes they need.

## The Co-Creation of an Individual Working Project of Help and Collaboration with the Family

The individual working project of help is co-created in the working relationship. In the working relationship, an IWPH is co-created and covers both levels of work. Co-created solutions and desired outcomes formed in the working relationship are translated into action, acts and concrete steps that realise the agreements. These are very **concrete tasks**: who will see the class teacher, what does the mum's decision to help a child with English mean, the first steps towards an alliance between parents, etc.

The projects are **individual** because they are newly and specially developed for each person, family or group involved in the problem, and are co-created with them and for them. The social work was created as a profession in order to respond to the specifics, differences and to create new opportunities where solutions cannot be found within the usual and known.

Projects are **working** because they concretise the agreed changes, tasks, the individual's share and deadlines, together with an agreement for the next meeting in everyday language and people's everyday life. The emphasis is on the work and therefore on collaboration – activities that derive from the work carried out in the working relationship.

We speak about **projects** because they are implemented in time, and are directed to positive outcomes or the desired outcomes. In the project, we not only write down specific tasks, but repeatedly note the identified changes, even minimal ones, in the process of progression towards solutions. IWPH puts into words acting in social work in a special, social-working manner. It replaces the frequently void or unprofessionally vague term “monitoring”. Monitoring does not fit the description of the work that has to be carried out in social work. If we take the term literally, it unilaterally describes the role of the social worker who follows a certain process alone – without users and the non-working co-creation of tasks, meaning and the definition of progress. Monitoring does not encompass or require the collaboration of all the participants involved in the problem who are constant co-creators of IWPH: the agreed tasks, the celebration of change and new decisions. Social work means collaboration, an active share of all family members.

An individual working project is created in the working relationship and repeatedly continues within it: in it, together with family members, we write down the solution process for family members and for us. The IWPH is a response to the warning by Pfeiffer-Schaupp (1995) that if we do not know where we want to go, we need not be afraid of ever getting there.

This ironic warning to social workers demonstrates the weakness of acting in the profession, when the desired outcomes or intermediate objectives and changes and individual steps towards them have not been studied, defined, worded etc. in the process of help. As if social workers are afraid and do not want to expose themselves because they fear that a clear formulation of objectives that are not achieved would result in defeat and failure. Nevertheless, there is no meaningful path without a meaningful objective. Unachieved objectives and missed steps simply mean that we need **to explore** them more thoroughly and **try again** within what is realisable.

The IWPH encompasses tasks at both levels: the careful gathering of instrumental definitions from all family members who talk about solutions and mobilisation, and at the same time thorough researching and the verbalisation of changes that the family co-creates at the level of relations aiming for the desired changes.

The IWPH starts in a working relationship, during conversation that is personally guided towards solutions and ends with a plan and possible concrete steps at both levels. In the IWPH, we need to closely monitor and verbalise any changes. In a very interesting article written by Bass, Dosser and Powell (2001), the authors write about the importance of celebrating each success along the way. “Words have the power: change the words of help to support the system of care.” **Celebration** is a valuable act that is too often ignored. Ce-



lebration is defined as the recognition and respect of family strength, potential successes and progress. Celebration at the second level is especially valuable: the celebration of new understanding, different behaviour in the role of the father or dealing with conflicts. It is precious if the family learns how to act with strength in the working relationship. The authors explicitly indicate how important it is to recognise and celebrate even the smallest perceived step towards a better life. Celebrate, rejoice, consent – all this is highly atypical of social work in Slovenia. I believe that social workers need the encouragement to celebrate. Shazer and Kim Berg (1997), in the model of brief solution-focused therapy, always finish the conversation with compliments and tasks. First, they verbalise, from the strength perspective, the contribution of each family member so that they can further determine the tasks.

In the IWPH, we have to anticipate what needs to change in order to complete the work. The project is completed when a child and a family can cope alone and when they develop competence and can be perceived as a new story. The **completion of the project** must be expounded, repeatedly. We should verbalise together what we want to achieve. The determination of the desired outcome and the plan of completion are important elements of every project.

It is very important that the IWPH is led **personally and continuously**. This means that the family has its 'own' social worker who ensures and protects the co-creation processes in a working relationship. The IWPH always connects the family with the community in the co-creative process. The family is connected with institutions, mostly schools, but also with jobs, health care institutions, non-governmental organisations and informal social networks.

If we use Madsen's (2003) words, we could say that it is about individual projects of helping families so they can dismantle old problems and compose a new life. They need support and help to work on changes in the new life and strengthen explored and desired changes. Finally, they need the development of communities that support new life and are respectful witnesses of a new life.

Let us indicate once again: in co-created help, there are valuable processes of creating new knowledge and learning new things.

I always work in a working relationship, in which I create an individual working project of collaboration with a family. I explicitly verbalise collaboration as work and share with a family all the elements of a working relationship: we are co-creators from the strength perspective and I act according to the concept of the ethics of participation. I join the interlocutors in the present so that we can co-create changes in the future from sources of

strength in the past and present. I join them in the language they speak and invite them to use the co-creative language of social work. I often summarise, in order to be close to the interlocutors. Summaries help me stay connected so I do not work without them. I summarise from the strength perspective – arrangements on the realisable are based on what is verbalised from the strength perspective. In the co-creative process, I confront, provide my experiences and understanding, but only as a possible alternative, as a possible different story.

## Social Work with Families: Work at Two Levels

The formulation of social work with families at two levels encompasses **the complexity of social work** – we should immediately define the help and support to a family as work on sources of strength within the family itself and as co-creation of IWPH and changes that the family needs in order, as Madsen (2003) puts it, to compose a new life. We need the formulation of “two levels” – although it is cumbersome – in order to differentiate and ensure the co-creation of desired outcomes, mobilisation for work on solutions and the co-creation of changes in a family group that the family needs to realise the desired outcomes. The instrumental definition of a problem situation for each family member in the formulation of their own contribution to the work process already verbalises the necessary changes in the family dynamics. It is about co-created work where roles, rules, hierarchy, etc. in a family affect what is realisable. It is about the transparency of plans within the family and the transparency of family reality.

Today, social work includes theoretical concepts and methods of work, together with practical experience that enables helping the family in the manner of participation in the working relationship. Work at the second level is the working relationship that **invites the family to co-explore** the family group, the characteristics of conflict resolution and thus the co-creation of changes that the family needs.

Today we do not need to consent to social-working support and help harmful limitation to provision and supply (Lüssi, 1991) that is focused on social security benefits and social rights resulting from powers. The family has the right to obtain the support and help to which it is entitled; however, this should not exclude work at the second level. I repeat that second level work is the work in a working relationship that invites the family to explore sources of strength within the family itself, to co-create the IWPH and required changes, and to learn new things. The limitation to administrative dealing is a consequence of the



history of education in social work that remains in a majority of professional schools, which do not train PhDs or create researchers who are also practitioners. Only in the eighties did the Nordic countries and Slovenia (Čačinovič Vogrinčič, 2015; Marthinsen & Julkunen, 2012) commence action research into practices, processes of support and help that give meaning and validity to the science that produces new knowledge.

Matter (1999), who in *Sozialarbeit mit Familien*<sup>4</sup> describes the work on two tracks, provides support for my concepts of social work with families at two levels. Interesting and still topical is her debate with Goldbrunner (1989), who in *Arbeit mit Problemfamilien*<sup>5</sup> proposes the principle of double-tracks in working with families. Goldbrunner recognises that it is not enough for a family to obtain from social work only the concrete help that it requested. According to Goldbrunner, providing help is “the first track,” or external help, as he puts it. A family also needs help following the “second track”, e.g. help to resolve internal conflict structures. Matter and I oppose Goldbrunner’s idea that a therapist is required on “the second track” instead of a social worker. According to Goldbrunner, the principle of double-tracks means that the two experts work with the family simultaneously.

The concept of social work with families that I present entirely opposes Goldbrunner’s concept and presents a comprehensive social worker, who knows how to work and must work at both levels. It is **absolutely pointless and needless** to limit one expert to arrange material problems, while family psychological problems are dealt with using therapeutic help by another expert. Maybe “pointless and needless” is not sufficient. It should be clear that from the perspective of the social work profession, this is considered unprofessional acting.

Matter (1999, p. 23) considers work at two levels in the same way as I do; she says:

»[...] On the contrary, it seems quite reasonable to me that, if possible, one person (the social worker) should be responsible for both levels of work. Disadvantaged families with many problems consider material support as solidarity with their life situation; this can encourage affection, which is the basis for trust, and trust is a prerequisite for long-term gradual changes in behaviour to improve problem management.«

I explicitly perceive changes in behaviour as changes in behaviour in the family. This is work at the second level.

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<sup>4</sup> Translation: *Social Work with Families*.

<sup>5</sup> Translation: *Working with Families with Problems*.

Social work with families **is not therapy but work** that is implemented by co-creating solutions in the working relationship. Social work with families that brings changes and solutions that reduce distress and bring hope has a therapeutic effect, but remains social work. This does not mean that the family does not require family therapy or other forms of therapeutic help in the process of help. Social work with families encompasses this decision in the IWPH.

## Transparency and Awareness

Important concepts for understanding social work with families at the second level are the concepts of **transparency and awareness**, which need to be explained. Work at the second level is work on transparency and awareness in a family.

The concept of **transparency** (Čačinović Vogrinčič, 1998) is used in the literal sense of the word: it is about discovering and naming psychodynamic processes within a family. We can face, cope with and take responsibility for things that are evident within a family – everything that can be communicated and meta-communicated. Transparency means designating each family reality since it is necessary to create transparency anew for each change in every conversation. Things that are clear can be formulated and valid within a family. Clear is regularly first clear in the language of the family. We research clear and simultaneously also how a family handles transparency or the family reality, as it sees it.

The concept of **awareness** is added to transparency within the meaning defined by Skynner (1989). Skynner uses the concept of family “consciousness” analogous to the psychotherapeutic notion of insight at the individual level. According to Skynner, awareness means that the family is entering the period of self-questioning, the period of intensive search for answers in distress, the period of mobilisation for change. Skynner attaches to awareness the central function in the family, since the family responds to changes largely depends on the degree of family awareness.

Co-creating solutions with a family requires and depends on the processes of family transparency and awareness. Once again, the **puzzle metaphor** comes in handy: the puzzle image is clear when all the pieces are put together by individuals and are in front of us. Awareness considers how we will react to what we can verbalise as family reality. An invitation to form a working relationship is an invitation to awareness.

In a working relationship **at the second level**, we explore family relationships and details of coping with challenges and distress within a family system. Family members work together in order to see the context clearly, the whole and themselves in it. The puzzle meta-

phor is appropriate: each member of the family contributes parts to the whole, which can be verbalised. A professional invitation to the path of co-creation reads as “look here” so we can jointly decide what from the present is required for a new life.

## Actionable Knowledge: More Transparency

In this context, I can write down only a few family psychology topics, mostly as an illustration of the **actionable knowledge** that is available for work at the second level. Concepts can help structure transparency and the processes of change. We can explore common motives and objectives, individual needs, family needs, rules, norms and values from the social psychological definition that considers the family as a small group (Čačinovič Vogrinčič, 1998). It may help to co-research the roles formed in a power hierarchy, mode of communication, division of work, emotional connection; the inevitable conflict of a family group; the concept of a family as a work group (Bion, 1983). In the process of transparency and awareness in the family group, we can use concepts that many authors find useful in family therapy processes, as they can be shared with a family for co-creating help in a working relationship.

Let us consider some possible concepts. These are congruent and defensive communication patterns (Satir, 1995), the characterisation of Skynner’s optimal family (1989), and the concept of four givens in human life (Yalom, 2002). We can lean on Lidz (1971) and the concept of alliance between parents and the protection of generational differences, the possible share in the exploration of family conflicts (Richter, 1972; Stierlin, 1987), the ability of handling conflict (Mertens, 1974), the exploration of interaction patterns between parents and children in families (Bouwkamp & Bouwkamp, 2014), and on Loreman (2009) and his concept of respect for childhood.

The above-indicated actionable knowledge defined in working relationships is always only a contribution to the process of the co-creation of desired outcomes. We also explore what has become more evident, what contributes to the strength to achieve changes. Psychological knowledge of a family **must never be a diagnosis**: it is key to determining whether alternative views and understanding in the process of help can help the family and us to gain more transparency and confidence.

In social work, we have developed a **co-creative model of conversation with a family** that provides space for actions in a working relationship at two levels (Čačinovič Vogrinčič, 2008). In this context, we can add a significant commitment to protecting the space for the children’s voice in conversation and working relationships. Gehart (2007) says that

we need to create a dialogic space, “ignorance”, curiosity and “unprofessional” and offer strange comments, different perspectives, set alternatives to the indicated to ensure respect for childhood (Loreman, 2009).

## The Science of Processes of Help, Research of Practice in the Working Relationship of Co-Creation

The present monograph is based on the action research project *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*.

The results of the research carried out within the framework of the project at the Faculty of Social Work reveal the importance of the **co-creation of new knowledge and the creation of new meanings in a process with all participants**. We can discern the learning processes of all participants, i.e. the co-creation of learning when researching processes of help in practice for both practice and theory. The research of practice for theory and practice, and thereby the research of processes of help, is nowadays an important part of the development of the science of social work and is being carried out more intensely.

The theoretical concepts of social work with families that I have presented were taken as a starting point in exploring the co-creation of helping families; a theory that we studied in practice. Today we have developed theoretical concepts, doctrine and methods. Key concepts that ensure professional and competent work are the concept of co-creation, the concept of the working relationship, the IWPH concept and the concept of work with a family at two levels. To this, I further add the language of social work – a new, autonomous language of the profession that verbalises the social work processes.

In studying **research practice** in the Nordic countries, I discovered the *Salisbury Statement* (Marthinsen & Julkunen 2012, p. 193-199) – an extremely elaborated research concept that was conceived in 2008 by a group of interested professionals in order to lay the foundation for in-depth research and emphasise the importance of science on and for the practice. I quote their definition of practice research because it allows me to take a step forward and justify the direction of development that has been set in Slovenia.

The question is: what is practice research, how is it defined? The answer is:

»Practice research involves curiosity about practice. It is about identifying good and promising ways to help people; and it is about challenging troubling practice through the critical examination of practice and the development of new ideas in the light of experience. It recognises that this is best done by practitioners in partnership with researchers, where the latter have as much, if not more, to learn from practitioners as practitioners have to learn from researchers. It is an inclusive approach to professional knowledge that is concerned with understanding the complexity of practice alongside the commitment to empower, and to realise social justice, through practice.« (Marthinsen & Julkunen, 2012, p. 194)

From our perception of the research of social work practice, an important group of interlocutors is missing in the above definition – users, experts in experience, and family. We are also missing a definition of the relationship between the researchers and the practitioners in the research process. In our research, this relationship was clear: a working relationship.

We have **co-created a survey in a working relationship** with the production of new knowledge on the usefulness of concepts such as work with families at two levels, the creation of new meanings in the process with all participants who were linked together in new learning. This involved researchers, practitioners and families. In the open space of dialogue, we linked together experts in experience, users and practitioners, researchers, and their appreciative and accountable allies. The fundamental dignity and self-respect of a person who comes for help and the expert in experience begins in the working relationship. We researched by co-creating within a working relationship, which provided co-creative research processes and relationships between all participants.

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*Lea Šugman Bohinc*

# Social Work – the Science, Profession and Art of Complex Dealing with Complexity

## Abstract

The author defines social work as a “systematically unsystematic” approach to the science, profession and art of doing. It is founded on a participatory, constructivist epistemology. Social work is placed in the context of synergetics – a transdisciplinary science of complexity. Synergetics is presented through its generic principles and illustrated with examples from the research of the social work practice. The concept of the co-creative working relationship and the individual working project of help are interpreted as a transtheoretical parallel to “nonspecifically specific”, “common” factors of help effectiveness and other forms of collaboration at the micro, meso and macro level of complex systems. Further research of stimulating circumstances for the processes of generating new, more effective interaction patterns of functioning of complex systems, such as multi-challenged families, communities, work organisations, administrative systems, as well as systems of basic social assumptions, norms and values can be developed based on the proposed starting points.

**Keywords:** *constructivist epistemology, synergetics, nonspecifically specific factors of help effectiveness, systematically unsystematic approach*

## Introduction

This chapter aims to create a scientific epistemological framework for the understanding and professional conduct that is being researched and developed by the co-authors of the present monograph. The concept of **epistemology** is used as a basis and the **synergetic science of complexity** as a framework to support the science of social work as a science of

doing and of the processes of forming and changing the functioning of systems that are participants in various collaborative projects. I will show how epistemological constructivism, which serves as the basis for postmodern approaches to collaboration, is built in synergetic generic principles and represents the basis for the postmodern **social work science, profession and art**. I will link the indicated principles to the concept of common or non-specific factors of psychosocial support and help effectiveness. I will interpret them in connection with trans-theoretical concepts and approaches to social work that are being developed at the Faculty of Social Work, University of Ljubljana, and qualitatively used in our action research project as the central theme of the present monograph.

## From Epistemology to the Science of Complexity

By summarising my knowledge in a few central perspectives that delineate my emerging cognitive map and writing the story of my dialogical practice, I can point out the following. **Epistemology** - as a philosophy, science and personal habit of understanding the world<sup>1</sup> - has become and remains my dear companion. I first learned about epistemology at the International School for Cybernetics of Psychotherapy at the beginning of the nineties. It became embedded in the research of everything that interests me. I learned epistemology through researchers (e.g. Ashby, Wiener, Bateson, Foerster, Maturana and Varela, Pask) who laid the foundations for the transdisciplinary **cybernetic view of the world** and played an important role in its development. It all started with the perspective of cybernetics of the first order, which despite the novelties it contributed, remained rooted in objectivist epistemology. This was followed by a transition to the individual or cognitive constructivism of second-order cybernetics and later to social constructionism – for me such an important version of constructivism that I joined those who named it third-order cybernetics (see e.g. Dallos & Draper, 2010; Dallos & Urry, 1999). With its models of professional conduct and rich practice of exploration, the system theory became the area of my learning about the two indicated developmental transitions from

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1 For Bateson, ontology, which refers to what exists and how reality is, and epistemology, which tries to answer the question: what do we know and how do we know, were inseparable concepts. Family therapist Dell (1985, as cited in Lock & Strong, 2010, p. 174) states Bateson's several ways of using the concept of epistemology: as a theory of knowledge (gnoseology), paradigmatic epistemology (a sample, typically depending on the cultural or professional theoretical context etc.), biological cosmology (the theory of the origin and structure of the universe), science (endeavours with scientific, usually logical deductive procedures to research and develop cognisance or knowledge) and character structure (each individual has his/her own personal epistemology).

objectivist to constructivist and then to constructionist epistemology in social work and related helping professions (Šugman Bohinc, 2006).

With the inclusion of an observer in the system of observation, **second-order cybernetics**<sup>2</sup> enabled the development of extremely complex models and maps of systems' behaviours, complex dynamics of relational networks that suggested patterns or at least the possibility of patterns and their relationships despite many categories and a large amount of data. Nevertheless, these were still only maps and we needed the interpretation of the quality of those relations, for example: what encourages group members to participate, even when the group faces dynamics that can endanger its existence? Such questions, and the answers to them, are considered by the sciences of complexity. What triggers a process in which the system changes its usual manner of operation (Holmes, 2006)?

**Third-order cybernetics** reflects the current state of understanding the processes of the self-organisation of complex systems. The observer is considered part of co-developing systems in which all members mutually adapt to one another, and the developmental changes in one cause changes in others and their interactions. Patterns (e.g. dominant public discourse) are reproduced and transformed through local exchanges. Observers, therefore, develop together with the systems with which we interact. Our beliefs reflect our behaviour in a relationship, control is interactive, our reality is co-created, what we used to consider internal and external reality are combined into one in the light of the new understanding (Lucas, 2001).

Some authors (e.g. Zangeneh & Haydon, 2004) add new orders of a cybernetic view of the world, with more thorough differentiation of interaction dimensions between systems, and speak of **fourth-order cybernetics**, which draws attention to the necessity of critical research, how (unequal) power relations in society create multiple realities through social, cultural, economic, ethnic, sexual, etc. values and social constructs. Personally, I am inclined to the idea that the concept of third-order cybernetics and the epistemology of social constructionism suffice for a critical reflection on the especially 'negative' effects (various practices of oppression and exclusion, racial discrimination and neglect, labelling, etc.) of a wider social environment in which people live as individuals, family members and members of different communities.

Considering from the perspective of the aspiration to isolate what in my understanding unites professionally more or less different approaches to collaboration, for example

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2 Second-order cybernetics has encouraged many researchers to study and model complex systems and relationships between them, such as diversified networks of values interwoven with feedback loops and various other concepts or networks of relationships between individuals and groups.

support and help, it is not unusual that the research led me to epistemology or theory of knowledge and through it to the **science of complexity**. In my cognitive map, cybernetics, the science of patterns, is supplemented and upgraded by **synergetics**, the science of self-organisation (Haken 1988, 2006, 2009; Schiepek, Ludwig-Becker, Helde, Jagfeld, Petzold & Kröger 2005a; Schiepek, Picht, Spreckelsen, Altmeyer & Weihrauch, 2005b; Schiepek, Tominschek & Heinzl, 2014; Sommerfeld, Hollenstein, Calzaferri & Schiepek, 2005).

With colleagues at the Faculty of Social Work, University of Ljubljana, we study a wide range of theories and help methods in social work in conceptual, methodological, research and pedagogical ways. In the last two R & D projects<sup>3</sup>, we used the scientific framework of synergetics for **qualitative research into pattern-changing processes**. Synergetic generic principles complexly and broadly guided us in our professional and ethical conduct, reflection, the collection and analysis of empirical data, teaching and supervising or mentoring work. In the first project (ESF 2008-2011), we collaborated with experts (school counsellors and teachers) who were our partners in individual working projects of help for students with learning difficulties. In the second project (NFM 2015-2016), postgraduate students of social work with families in individual working projects of help, which were carried out with families in a community, were our close collaborators. In continuation, the focus will be on the last collaborative project.

## The Synergetic Science of Complexity

The term **sciences of complexity**<sup>4</sup>, also known as the system sciences, denotes experimentally supported theories for describing complex adaptive living and non-living systems, and, as in the case of synergetics, methods for dealing with them. These concepts and methods arise from the research of complex system behaviours through a **common perspective**; regardless of the scientific field that studies phenomena. Synergetics offers logic

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3 *Professional Foundations for the Further Development and Implementation of the Concept 'Learning Difficulties in Primary School'* is an action research project carried out by the European Social Fund and the Ministry of Education and Sport. *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health* is an action research project carried out by the Ministry of Economic Development and Technology and the Norwegian Financial Mechanism.

4 The sciences of complexity include the theory (or theories) of nonlinear dynamical systems or the theory of chaos (Gleick, 1993), the theory of nontrivial systems (Foerster, 1991 and 1984), the theory of dissipative systems (Prigogine & Stengers, 1984), the theory of self-organisation (Foerster, 2003), the theory of a special kind of self-organisation called autopoiesis (Maturana & Varela, 1988), the theory of synergetics (Haken, 1983, 1987, 2004, 2006) and others.

and a description of empirically supported interpretive keys and principles, which form this unified, transdisciplinary approach.

The indicated principles connect various natural and social disciplines<sup>5</sup> in the research and description of complex systems, by drawing our attention to the circumstances in which a system qualitatively and macroscopically<sup>6</sup> (i.e. identifiable to the naked eye of the observer) changes its behaviour, which means that it changes its spatial-temporal and functional or information structure. The focus of synergetic theory embraces **self-organised systems**, which means that their structure does not change due to special external influences, but the initiative for such a change (i.e., in response to the continuous, non-specific environment effects) arises in the system itself (Haken, 2006).

In my previous articles, I relied mainly on the work of Schiepek (e.g. Schiepek et al., 2005a, b; Schiepek, 2007), who used and developed synergetics in the field of psychotherapy; I am familiar with the work of Sommerfeld (Sommerfeld et al., 2005) in social work<sup>7</sup>, and now I have become acquainted with Haken's original work for the first time. I managed to get through the introductory chapter of his third extended edition *Information and Self-Organisation* (2006), where the author discusses complex systems in 'qualitative'<sup>8</sup> way.

How do we **define complex systems**? The word complexity derives from the Latin complexus, which means intertwined ("woven together") and refers to the interdependence of complex system components. Therefore, one of the key features in the research of complex systems is the focus on their interaction. The latter co-determines the future of complex systems, and thereby limits the predictability and experimental verification of mathematical equations. In dealing with complex systems, it no longer suffices to know the initial and boundary circumstances since interactions raise new information; in addition, such systems are not isolated – relevant, important changes take place both outside and inside the system (Gershenson, Csermely, Érdi, Knyazeva & Laszlo, 2013). Traditional systems theory is based on the assumption that the more we know about the system components

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5 Mathematics, physics and computer science, chemistry and biology, neuroscience and medicine, economics, psychology and psychotherapy, sociology and social work and others.

6 Early synergetic theory created micro- and mesoscopic descriptions of complex systems. In the case of the biological system, the first one relates to the research of its chemical processes (for example, DNA) and the other to the research of its bodies' functioning (Haken, 2006).

7 See Strunk, Friedlmayer & Brousek (2003).

8 In the context of synergetics, the term 'qualitative' denotes the macroscopic characteristics of the observed system, visible to the naked eye of the observer, which are expressed by qualitative categories (synergetic generic principles were used in our R & D projects). In order to describe microscopic and usually mesoscopic levels of interaction between the parts of the system, we use quantitative methods, i.e. different types of measurement, where the results are written with numbers.

the better our predictions of the result of its interactions will be. In contrast to those theories, complexity theories emphasise the elusive nature of the system, ever-changing over time, making it impossible for researchers and practitioners in social work and other helping professions to make any reliable predictions about the outcomes in certain areas e.g. family dynamics (Stevens & Cox 2008).

At first glance, perhaps the most noticeable source of the system's complexity is their **composition**. A system such as a family is composed of individual family members, in which internal discussions of their different 'voices', dialogues of their 'polyphonic identities' (White, 2007) are carried out; at the same time they constitute an integral part of various complex interactions with others, from dyadic to group and intergroup relations. Each individual is also a member of various communities (and a participant in inter-communal dynamics), social networking, and is embedded in the contexts of socially constructed assumptions that he/she has internalised, and in other complex systems at the meso and macro level.

We can also distinguish other sources of complex systems – one is their **behaviour**. The cybernetician Foerster (e.g. 1991, 1995) uses the term **nontrivial machine**<sup>9</sup> to describe the complex system. Its behaviour cannot be calculated or trapped in a form, since it has a very unpleasant characteristic that makes it elusive in terms of the analysis and prediction of its behaviour – it depends on the history of its own interactions. The relationship between input and output is therefore not fixed or constant and thus predictable, but is determined by the system's earlier operation – its preliminary steps determine its current behaviour. The family's answer to the current life situation always depends on the current system interactions with others and the history of its internal dynamics, despite the typical family patterns of operation. When following a linear understanding of what input (e.g. what a practitioner interprets as risk factors) may or may not lead to a certain outcome, professionals and social care organisations tend to produce models and procedures in order to prevent the risk and increase the protective factors. However, social catastrophes occur all the time, resulting in a negative public opinion of social protection services and in social workers losing confidence in their own professional competences. Instead of aiming at producing and following 'predictive models' of system behaviour, the non-linear thinking that complexity theories are based on can be used for 'indicative modelling', as Coveney and Highfield suggested in 1996<sup>10</sup> (as cited in Stevens & Cox,

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9 Foerster (1991, 1995) considers all systems nontrivial except those that are drawn on a paper. In order to consider a concrete machine as nontrivial, at least one of its parts must be nontrivial.

10 In 1996, P. Coveney and R. Highfield published the highly cited book *Frontiers of Complexity: The Search for Order in a Chaotic World*.

2008, p. 1323). It can be indicated that certain events will take place but how, where, when and with what consequences etc., cannot be predicted. As synergeticists suggest, what can be done when such events are indicated as possible, is to create circumstances with a potentially stimulating effect on the systems concerned, e.g. families in individual working projects of collaboration, so that the families will respond by self-organising better adapted patterns of behaviour.

The **science** that explores the structure and behaviour of complex systems is also complex – take into account how many different disciplines it has evolved. In the middle of the last century, one of the pioneers of cybernetics, Ashby, proposed a common principle, which in the spirit of science terminology of that time he named ‘the law of requisite variety’. He mathematically proved that we are only able to respond to the variety (of observed systems) with appropriate variety (Ashby, 1961). By analogy, the latter can also be assumed for complexity, and it can be argued that only with complexity are we able to appropriately respond to complexity and that for an efficient description of the manifested complexity, we need scientific theories on complex systems and methods for dealing with them. At least metaphorically, such an understanding can be named the **principle of requisite or sufficient complexity**.

## Self-Organisation

Modern Western science is characterised by the **analytical method** – we try to understand the characteristics of the entire system by dismantling the system. The more we deal with complex systems, the more we understand the limits of reductionism. If we know chemical processes, this does not mean that we understand life. Following procedures designed on the basis of reductionist, linear thinking (that if and when we do A, it will lead to B etc.) doesn’t work when dealing with complex adaptive systems (where doing A may or may not lead to B, and could even lead to C or D). However, it can leave helping professionals with an illusionary sense of security. Stevens and Cox (2008) warn against relying on a belief that complying with the professional procedures and standards will lead to a predictable, desired outcome. Being ‘systemic’ when doing social work is not to be confused with being ‘systematic’.

When we move from the microscopic to the macroscopic (holistic) level, properties occur that cannot be distinguished at the microscopic level (Haken, 2006). The contemporary **macroscopic approach** to the synergetics of living complex systems is characterised by



the exploration of biological, in our case biopsychosocial<sup>11</sup>, system behaviour. The same observation system may at one level seem extremely disorderly, and at the other, uniform and orderly; however, all other combinations are possible. Specifying the description as micro- or macroscopic depends on which system is taken as a criterion. A biomolecule may be considered macroscopic compared to its atomic constituents, and microscopic in relation to the cell (Haken, 2006). The observer may consider a family system as very opaque and even chaotic from the perspective of their individual internal and external conversations or the meaning nuances of their thoughts and feelings. However, if the behaviour of the family is considered in the context of its members' interactions, the observer can interpret it as a combination of a significantly smaller set of family communication and relationship habits, in which he/she can also differentiate the internalised patterns, values and norms of a wider social and cultural environment. Similarly, we can consider the extremely complex behaviour of individual families and family members, which cannot be captured in formulas, from the perspective of the community in which every family is more or less successfully socially included. We can also consider the community in terms of multi-family, multi-national, multicultural and other relational dynamics to which observers give meaning through interpretive keys – synergetic generic principles, common factors or so-called order parameters (cultural, ethnic, economic, political, etc. predominant patterns), instability and symmetries – synergetic key concepts that will be presented below.

With synergetics, we describe the processes of spontaneous **self-organisation and collaboration** in complex systems built from subsystems, which can also be complex non-linear systems by themselves. The factors leading to certain undesired consequences in a family system or community can themselves be interpreted as a self-organising system (Stevens & Cox, 2008) and can include the helper's best intentions to contribute to a desired outcome. In order for the system to organise or reorganise its operations automatically, certain **conditions** must be fulfilled (Haken, 2006; Schiepek, 2007). Interactions between the parts of the system must be dense and non-linear, which means that they

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11 My use of the term 'biopsychosocial' refers to the observed (and the observing) complex system as functioning in inseparable domains that have historically been interpreted as biological, psychological and social. The interactions within and between complex systems take place at different levels of complexity, the levels being a function of what the observer focuses on or defines as his or her system of observation. For me, the word 'biopsychosocial' aims at transcending the historically developed distinctions and is tentatively used as an integrative metaphor for complex descriptions of complex living systems such as human beings and the variety of their non-linear interactions. In my understanding, the sciences of complexity, such as synergetics, provide a transdisciplinary, unifying language for describing the behaviours of complex systems within the human domain. I've been emphasising the 'human' domain of complex systems because of the specifics of how human beings individually and socially construct meanings for any stimuli in our environment with the phenomenon of will and culture among the most distinctive factors that influence the meaning-construction processes.

network in all directions; the resulting connections strengthen and maintain or weaken and fade based on loopbacks. The third condition for self-organising processes is the input and flow of energy from the system environment. The concept of the environment in humans and different systems of their interactions must involve individual and social interpretation of the meaning of sensory stimuli, regardless of their source – physical, social context or organism, if differences between the indicated environments are artificially made, according to school teachings (Šugman Bohinc, 2011).

I wonder if synergeticians only installed assumptions of interpretive, participatory epistemology in their conceptual bases with the qualitative macroscopic research of complexity and thus laid the **constructivist foundations** of the synergetic science of complexity. What I find missing in the works on synergetics by the authors who are familiar to me, is their consideration of this fundamental epistemological assumption in their writings on theoretical and empirical research findings. Instead of „discovering“ the general behaviour of complex systems, it would be more appropriate to discuss their “interpretation or construction” at a macroscopic level.

A macroscopic description condenses information to an extreme degree – we are no longer interested in microscopic data, but in the general characteristics of the system that is being observed. Synergetics shows that we can draw fundamental **parallels in the behaviour of complex systems** at an appropriately abstract level. Limitations to qualitative, i.e. macroscopic changes, in which new structures or functions are created, is the price we have to pay in order to interpret the general principles. Synergetic research in social work, psychotherapy and related professions that provide support and help is focused on the macroscopic level of the cognitive-emotional-interactive behaviour of people with whom we work, or other patterns of managing with complex social system operations.

## Key Concepts of Synergetics and Synergetic Generic Principles

Schiepek and his colleagues (2005) identified **eight synergetic generic principles** of self-organising in biopsychosocial systems based on the results of theoretical modelling and empirical research:

- Create the circumstances for relation stability
- Differentiate the patterns of the system with which we collaborate

- Comply with and strengthen the sense that it is appropriate to strive for changes
- Differentiate control parameters – what energises or destabilises the system
- Destabilise the pattern – contribute to the strengthening of deviation by means of control parameters
- Comply with *kairós* – allow time tuning, coordination and harmony
- Enable the interruption of symmetry between the old and emerging new patterns.

Synergetic generic principles are realised in different forms of behaviour; with the same professional skill, we realise several principles at the same time – social work and related professions, which are based on intensive interpersonal exchanges, e.g. the context of help, may be defined as the **science of doing** in interaction with complex systems.

It seems that complex systems often behave in some kind of cycles, although the circumstances rarely repeat themselves completely. Mathematical modelling of their behaviour in the form of charts created the impression in researchers that complex systems tend to achieve a certain state of equilibrium. The so-called **attractor** attracts to itself movement in a dynamic, complex system so that the trajectories move closer to the centre in a spiral until they stabilise as a closed loop (Gleick, 1993, p. 134).

Haken (2006) proposes that in order to illustrate the idea of the attractor, we can visually imagine the potential behaviour of the system as a miniature landscape with hills and valleys modelled with paper. A ball that travels through the landscape of possible states or patterns of its operation illustrates the specific system behaviour. The **determination or differentiation of the control parameter** – in the biopsychosocial system, those interpretations of energy inflow or flow from the environment into the system that stimulate a change in its current operating mode – means the special selection of the landscape through which the ball (specifically, the current behaviour of the system) can roll due to the indicated forces (interpretations of environmental changes). The determination of the amount at the initial time point means the initial installation of the ball in a specific position, for example, on the slope of the hill, from where it will roll until it reaches the bottom of a hollow, which is an attractor. When forces of fluctuation are present, the ball can jump from one attractor, i.e. state or pattern, to another (Haken, 2006).

In the context of people and their diverse interactions with other complex systems, **attractors** are typical, stable cognitive-emotional-interaction patterns by which a person used to properly respond to the pressures of life circumstances. If an individual, family or community are confronted with a situation in which their settled habits of operation are not effective or could even worsen the current situation, this potentially destabilises ex-

isting ways of thinking, emotional response and social behaviour, and opens and enables the system to develop a different operation.

In the creation of supportive circumstances for change, we consider the synergetic general principle that **distinguishes cognitive-emotional-interactive patterns or attractors** of each complex human interaction system – e.g. manner of organisation in social help organisations, families in a community and family dynamics among its members. In collaborative projects of our social workers (students) with families in a community, a lot of professional conduct has been aimed at the realisation of this principle. With a variety of skills, they strived together with their colleagues to identify which specific habits of operation caused problems for a family, and which past experiences, desires, expectations, goals, etc. could be used as a foundation to achieve the desired changes. Methods of professional behaviour included an invitation to identify a problem pattern and the necessary moves. Social workers and their partners explored their past exceptional, positive experiences. With curiosity, they asked about specific details hoping that such a focus would contribute to the strengthening of the experience as a resource for planning the steps towards the necessary changes.

The described attitude of curiosity (and the not-knowing position) **strengthened the interlocutors feeling of meaningfulness to strive for the desired change** and stick to it in the less pleasant, critical moments of the process of changing patterns. Social workers exercised the indicated synergetic generic principle with a range of skills. Sometimes they directly asked family members what they wanted to gain from the collaboration and from achieving the desired changes. Did the current situation remind them of something from the past, when the hard work towards necessary shifts proved to be meaningful and valuable? Could they use it in giving sense to the current efforts? What would be the first success in the set direction, what difference would it make to their lives and how would their activities positively affect them and their environment?

The indicated conducts are always **specific** to each partner and whole relational help system; however, we can consider them as generic principles that we try to realise in a concrete, meaningful and useful way for our collaborators – who are the greatest experts on their experiences. Their feedback illuminates the direction in which social workers and interlocutors, create a unique, inimitable map of collaborative practice. Social work as the science of doing conceptually and methodologically integrates already incurred and not yet created maps of practice.

In the context of such collaboration, help providers do not put in the energy (as for example in experimental physical conditions) and do not manage **control parameters** as

though they were buttons on a control panel. In our interaction with interlocutors, there is a series of variables that play the role of control parameters, for example motivation for change, emotional engagement, mobilisation of resources, intensity of collaboration (Schiepek et al., 2014). The role of control parameters and their equivalent substitutes encompass human thoughts, expectations, memories, desires, emotions, feelings, interpretations of important news from the social world and interactions with other people.

Thus, in the working relationship of the co-creation of desired changes, the **quality of the relationship**<sup>12</sup> that develops between the help providers and their interlocutors is a factor that crucially impacts – as shown by empirical research and practical experience – on whether the system of those who participate in the project of help will go down the uncertain path of changing entrenched patterns or not and insist on achieving the desired result or succumb at a certain point and return to old habits. The quality of the relationship is also a central dimension of the generic principle that synergeticists named the **establishment of circumstances for stability**, thus emphasising the common factor that is a precondition for the implementation of all other principles, which otherwise do not include any linear, timely or value hierarchical relationships. Synergeticists assume and empirically conclude that spontaneous transitions between patterns are prepared and accompanied by critical fluctuations and processes of enhancing the deviation from the established practice and the consolidation of changed habits, which requires stable boundary conditions (Schiepek et al., 2005a, b; Schiepek et al., 2014). In humans, such balanced circumstances include, in particular, stable relationships in which the participants in the interaction (which can take place in the system of institution or community) feel safe and accepted, develop an emotional attachment to the helping professional and other participants in the partnership system and experience and strengthen a sense of meaningfulness to strive for change. They have confidence in the competence of the helper and in their own abilities, in that the collaboration will help them achieve the desired shifts. They rely on sources of strength in the past and present and are focused on objectives for the near and more distant future, etc. Only stable boundary conditions can lead to the destabilisation of the old and the stabilisation of emerging new patterns.

When the values of control parameters encourage the destabilisation of the existing pattern of system functioning, this results in instability as the system begins to lean to a new state, configuration or attractor – a new balance. This is integrated into the synergetic generic principle of **destabilising the pattern by strengthening deviation via control parameters**.

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12 See also the third chapter of the authors Mešl and Kodele and the fourth chapter of the authors Jagrič and Vidonja.

Possible macroscopic patterns, in which the system passes the point of instability, are determined by macroscopic **order parameters**, which mathematically measure system orderliness and describe the factors that regulate the behaviour of the system as a whole. Close to the point of instability, many configurations are created with the associated order parameters, which compete with each other, coexist or cooperate. Macroscopic order parameters in a situation of instability and their ability to “enslave” microscopic components enable the system to create its own structure and pushes it into a new attractor, a new hollow in the landscape of states. In the process of moving through the instability, the system may to some extent try out possible alternative states, until one form starts growing and other options weaken and finally extinguish. We consider the synergetic generic principle of **breaking the symmetry**, where the symmetry is metaphorically conceived as a competition between order parameters and potential attractors in the fight for supremacy. Conducts by which practitioners may encourage the interruption of symmetry between the old, no longer successful cognitive-emotional-interactional patterns and new experiences, which form the basis for an alternative, more effective form of family operation, are diverse – as in the realisation of other synergetic generic principles.

One of the key synergetics research findings is the indicated observation, that on the macroscopic scale, in the behaviour of complex systems, we can distinguish **laws that are independent of the microscopic characteristics of subsystems and their interactions** (and are expressed by equations of order parameters). Thus, the main objective of synergetics is to draw attention to those situations where qualitative macroscopic changes occur, such as changes in the political system, for example from democracy to dictatorship or vice versa, changes in public opinion, the role of the mass media, parties in power and the like (Haken, 2009, p. 72). Order parameters include emotional climate and the distribution of roles within a social group, which are created by numerous processes in an individual (sensations, feelings, thoughts, etc.) and in interpersonal interactions (Sommerfeld et al., 2005, p. 209). The role of order parameters is the role of a **language** that is supported and maintained by individual members of society (the dominant linguistic and cultural community) that ‘enslaves’ their linguistic behaviour and is passed down between generations (Haken, 2009, p. 60-61). Similarly, there are **social norms, roles and rules** that people gain in social exchanges with others in the processes of socialisation, and which ‘take over’ our social behaviour and associated cognitive-emotional patterns. The coexistence of different linguistic, ethnic, cultural, educational, economic and other order parameters or common factors within the same living system is the product of circumstances in which the symmetry between order parameters leads to critical instabilities and the indicated resolution. Usually, the interruption of the symmetry of order



parameters does not lead to peaceful coexistence. One of the results of the fact that our families belong to a non-dominant linguistic and ethnic group, culture and other characteristics, due to which they differ from the majority homogeneous population of Slovenia, is a considerable linguistic and ethno-cultural-economic-social exclusion and the associated underprivilege in different fields of life.

Crucial in replacing less successful habits with more successful ones are **moments of special harmony** between professional worker conduct and processes that evolve in the system of interlocutors. Concrete actions by the helper at the right time and in the right place – e.g. a physical gesture, a so caressing word or story that is told, a certain tone of voice, strong eye contact – triggers a cognitive-emotional-interactive response by the interlocutor thus indicating a deviation from his/her steady, ineffective functioning, and pushes him/her to the edge of the known pattern through which a person can no longer adapt to the changed life situation, opening up to a new experience. Perhaps for the first time, our interlocutor feels that he/she is accepted and understood, relaxes and smiles when he/she sees a different, funnier side of his/her ineffective behaviours, etc. For such time units of distinct consistency, Schiepek (2008, 2007; Schiepek et al., 2005a) proposes the metaphor of **Kairós**, the ancient Greek god of happy favourable moments, a valuable, perhaps unique opportunity for the meaningful reframing of a problem situation or view of the resources available, the desired change, a new emotional response, an alternative way of behaviour in a relationship. Practitioners in our project reported a special atmosphere of closeness that has developed between them and the family members, exceptional festivities and creative ways of celebrating their achievements, outbreaks of laughter in specific interactions, the authentic common grief during heavy times. The synergetic understanding of the role that such cases of time-synchronisation play in a family problem pattern of critical instability increases the helping professional's sensitivity for potential transitions between habits, and prevents difficultly reproducible happy moments being overlooked or missed out. The 'anchoring', i.e. symbolic stabilisation of such experience through various means: word, tone, drawing, structure in the sandbox, hand touch, certain facial expressions etc. contributes to the consolidation that is necessary so that at a time of sufficient accumulation of alternative experiences, it may grow into a new pattern of operation.

The described rooting of new experiences is the main focus of the last synergetic generic principle of **stabilising the newly created patterns**. The expected professional conduct through which social workers exercise this principle also includes the creation of safeguard scenarios in the event of instability that could jeopardise a successful transition between patterns. Practitioners and their partners create lists or draw maps of possible



conduct in critical situations that we may reasonably expect to occur in the process of reorganising habits. Such protective steps can be shown through acting, experienced in a state of trance, recorded as stories, etc. Another common professional behaviour is the celebration of even the smallest achievements and marking them with rituals organised specially for this purpose (e.g. in the presence of others who are important to a person), diplomas, with a book of successes, by connecting with people who also overcame similar obstacles etc. (see for example White, 2007). Our practitioners also reported on these and a number of other completely individualised and unique behaviours, which enabled the stabilisation of fragile experiential designs for solution patterns.

## A Systematically Unsystematic, Nonspecifically Specific Approach to the Social Work Science, Profession and Art

Until the mid-nineteen-seventies, practitioners, educators and researchers of help effectiveness (especially in psychotherapy) considered specific theories and techniques<sup>13</sup> to be highly important for the outcome of collaboration (Luborsky et al. 2002; Budd & Hughes, 2009). In the decades of studying help effectiveness factors that followed, right through to the present day, their understanding has changed in many ways. They formed several theories and models, for example, the transtheoretical model of change (Prochaska & DiClemente, 1984), the generic model of psychotherapy (Orlinsky & Howard, 1986) and the theory of common factors (Lambert, 1992). The transparent research on **common factors of success** that was undertaken a few years ago (Imel & Wampold, 2008) has shown that between 30% and 70% of the variance of the therapeutic outcome can be attributed to the common factors. A recent study (Laska, Gurman & Wampold, 2014) explains the variance of therapeutic outcome using several common factors; namely, the effectiveness of the therapy is influenced by an agreement on the objective and collaboration (11.5%), empathy (9.0%), the therapeutic relationship or alliance (7.5%), positive regard and affirmation (6.3%), therapist factors (5.7%), and specific therapeutic methods, which explain only about 1% of the variance in performance. Contemporary research consistently reveals significantly greater variance in the outcome between individual psychotherapists in a specific study than in the types of therapies they implement. Unfortunately, there

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13 See also the third chapter of authors Mešl and Kodele.

is not enough space available in this chapter to cover the extremely interesting history, current trends and the findings of this research in psychotherapy. Nevertheless, I invite any reader who may not have sufficient knowledge of this subject to become acquainted with at least some of the most famous researchers, who are usually authors of renowned works in this field (Horvath & Greenberg, 1994; Imel & Wampold, 2008; Sprenkle, Davis & Lebow, 2009; Miller, Hubble, Chow & Seidel, 2013; Laska, Gurman & Wampold, 2014; Lambert as cited in Gelo, Pritz & Rieken, 2015).

The experiences of our research and development projects (Šugman Bohinc, 2011, Kodelle & Mešl, 2013) confirm how important the quality of personal contact and working relationship are for help to be effective. They also show that the concept of **co-creating a working relationship and an individual working project of help** (Čačinovič Vogrinčič, 2005; Čačinovič Vogrinčič, Kobal, Mešl & Možina, 2005), which are presented in other chapters of the monograph, refer to the **transtheoretical** dimension not only of the principle of creating the context of stability, but also other synergetic generic principles. No matter who the researchers talked to, whether social workers (students) or families, and what kind of qualitative empirical data was gathered and analysed<sup>14</sup>, detailed descriptions and statements on concrete development in projects of help, which are available to the reader in other chapters of the book, strongly meet the qualitative interpretation of synergetic generic principles – although the suggested connections should be further explored<sup>15</sup>.

I see the aforementioned concepts as **generative metaphors** for the infinite range of behaviour skills needed, which includes more than just 'techniques' in the classical sense<sup>16</sup>. This may involve professional behaviour skills, which are generated by the synergy of the participants' dynamics in collaboration interaction, when the helper develops unique forms of behaviour as creative responses to the needs, problems, expectations, interlocutors' resources and other dimensions of the working relationship, which take place in the

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14 E.g. the interim and final family evaluation of a working project, responses to questions about various aspects of the project gathered through interviews, practitioner/student reflections expressed in the focus groups, the final tasks in which social workers/students conceptually gave meaning to different dimensions of the context, processes and outcomes of collaboration with families.

15 For example, Cameron and King-Keenan (2010) write about the usefulness of the concept of non-specific, common factors of help effectiveness in social work.

16 The term 'technique' denotes a learned sequence of steps of professional behaviour, which is provided for certain problems and often for a given population, and is carried out in a concrete work situation. Despite the findings of empirical research on the factors of help effectiveness and the increasing acceptance of the view, which the sciences of complexity contribute to in connection with the processes of self-organising changes, many researchers, professors and practitioners of social work still cling to the traditional specialist posture and defend the crucial importance of special knowledge for a certain category of problems or stress and the people who face them.

process here and now. Instead of the term ‘technique’, synergeticians propose the use of the term ‘heuristic’, which considers techniques as just one of the possible resources of behaviour in the context of collaboration (Schiepek et al., 2005a).

For social work, described in the language of the science of complex, self-organised systems, it is important that empirical and practical findings about the role of transtheoretical, non-specific, common factors of projects and collaboration processes’ effectiveness can be interpreted using synergetic generic principles, which in my opinion embody what is at the macroscopic level of observation common to every time concretely (individualised) operating factors of efficiency, the effectiveness of collaboration. They articulate general or nonspecifically specific (idiosyncratic) factors, a **systematically unsystematic approach** (Bardmann 1996) to the social work science, profession and art.

Synergetic generic principles are not general in the sense of epistemological objectivism, based on which we translate the observed complexity into theoretically or empirically supported categories we attribute a universal and objective meaning to. They are general in their trans-theoreticity as qualitative categories, metaphors, that the helping professionals have in mind when establishing and maintaining the circumstances in which our collaborators have increased the chances for a successful reorganisation of their operational habits. They embody empirically demonstrated general characteristics of complex system transformation processes whose **essential common feature is the uniqueness** of the unwinding of each of these processes in a concrete system. The key is in the individuality or privacy (embedded in wider social categories) of the meaning construction of a problem, the desired solution, the resources that are available to participants in a working project, professional behaviour responding to the expressed needs of our partners, what is of any help to them (according to their interpretation), what else they need, how we will know that they have realised the planned shifts, how they will retain them, etc.

The collaborative context thus defined includes the **co-creation** of all that happens in it – the identity of its agents, content, methods and products of processing – and implies each situation of uncertainty that can reasonably be expected in the individual working project of collaboration and that might be named the certainty of the second order. The **certainty of uncertainty**, for which we can prepare in advance to some extent and confront it with confidence through the creative potentials of all the participants so that the collaboration encourages the transition towards the agreed desired changes.

## Completion with a View to the Future

Contemporary theories of complexity describe the operation of dynamic, nonlinear systems in times of uncertainty, unpredictability, changeability, contradictions, interactions, etc. They offer a new, potentially meaningful and hope-inspiring framework for understanding human society and the promotion of its development in the post-modern time. In this chapter, I considered social work as a **science, profession and art of doing**, and defined it with the participatory, interpretive (constructivist) epistemology of a participant researcher. The social work science thus defined was linked to synergetics as a transdisciplinary science of complexity. I presented it through synergetic generic principles and illustrated with examples from the research of social work practice. I interpreted the concept of the co-creative working relationship (conditions, processes and outcomes of collaboration, e.g. help) and individual working project of help as a transtheoretical parallel to common, non-specific factors of help effectiveness. The described understanding can be used as a basis for scientific research processes in which people with many challenges accomplish the desired changes in their cognitive-emotional-interactive habits and the research of systems operation patterns at other levels of complexity. In the context of social work, the integration of the **epistemology of social constructionism and synergetics** as the science of the self-organised processes of generating patterns is covered by metaphors of **systematically unsystematic** science, profession and art and **nonspecifically specific** factors of successful collaboration at micro, meso and macro-level of complex systems.

The 21st century is presented as a time of instability, rapid changes of all kinds, economic and ecological constraints and challenges. Globalisation significantly contributes to the increasing interdependence of the life systems on Earth, their interactions raise new and until recently unknown solutions and problems. To what extent can synergetics as a contemporary system science of complexity contribute to the creation of the answers to the complex challenges of our time, including those we consider within social work? One of the tasks we need to accomplish is to develop a closer and more **integrated relationship between the natural and human sciences** (Gershenson et al., 2013). In order to respond to both local and global problems and complex systems challenges, we need to observe, describe and deal with them in complex ways that will combine both our desire to understand the universality and non-specificity of the behaviour of complex systems and our reflection on the specificity and idiosyncrasy of each concrete system, which socially and individually constructs meanings in a self-significant and potentially changeable way. A common practice that often requires practitioners to respond immediately to people's complex situations, inevitably pushes contemporary professions of psychosocial support

and help, such as social work, into the research and development of **maps of successful, effective collaborative practices**. The education system of future social workers can play an important role in the described actions if they are trained for the complex answering of complex questions. The chapter is concluded with confidence that the department of theory and methods of help in social work at the Faculty of Social Work, University of Ljubljana, creates the necessary maps of excellent collaborative practices between teachers, students, practitioners, service users and other partners. We also develop methods of participatory research and build new knowledge, which gives meaning to our practical and research experiences.

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*Nina Mešl, Tadeja Kodele*

## Collaborative Processes of Help and Development of New Knowledge in Social Work with Families

### Abstract

Social work with people with complex psychosocial problems demands the continued development of knowledge and the co-creation of new responses to specific everyday challenges people face. In this chapter, the authors present a model of collaborative processes of social work with families in a community that shows deep contemporary theoretical knowledge, which can be used in social work with families. The experiences of the families in the project confirm that the social work profession requires a shift from the often (too) rigid institutional frameworks to people in a community, wherein the individual working project of help, all participants meet and actively participate in the co-creation of the desired outcomes at the human level. Thus, social workers are faced with an urgent task to share their theoretical knowledge with people, their interlocutors in the working process, as this is the only way to provide a space for the co-creation of desired outcomes. Therefore, it is important that practical learning within the studies is established as a collaborative dialogue between a student and a mentor at the faculty – in this way students get the opportunity to reflect on their own behaviour and the development of new knowledge that can be verbalised within processes of support and help. The reflexive use of knowledge is also crucial for the further development of the science and social work profession.

**Keywords:** *multi-challenged families, individual working project of support and help, community, reflexive approach, practical learning.*

# Introduction

Collaboration, dialogue, the co-creation of desired outcomes, reflection, participation, mobilisation of resources, research and the co-creation of new knowledge are key positions for the *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health* project. By defining the key objectives of the action research project that are aimed at co-creating changes of family members in the direction of reducing health inequalities, creating the model of helping families in a community and training professionals to work competently in practice, we have interweaved different topics, different groups of participants, different levels of exploration, etc. The close interrelation of processes of helping families in a community with the exploration and development of new knowledge reflects a fundamental **idea on the development and use of knowledge as interrelated processes**. The idea developed through experiences in the project. Constant reflection on experiences of collaborating with families in a community, the development of practice and research, intensive collaboration research and dialogue confirmed that in the postmodern understanding of social work science, we cannot separate research and the production of knowledge from working in practice.

In this chapter, we wish to present this inevitable complexity of social work, the inseparably intertwined use of knowledge and the co-creation of new knowledge, by seemingly distinguishing the two central topics due to greater transparency, which nevertheless remain connected both in writing and in the everyday social work reality.

Below, we first briefly introduce the framework of the project that enabled **collaborative learning** for all participants: students, families and researchers. This is followed by a subchapter on new developed knowledge in social work with families in a community that was co-created in collaborative processes involving support and help. We conclude this chapter with a subchapter on the contribution of the reflexive use of knowledge to the education of future competent social workers.

## Collaborative Research and Development of Knowledge within the Project Helping Families in the Community: Co-creation of Desired Changes for Reducing Social Exclusion and Strengthening Health

The beginnings of the development of the project date back to 2013 when we started regular implementation of the Social Work with Families master's programme at the Faculty of Social Work, University of Ljubljana. At the time, we were looking for ways to support students who had already completed the Social work programme at the graduate level, in their professional and personal growth, and which would represent new, not yet established ways of learning. We wished to provide the experience of independent work with families, especially in the context of **practical learning**, which is supported with intensive mentoring support<sup>1</sup> for the **reflexive use of knowledge**. At the same time, the situation in Slovenia, where many families faced poverty and related problems due to the overall social crisis, contributed to the fact that we wanted to support people who often face social exclusion by directly collaborating with families. We also had the need for the continuous development of knowledge in the field of social work with families.

In the 2013/2014 academic year, we implemented the pilot project *Co-Creating Help with Families in a Community* with a small group of students within the Practicum study course in the Social Work with Families master's programme. Experience from the pilot project encouraged us to continue and upgrade our work. In February 2015, we commenced the implementation of the project *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*, which is carried out within the framework of the Norwegian Financial Mechanism 2009-2014, in which the University of Ljubljana (Faculty of Social Work, Faculty of Sport and Faculty of Health Sciences) cooperate together with two partners – Norges Teknisk-Naturvitenskapelige Universitet from Norway and Association of Friends of Youth Ljubljana Moste-Polje. As we indicated in the introduction to the chapter, the objectives of the project is to co-create changes with family members in order to reduce health inequalities, create a model of helping families in a community and train professionals for work in the areas of the participating faculties. In the continuation, we focus on the work of the Faculty of Social Work, as the results of two other faculties will be presented in separate chapters.

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<sup>1</sup> Teachers at the Faculty of Social Work, who are at the same time also researchers, offered mentoring support to the students.

In both the pilot and the current project, students who had completed undergraduate education at the Faculty of Social Work, independently entered into processes of support and help to multi-challenged families. One family collaborated with one student<sup>2</sup> who visited the family independently in their home, and together with the family members **co-created desired outcomes<sup>3</sup> in the working relationship and an individual working project of help** (Čačinović Vogrinčić, Kobal, Mešl & Možina, 2005) (hereinafter: IWPH). During the completion of the practical work, students received intensive, continuous support from small mentoring groups and had the opportunity to consult with a mentor at the faculty individually and on a regular basis.

In establishing cooperation and further work with families, we proceeded from the assumption that **multi-challenged families are resilient** (Walsh, 2006). Despite many hardships, the students recognised many sources of strength within the family members.

One of the starting points for the work was the understanding that multi-stressed families are much more than the problems they face. In collaboration with them, we were not focused on „what is missing and what should be“, but in „what is and what could be“ (Madsen, 2007).

## Research Method and Sources of Data

Below, we briefly present the way of selecting research data in the project and the method of analysis of the collected material.

The project was **an action research project**, which means that the focus was on the work, the process of support and help to families in a community and support for students in their independent work with families. In this project, processes of work were also studied in order to be able to answer the question of how to work in a community in the co-creative working relationship with families that face numerous challenges, and how to support students in practical learning. For recording the work process within the framework of the project, we designed various forms. The students recorded all the meetings with families on pre-prepared forms created by researchers at the Faculty of Social Work. The purpose of recording the work process in the IWPH was to obtain data on the use of the working relationship of co-creating help in the IWPH based on three dimensions: the phase of conversation (agreement on collaboration and verification of the achievement of goals; definition of the problem and the desired outcomes; help plan and further agree-

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<sup>2</sup> The pilot and the current project involved 31 students who collaborated with 43 families.

<sup>3</sup> See the first chapter of the author Čačinović Vogrinčić.



ments), concepts used in conversation (work from the strength perspective, ethics of participation and social work with families at the second level), and personal reflection on a meeting. The students used the other group of forms in three different periods within the collaboration with a family in order to evaluate the effectiveness of the collaboration. At the beginning of the collaboration with a family, a student first explored with family members involved in the IWPH their **expectations** concerning work methods, goals, existing skills, knowledge and existing sources of strength. In the middle and at the end of the collaboration with a family, the students explored whether the family members involved in the IWPH were satisfied with the collaboration. The purpose of the **interim and final evaluation** was to obtain basic information on the advantages and disadvantages in the way of work within the IWPH; assess the participation of family members in the IWPH; explore the (in)adequacy of support; explore the subjective opinion on the changes that have occurred, and what kind of support the family members still require. At the end of student participation with a family, researchers at the Faculty of Social Work conducted final in-depth interviews with families in order to determine their satisfaction with the collaboration in the process of support and help within the project. At the end of collaboration with a family, students wrote a final paper based on the forms for recording the work process in the IWPH, with the aim of analysing the work process with a family according to the predefined categories (e.g. a description of the circumstances in which the practice was carried out, a description of the family story, the establishment of a working relationship with the family, the initial instrumental definition of the problem and development of work topics throughout the entire collaboration process).

At the end of collaboration with the families, the researchers at the Faculty of Social Work conducted three **focus groups with the students** involved in the project. Questions for the focus groups were composed of two thematic sets: the process of learning and the process of work with a family. In the first set of questions, we were primarily interested in the students' expectations at the time of starting the practical learning, and what they acquired from it; in the second set, we wanted to explore how the students describe the work process with a family, significant developments and obstacles.

In the continuation, due to the aim of this chapter and the limited space, we present only the results that were obtained from the analysis of the **students' final papers**<sup>4</sup>, **final interviews with the families**<sup>5</sup> and the focus groups in the study year 2014/2015. From the final

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4 All the final papers of 19 students, who continuously participated in the project in the study year 2014/2015, are included in the analysis. All the students were also included in focus groups.

5 17 families out of 22 families, who continuously collaborated in the project in the study year 2014/2015, accepted our invitation to participate in the final interview.



interviews with the families, we analysed the family members' answers to question No. 6, in which we were interested in what was different in the manner of cooperation within the project compared to other help the family had already received. The results from the students' final papers were obtained by analysing the record on the students' personal reflection on practical learning, with an emphasis on what they gained during the practice, what they have learned about the social work profession and what has helped them. From the focus groups, we analysed the students' statements that referred to the description of their personal and professional growth.

We analysed the material according to the **method of qualitative analysis** (Mesec, 1998, 2006). For a better illustration of the results, we include statements made by students or individual family members. Statements are in conversational language; the individuals' exact answers to our questions are indicated. In the notes, we indicated the data sources and methods of encryption of statements together with the presented results.

## Generating New Knowledge on Social Work with Families in a Community

Due to social circumstances, many families in Slovenia face **poverty**. In this project, we collaborated with several families with different stories, which have all experienced poverty. We know there are not many life situations that can cause such uncertainty and so many adversities as poverty (Maholmes, 2014, p. 4), and that life in poverty affects health, relationships within a family, the family role in the community, etc.

Before the fieldwork, we have developed knowledge of social work with families<sup>6</sup>. We want to test this knowledge in concrete processes of support and help to multi-challenged families. The novel part of the project idea is collaboration with the families in their homes within collaborative projects of support and help in the community.

### Social Work with Families in the Community

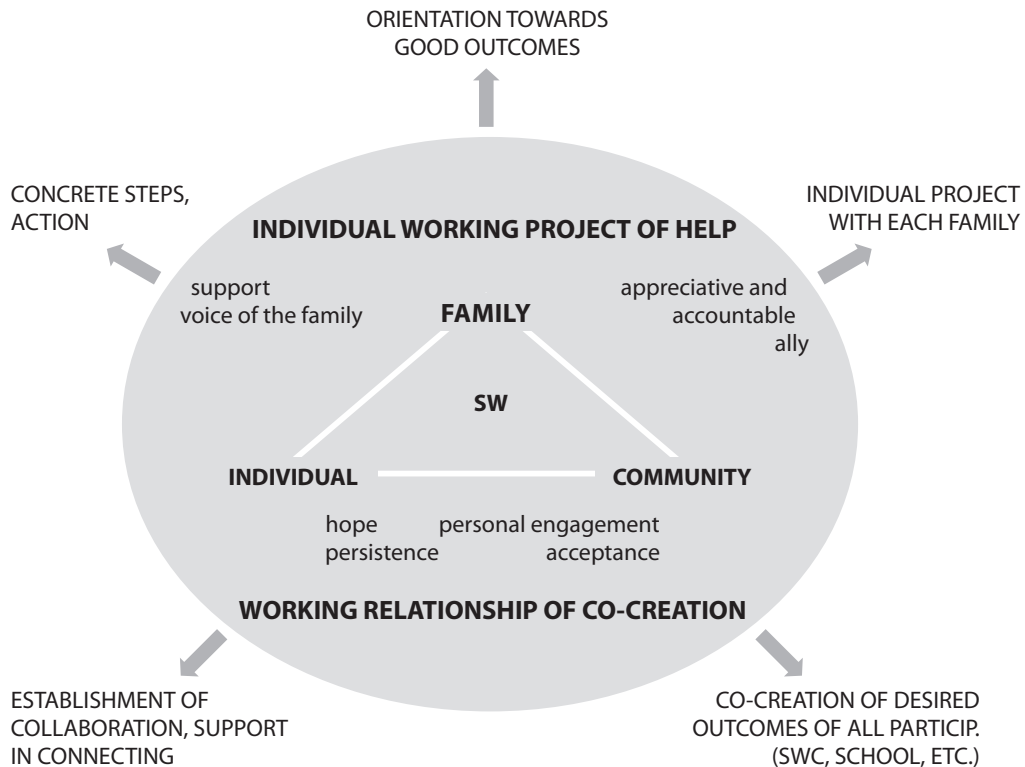
In this project, we wanted to co-create with the families possible ways to escape dominant family narratives of exclusion, powerlessness and despair that arise in a life in poverty and are often inherited through generations, and the associated coping with many challenges.

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<sup>6</sup> See the first chapter of the author Čačinovič Vogrinčič.

In collaborative projects of support and help, we wanted to start creating ways to achieve desired changes, more hope and strength to co-create new and encouraging experiences and narratives. Below, we present a **model of collaboration with families in a community** that was created before the beginning of the collaboration with families. It includes basic outlines of contemporary social work with families and connects them into a whole in order to support students in co-creating the desired outcomes.

Figure 1 *Model of collaborative processes of social work with families in a community*



The ultimate objective of collaboration with families in a community is to **establish and maintain a co-creative working relationship and the individual working project of help**. A social worker must move from personal to relational tasks with different family members within an individual conversation and the whole process. Different emphases lead the process of social work with families in different directions. A focus on the individual places family and the general structure in the background; a focus on structures without an individual does the opposite. Therefore, it is important to work with a family and individuals (Mešl 2008, p. 110). The aim of social work with families is not to protect

families at any price, but to discover better living conditions for an individual within or outside the family, and to support a family in preserving, transforming, or breaking itself as a community. Certainly, effective projects of help in social work expand from the family to the **community** (Čačinović Vogrinčić, 2006, p. 112).

Within our project, helping families in a community is considered as helping families in people's homes, i.e. in the community **where the family lives**. We also link other resources in a community that support a family on their way to the desired changes (e.g. school, centre for social work, charitable organisations, relatives, neighbours) to the IWPH, which is co-created with the family. In this way, we can **overcome the problem of the frequent dispersal of help** that multi-challenged families receive when every professional worker is primarily directed to solve part of the problem, through which he/she entered into collaboration with a family. Bouwkamp and Bouwkamp (2014, p. 301) address the problem of dispersion in the process of support and help to multi-challenged families with the metaphor of a broken car that is repaired part by part in different workshops. Nevertheless, we hope that the problem will be solved when the car is re-assembled. It is even worse than this since families are not cars and a number of professionals who deal with their problems in different areas eagerly and in detail, but separately, represent a burden due to the numerous entries and exits in family life. However, it is inadmissible that the family remains without the support and help that it needs at the end despite all the experts.

The social worker is **an appreciative and accountable ally** (Madsen, 2007). It is important that he/she enters into the collaboration personally engaged, in a way that helps reshape the despair that is a frequent companion of families with much stress into hope. Insisting on the IWPH, where we take into account the voice of the family and each family member, are oriented to a good outcome, and support people in the implementation of actual steps can bring about the desired changes.

“Respectful insistence and persistence,” as Boyd-Franklin and Hafer Bry (2000, p. 133) describe the role of professionals who work with families in a community, seems an appropriate description of the social worker role. The usual reasons for the termination of collaboration in the process of support and help such as “family is not motivated,” “refuses to meet with a professional” etc. should not affect the continuation of the work. A social worker assumes responsibility to continue attempting to “reach” the family (Boyd-Franklin & Hafer Bry, 2000, p. 134) as long as he/she believes that a family obtains support and help. Social work that includes family and the community, more easily “reaches” people.

## New Experience of Families' Collaboration in the Co-creative Working Relationship

The represented starting points of the model of the collaborative processes of social work with families in a community (Figure 1) guided us in collaboration with families. We have co-created possible new steps with students, who, every week, required support for further collaboration with families through the reflection of their experiences and theoretical knowledge related to the model. Collaborative social work with families in a community was always a secure framework for the reflexive use of knowledge.

After testing the model of collaboration with families that face many challenges for one year, we studied the experiences that families had acquired in the process of support and help within the project. In the final in-depth interviews, family members explained what novelties they had experienced during collaborative social work with families in the community<sup>7</sup>.

Most of the families involved in the project have already experienced help from other organisations (governmental and non-governmental organisations in various fields, e.g. social protection, health care). When comparing the reflection on the experience of cooperation within the project with other help experiences, families repeatedly expressed dissatisfaction with the help received within the institutional framework of centres for social work (hereinafter: CSW)<sup>8</sup>. Family members talked about **institutional barriers** in terms of a large number of users who cooperate with one social worker and obstacles posed by the legal framework. The greatest source of frustration highlighted by family members were issues related to **the quality of the established relationship**. This once again confirms that the relationship between the social worker and the user is one of the key factors that contribute to the effective outcome of the support and help process (e.g. Lambert & Barley, 2001; Madsen, 2007; Bouwkamp & Bouwkamp, 2014). The interviewees missed genuine reactions from the professional workers and spoke about their disinterest, unfriendliness, the feeling of not being listened to, the fact that the professional worker was not willing to help. They said that they did not like the formal relationship, as illustrated by the following statement.

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7 The following summarises the results of the analysis of just one of the questions from the otherwise comprehensive final interview, where family members were also asked about what was different in the project of processes of support and help in comparison with other aid the family had received.

8 Centres for social work are the fundamental state institution in the field of social protection in Slovenia. For more see: <http://www.scsd.si/introduction-of-csw.html>.

The other approach is something quite different, yes, yes, yes, yes. You ask, you give your opinion, what shall we do, we could try this, but it is nevertheless a bureaucratic attitude. (I6.F20M.7)<sup>9</sup>

Above all, they did not find it helpful when they experienced professionals as people who are focused on the problem, on what cannot be done.

The worst thing is when you arrive and she says: "No, I cannot, it just cannot be done" (I6.F15M.3)

We believe that the institutional framework set up by the legislation in the field of social protection, the rules of individual organisations etc. must in no way justify a professional and personal lack of enthusiasm on the part of professional workers<sup>10</sup>. The decision on the attitude of an appreciative and accountable ally (Madsen, 2007) is a necessary professional decision of the social worker, to which we are bound by the social work ethics. This was also the fundamental starting point of our project. Families found an important new experience in feeling that the social worker is on the side of the people, constantly explores elements of competence, connectedness and hope (Madsen 2007, p. 22), is an ally that actively supports family members in building their desired lives, and protects the voices of those who are too often ignored (Madsen 2007, p. 42). For families, personal relationships, personal leading (Vries & Bouwkamp, 1995) and work in the present were very important. It was vital for them that a social worker took the time to collaborate, and that interlocutors established trust and connection. On many occasions, interviewees pointed out the social worker's **personal commitment**.

Just the approach. She did everything to help me. (I6.F15M.1)

It meant a lot to families that the help was quick and accessible. It was important that they had someone they could turn to for support and that the person was present in their lives that they had someone who listened to them.

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9 Statements by family members that we obtained from the final interviews were encrypted by previously marking the sequence number of the interview (e.g. interview no. 6: I6), then we added the sequence number of a family and the initial letter of each family member (e.g. family 20 and the mother's answer: I6.F20M). The last number is the sequence number of the statement (e.g. I6.D20M.7).

10 The institutional framework that highlights legislative and procedural issues and restricts space for social work can lead to the social worker's personal frustration. We believe that this may subsequently reflect in the processes of work. Furthermore, any institutional framework that does not support the employees in being able to perform social work competently must be rejected and new ways for change must be determined. Given the current CSW reorganisation that is being carried out in Slovenia, this is certainly considered a challenge. Since one of the objectives of the reorganisation is to ensure more space for social work, we believe that there will be more opportunity to develop the model presented in this book.

Here it is just you, your problems and one who knows how to listen. (I6.F8M.2)

One of the important experiences for multi-challenged families is the experience of insisting and **not giving up** despite the obstacles that occur in the IWPH.

I wish to have one person in my life who will not give up. (I6.F2M.18)

Even the so-called common factors (Lambert & Barley, 2001) were repeatedly verbalised as success factors – when families described the student's characteristics that were important to them.

She is able to work because she is that kind of person. It is not about what she has learned at the faculty, what you have taught her. Really, I cannot stress enough the element of humanity. (I6.F2M.5)

In the event that interlocutors fail to connect due to their character, which happened between one student and a father in one family, this contributes to the interlocutor's dissatisfaction.

F: But how will she ever become a social worker if she cannot speak? R2: What, your ...? F: She cannot speak. She is too quiet. (I6.F11F.2)

In the final interviews, family members verbalised the authenticity of the reactions, **humanity, compassion and warmth** as factors that contributed to success.

If you do not have humanity and compassion, warmth ... (I6.F2M.6)

The interviewees highlighted the experience of the social worker **joining** to the interlocutor as a good experience in the process of support and help. It is important that a social worker enters into collaboration with a family by joining the users through conversation, makes space for family members so they can express their expectations, desires and needs, and does not fill it with his/her ideas on the right solutions. The help process starts with joining (Bass, Dosser & Powell, 2001) the family, where the family members currently are in respect to their story and the circumstances in which they live. Any further step is only possible when we understand each other, explore the desired ways, co-create and agree on a possible step.

Yes, yes, she totally adapted to me, and to my and my family's needs. (I6.F2M.9)

Joining the family does not mean that social workers are invisible in the process of support and help to a family, and remain joined with a family story, their expectations, desires, etc. The concept of **personal leading** (Vries & Bouwkamp, 1995), which describes the role of social workers in processes of help, makes room for both joining and leading towards the desired changes. Personal leading makes room for professional, active man-

agement, in which a social worker personally responds, shares his/her experiences with a family, and opens up possible new perspectives on solutions. First, it is important to join a family, not to rush in with our own ideas on a good outcome away from the family members' experiences before we truly hear and consider them. The co-creative working relationship is also a safe space for **different views, increased visibility, new experiences.**

In order to co-create the desired outcomes with families, it is not sufficient to have a good heart (which is, of course, an important starting point for collaboration with people), we must also have contemporary knowledge and be able to establish a working relationship with people based on the ethics of participation (Hoffman, 1994) and strength perspective (Saleebey, 1997). In the final interviews, families also highlighted the importance of the social worker's **professionalism.**

Yes, she was really so professional. Yes. She was already as she should be. I was satisfied with her. (I6.F10M.6)

Family members can also consider the new paradigm of co-creating help based on post-modernism and social constructionism (see e.g. Andersen, 1994; Anderson & Goolishian, 1994; Hoffman, 1994; Gergen, 2001; Anderson & Gehart, 2007) as strange. In the final interview, a father in one of the families who cooperated in the project expressed dissatisfaction because he expected counselling in the process of help, he expected a social worker to provide the family advice that would constitute a solution. Social workers who derive from the postmodern paradigm, do not try to define – by themselves, without people's collaboration – experiences or solutions, which certain people experience as a new way of collaboration in processes of help. Even Madsen (2003, p. 48), whose work is based on social constructionism and postmodern ideas, says that these ideas can be frustrating, confusing and complex, but also wonderfully liberating. Meanings are constructed through discussion and dialogue, which means that the social worker's professional knowledge is repeatedly provoked (Mešl 2008, p. 29); at the same time with this kind of collaboration, users obtain the role of **active collaborators.** Together we must withstand uncertainty when we explore meanings and create a new narrative. In the final interview, one of the families highlighted the good experience of co-creating solutions as opposed to receiving advice.

F12M: "Now, it was different ..." (Author's note: to visiting the child psychiatrist) F12D: "We worked alone; we did most of the work. XX (XX - child psychiatrist) kept saying to do this and that, and then come back and tell me how it turned out." (I6.F12D.1)

The collaborative partnership in which an appreciative and accountable ally and experts in experience create desired outcomes in a working relationship was a crucial new experi-



ence for families. The invitation to families, as indispensable collaborators, to cooperate and protect the collaboration experience, and **taking into account each family member** is a fundamental shift in processes of help that we have developed in the project.

The interviewees considered collaboration with a family in the community where the family lives, as a special feature of the project and as something positive. They found it useful that families received help at home, since they were more relaxed and this influenced their behaviour.

She came to our house, where we behaved as we normally do in the domestic environment ... (I6.F19M.8)

**Help in the families' homes** also allows establishing special contact between the social worker and the family, and provides more time for collaboration in the IWPH.

Because it creates more specific contact. I like this. This is what we miss. (I6.F10M.2)

The idea of “working on the family turf” (Madsen 2007, p. 35) is a metaphor that can support collaborative partnership. This metaphor can be understood literally but also metaphorically. Social work in people's homes is a concrete example of turning away from the professional to the family turf. Especially work in people's homes is effective with families that traditional programs fail to support on the path to the desired changes (Madsen, 2007, p. 35).

For families in the project, help and support in concrete steps to achieving the desired changes was very important. The concept of the IWPH directs all participants to translate the co-created solutions and desired outcomes of problems that are formed in the working relationship into action and concrete steps to implement the agreements (Čačinovič Vogrinčič et al., 2005, p. 15). The social worker is personally involved in the project. When the family is not able to take all the steps, the social worker is the one who ensures that they take these steps together, especially at the beginning of collaboration when the family does not have enough social power.

He asked at the CSW. He wanted to know why I was not receiving financial assistance. I had submitted the application three times but they did not want to grant the assistance. I wanted a new bed because my bed was destroyed. We slept on the floor. I could not get the assistance. I spent three months submitting applications but I did not receive financial assistance. I succeeded in the fourth attempt because I submitted the form together with ŠD16. (I6.F16M.4)

In the systemic doctrine on social work, Lüssi (1991) named this as the basic social work. **Care management**, where a social worker helps families overcome everyday life issues

by providing financial and other matters, reaching decisions with them, providing small help favours, maintaining contact with them, supporting matters of personal importance so the families can cope with tasks that must be performed but they are unable to do themselves at a given moment. And the management described as **provision**, through which a social worker provides something to a family e.g. money, thing, education, work or any other favour – either from the institution's own funds or from other organisations and people. Lüssi (1991, p. 94) points out that a systemic-oriented social worker does not easily perform this type of help, but incorporates it into a large-scale project to solve the problem. The help should be targeted to support people for a long time so that they are able to reintegrate into the social system. Above all, a social worker tries to **mobilise resources in the natural social network**.

... she also helped me with learning, and she gave me the form for free-of-charge legal help. (I6.F8M.9)

She enabled D13H to go on a day trip during the winter holidays. (I6.F13M.4)

The review of the development of social work with families shows that helping families in social work was debated in the past. Wood and Geismar wrote (1989 as cited in Wise, 2005, p. 1) that social work „owes its beginnings of professionalisation to families with many problems.“ Social workers need answers when they daily met people with complex social problems and who need help (Mešl 2008, p. 95). History reveals that even in early 19th century America, volunteer „visitors“ visited homes of the poor (Wise, 2005, p. 1), associations actively assisted families with financial, medical, emotional and other distress (Wise, 2005, p. 1). The beginnings of social work professionalisation were aimed at helping families. Parton and O'Byrne (2000, p. 2) pointed out that social workers traditionally build their expertise on the ability to establish a relationship with different people, explore resources in the environment and use them for the benefit of the user, negotiate with various individuals, groups and organisations and mobilise their energy, enter into other conceptual worlds in order to offer help. They describe ways of acting that families in the project described as important factors for success, which differ from experiences of the help received in other contexts of today's social work.

Parton and O'Byrne (2000, p. 2) express concern that social work – the way we perceive it and the way it is performed in practice – has become very defensive, overly procedural and narrow (considering the evaluation, management and insurance of risk). They also warn about the result that social workers spend less time working with and talking to people. They say that it seems social work has almost become anti-social. Attempts to make it more rational and predictable have resulted (probably unintentionally) in the fact

that it has moved away from what is typical, from its essential elements that compose its main powers.

Experiences of families in the project confirm that the social work profession requires a shift from the often (too) rigid institutional frameworks to people in a community where all participants meet at the human level in the IWPH and actively collaborate in co-creating the desired outcomes. **Protecting the co-creation of desired outcomes** is a fundamental challenge for contemporary social work with families facing many challenges.

In continuation, we explore ways of educating and developing knowledge in social work with families that could contribute to the desired shift in practice. Parton and O'Byrne (2000, p. 2) see reasons for changes, due to which social workers moved away from the primary mission of our science and profession, including in the failure to develop useful theoretical approaches. They consider approaches that would be useful for practitioners and would directly try to create practice – especially approaches that constitute the core of the practice – and would explicitly consider language and dialogue (Parton & O'Byrne, 2000, p. 2). We believe that in past decades, we have taken a step forward in developing useful theoretical knowledge for competent social-working ways of acting. The development of social work is never completed because it is necessary to respond continually to people's needs and to co-create new knowledge with them.

## The Importance of Practical Learning in the Context of a Reflexive Approach to the Use of Knowledge

Collaborative, postmodern approaches also promisingly open space for practical learning, exploring social work practice and the development of new actionable knowledge. Our thesis is that **students can only learn collaborative social work with families** based on co-creative working relationships through this kind **experience of collaboration with professors**. Therefore, the learning process in which professors and students establish a working relationship and co-create new knowledge is of the utmost importance. It is important that professors are appreciative and accountable allies in relation to students who are experts in experience in the learning process and will become people's appreciative and accountable allies through processes of support and help in practice.

## The Process of Practical Learning in Collaborative Dialogue

Social work is a practical profession. That is why **practical learning** in the context of social work study has always been a key topic during the preparation of future social workers for competent professional work in practice, as it enables an individual to learn how to work. This is supported by numerous formal studies and informal anecdotal reports (Bogo (2010) cites: Tolson and Kopp, Raskin, Kadushin, Lager and Robbins). Bogo (2010) believes that it is understandable that most students consider practical learning as a key component of their education, since most of them study social work in order to prepare themselves for future professional work and become competent and efficient professionals. Through the practice, students learn to use theoretical concepts and acquired knowledge. They learn about social work with the support and leadership of experienced social workers.

Social work graduates should be well prepared for working with people and must be able to carry out practice in a competent, efficient and ethical manner, especially because they are being trained to work with people who are daily facing complex psychosocial problems (Bogo, 2010). At the Faculty of Social Work, we realise that practical learning is essential for work in practice. At this point, we first briefly present how practice, in the context of undergraduate study at our faculty, is organised. The scheme of currently developed practical learning is upgraded from the first to the fourth year (e.g. students' tasks and obligations in connection with independent work with users, which must be carried out within the practice – in the first year, students are only so-called social worker's shadows, whereas in the fourth year, they independently complete certain tasks, e.g. conduct conversations). Students can implement practice in more than 250 learning bases. In the first and second year of undergraduate studies, students must carry out 100 hours of practice. Students choose to collaborate with one user (or a group of users) approximately once a week (2-4 hours / week), with 36 hours of practice being carried out altogether, which means that they spend one week at the learning base where they carry out practice in order to achieve a better understanding of its activities. In the third year, students must carry out 280 hours of practice continuously at a learning base: the same applies in the 4th year, but in the extent of 80 hours. Each year a student has two mentors, one at the learning base, and the other at the faculty. Mentors at the learning base are experienced social workers, whose mission is to support the students in carrying out practical work, present the work of a learning base, introduce students to concrete work with users, support them in testing theoretical concepts in practice, etc. The role of the mentors at the faculty (employed teaching staff at the faculty) is to prepare students for practical work,

assist them and support the reflection and evaluation of student's experiences and the integration of theory and practice. The students at the faculty are divided into smaller mentoring groups (approximately 15 students); each mentor group is led by one mentor. Throughout the period of practical learning, they cooperate in a triangle: student – mentor at the learning base – mentor at the faculty; in the centre of the triangle is a user (a group of users) for practical learning, in addition to preparing students for competent work in practice, is also designed to support users in achieving the desired outcomes.

In the 2013/2014 academic year, the Faculty of Social Work began implementing the regular Social Work with Families master's programme. Practical learning in the context of the master's programme is aimed at acquiring knowledge and practical experiences for independent professional work in the field of social work with families. The students use and test in practice the knowledge acquired in the programme. The students continuously carry out 80 hours of practice at the selected learning base, as in the 4th year of undergraduate study. When we started implementing the Social Work with the Families master's programme, we considered creating a practical learning programme that would enable students to gain new experiences that would be **an upgrade of the practice within the undergraduate study**. We obtained the opportunity to do so under the project *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health*.

What was new in practical learning in the context of this project? Students **independently entered** in the processes of support and help to families **without the presence of a mentor**. Students had to manage the IWPH for families independently, and thus rely on the acquired theoretical knowledge, reflect on events “here and now” and look for ways to maintain a working relationship with the family. Besides the independent work, the way of helping was also a novelty, bringing a new paradigm of social work with families. In the IWPH, students implemented in practice the concept of a co-creative working relationship. Support for students considered **a reflexive approach** to the use of knowledge in practice (Healy, 2005) founded on the reflection of theory based on experiences in practice. Students and mentors explored the use of theoretical knowledge in practice and were active participants in the creation of new knowledge.<sup>11</sup> The intensive process of **reflexive learning** did not only take place within mentoring meetings at the faculty, but also in the context of the study process, where, on different courses, we continued the reflection on practical experiences, explored possible forms of conduct in specific situations in the

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11 More on the subject: Taylor & White, 2000; Healy, 2005; Bager-Charleson, 2014; Phillips, Kristansen, Vehviläinen & Gunnarsson, 2014.

field, etc. The project aimed to overcome the distinction between theory and practice, so that students would use and test the theory (gained during lectures) in practice, since it is often the case (as Bogo (2010) also points out) that students do not know how to use the theory they have learned in lectures in practice. Students often notice a gap between what they have learned in theory and what they see in practice. Unfortunately, they also often receive information about the gap between theory and practice from mentors at the learning bases.

Practical learning was therefore carried out in a collaborative dialogue between students and mentors at the faculty. This enabled the students to reflect upon their own behaviour in the processes of support and help in order to improve collaboration, more easily **verbalise and increase the visibility of how they work**. Bogo (2010) also notes that in the context of practical learning, the learning environment and the relationship between mentor and student are very important. It is important that the mentor supports the student and that they have a collaborative and non-hierarchical relationship. If students feel that mentors are interested in their learning, and provide regular mentoring meetings and individual consultations with the aim of reflecting upon the behaviour in practice, it is more likely that the working relationship between mentor and student will grow and develop (Barretti, 2009 as cited in Bogo, 2010).

Practical learning set within the project provides a framework for the reflexive use of knowledge in practice and in the development of new knowledge for the further development of the social work science and profession. The challenge, which would represent an upgrade of this kind of practical learning, is seen in including experienced practitioners and social workers into the learning bases, in a collaborative dialogue between students and mentors, as in the regular faculty programme. For the practical learning designed within the project to become part of the regular programme, it is important to find ways to support mentors in learning bases so they can help students identify, use and develop social work concepts in practical situations.

## The Reflexive Approach and the Collaborative Production of New Knowledge

Postmodern approaches based on dialogue, participation and empowerment, with the question of the process and language placed in the centre, newly construct the **production of knowledge**. The production of knowledge becomes a collaborative initiative through which we are encouraged to become interdisciplinary and practice-relevant knowledge in



networks with other researchers and practitioners, say Phillips et al. (2014, p. xii). We further add the necessary involvement of the users we collaborate with because we consider that this element also significantly contributes to the production of new knowledge when we draw on the postmodern, co-creative paradigm in the processes of support and help.

The specificity of social work, which operates with people with complex psychosocial problems, requires the **constant development of knowledge** and the creation of new responses to specific daily challenges people face. Therefore, the social worker's competence is seen in the capacity of continuous learning and building their own developing theory on practice in real life situations – this is where we wish to support the students of Social Work with the Families master's programme.

In social work, we daily implement so-called personal research (Bager-Charleson, 2014, p. 2) by exploring interactions with users. Personal research is carried out during the process of help through “reflection-in-action” (Schön, 1991) and after the final meeting through recording the process, in conversations with the co-workers, and supervision. Also, so-called formal studies (Bager-Charleson, 2014, p. 3) on social work practice that arise from the defined research problem are structured, implemented according to a specific methodology etc., and are specific due to the method of research and the production of new knowledge. Let us briefly consider the different ways of using and developing the knowledge that has developed throughout the history of the science and is still present in today's scientific area.

In developing knowledge, we can focus on three starting points, three approaches to creating and using the theory in practice. We shall summarise them (by Argyris & Schön, 1974; Taylor & White, 2000; Healy, 2005; Mešl, 2008) to explore the methods of social work development.

**Technical rationality** is the epistemology of practice, which originates from positivist philosophy and is incorporated into the foundations of modern university research. In the model of technical rationality, professional activity consists of solving the problem specifically by using scientific theories and techniques; practitioners solve technical problems and choose technical means that best suit a particular purpose. Precise professional practitioners solve well-formulated problems using theory and techniques that derive from systematic scientific knowledge.

In social work, Healy (2005, p. 97) explores the creation and use of the theory in practice. Healy called the model of technical rationality a movement for empirical practice, also known as an evidence-based practice. She says that the school argues that social work should be based on rational knowledge confirmed by scientific methods. This movement



promotes the approach of developing and using theories from the “top down”, where researchers develop and test social work theories, which practitioners then use in practice. A social worker is a subject and user of knowledge, not its creator. In this approach, the development and use of knowledge are separated; some believe theory in practice is not developed due to the lack of time and scientific tools for practitioners. The problem of evidence-based tradition also lies in the fact that it does not provide strategies for arranging research evidence that may exist on a specific practical situation, may contradict each other, and does not offer practitioners’ guidelines for management.

**The reflective approach** is the second approach; Schön (1987, 1991) believes that this approach better suits the needs of competent practitioners. Schön (Schön 1987, 1991) believes that the entire process is central to the “art” by which practitioners are sometimes able to cope with situations of uncertainty, instability, uniqueness and conflicts of values. With this approach, the author emphasises the practitioner’s experiential and tacit knowledge. The idea is that a practitioner in immediate practice considers experiential knowledge based on sensual perception and observation. The practitioner becomes a researcher in the context of practice and does not depend on categories of formal theory and techniques, but constructs a new individual and unique theory (Mešl, 2008, p. 61).

Healy (2005) sums up a second approach to social work. In comparison to the evidence-based practice, the reflective approach acknowledges the practitioner’s experiences in practice as a basis for the creation and use of knowledge in practice. The greatest strength of this approach is that it recognises and appreciates social workers as active creators and users of theory and other forms of knowledge. Despite the advantages, Healy (2005) warns about a number of issues emphasising only the practitioner’s reflection as a basis for the creation and use of knowledge. The emphasis on intuitive and tacit knowledge means that the basis of our knowledge remains inaccessible to users, funders, employers, etc. Even when we perceive the practitioner’s reflection as the “truth” of social work practice, this approach leaves no room for a critical examination of the arguments that the practitioner creates.

Taylor and White (2000) believe that a critical practice of reflection on experiential knowledge enables a more uncertain, ambiguous and complex world; however, it also closes off a lot of it because it overshadows the users’ perspectives and adopts practitioner statements as a true representation of what happened. This intuitive knowledge is hard to use for the purpose of formal education. Reliance on the intuitive and on tacit knowledge can lead to incorrect decisions in practical cases, which encompass a critical

threat to safety or decisions associated with legislative compliance. It is also difficult to use such knowledge and introduce it to other institutions when we have to justify the decisions. We must be able to verbalise our knowledge in order to justify professional decisions.

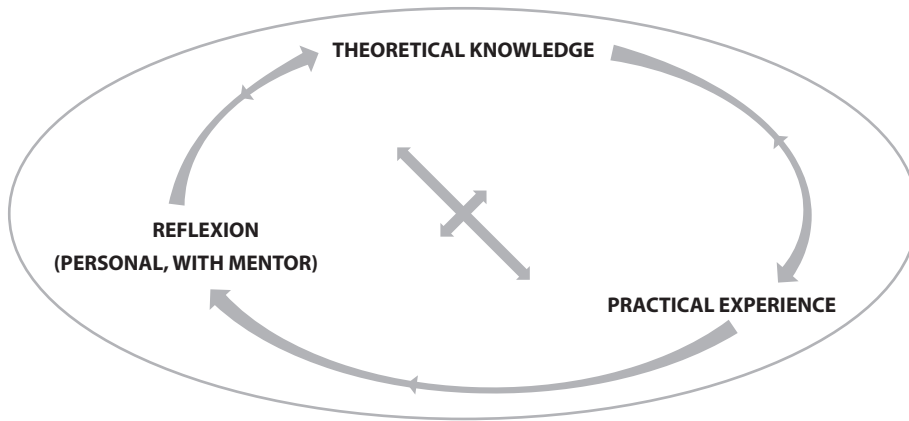
Finally, if we focus primarily on the inductive construction of knowledge, i.e. construction from practical experiences, we may fail in the use of formal theories in practice, as a basis for the creation of theory and knowledge in practice. There is a risk that we would waste energy on continuous inventing, rather than developing and expanding both existing theories and our own basic knowledge using existing theories.

Even in the **reflexive approach** that was developed by Taylor and White (2000), the focus is on reflection – the reflection on theory created based on practical experiences. In this approach, the emphasis is on the use of formal theory in practice and active participation in its creation. It is not merely about applying it; this must be done through reflection and wisely by using and upgrading theoretical knowledge (Mešl, 2008, p. 61).

A reflexive approach to the use and development of the theory stems from the position that the conflict between theory and practice does not exist once we realise that social workers use the theory and create the theory in practice. Thus, it is not about simply using a formal theory (e.g. the system theory, the strength perspective or postmodern theory), but using it as a basis for the creation of knowledge in practice. It is about a reflexive approach to the active creation of meanings and knowledge, which surpasses certain limitations of the two indicated approaches.

We do not consider the presented approaches to the development and use of knowledge to be a choice since each of them adds an important perspective to the creation of frameworks for handling in practice. The empirical approach or technical rationality provides a framework for disciplined scientific thinking, examination of evidence, and justifying the effectiveness of the developed knowledge. The reflection on experiential knowledge is a skill that is required in social work to integrate thoughts and actions in an effective way to reduce the gap between the theory and practice when we design our own “practical” theory in practical situations. The reflexive approach adds an important emphasis – in social work, we create the theory in practice but, however, it is important to use formal theory as a basis for the creation of knowledge.

Figure 2 *The circular process of the theoretical and practical upgrade of knowledge*



When a new theoretical knowledge is developed from practical research of social work deriving from “bottom-up” collaborative research and a reflexive approach to using and developing knowledge, the circle first described by Lewin in the previous century with the famous quote (1952, as cited in Bager-Charleson, 2014, p. 3) “There is nothing so practical as a good theory” is concluded. We agree that theory is an indispensable starting point for good practice, and we believe that in this century the use of theory is even more important. Contemporary, postmodern social work requires social workers to share their theoretical knowledge with people, with interlocutors in the work process, since this is the only way to provide space for the co-creation of desired outcomes. The circle is being concluded with postmodern approaches that commence “at the other end”, as Lewin started a few decades ago. Hunt (1987, as cited in Briever, Gardner & Bobele, 1999, p. 45) paraphrased Lewin: “There is nothing as theoretical as good practice”. The circle can be concluded with the understanding and use of the reflexive approach, which exceeds the separation of theory and practice, as both processes are intertwined: **“Good theory is practical and good practice is theoretical. Through the reflexion of both, we develop new theoretical knowledge and practice”**.

## Supporting Students for the Reflexive Use of Knowledge in Practice

In this subchapter, we present the students' perspective on practical learning experiences as set out within the framework of the project. The content is based on analysis of the students' final paper and focus groups with students at the end of the practice.

One of the main objectives of the project was to support students in using theoretical knowledge in practice and **developing a professional identity** based on the contemporary knowledge required for providing effective help to families. In the context of practical learning, we enabled students to experience independent work with families, with a focus on the reflection of experiential knowledge. The purpose of the reflection upon student practice is to help the student integrate and use the theory in practice, and transfer the knowledge he/she obtained during lectures to acting in practice and to learn how to work (Bogo, 2010). One of the reasons why students decided to carry out the practice in the context of the project was to gain experience in social work with families and in conducting conversations.

I accepted the invitation because I wanted to gain as much practical experience as possible by the end of the course etc. (FP1.F16.1<sup>12</sup>)

Students mainly wanted to obtain new experiences because they felt insufficiently qualified to work with families and conduct conversations.

At the beginning of this academic year, I was not sure whether to choose a classical practice, or one where you work independently with a family, because I was not confident in my abilities, skills and myself. (FP1.F18.1)

At the same time, at the beginning of the collaboration with families, students had problems using social-working concepts in practice since they had established that their use in practice is not as easy as it sounds in theory – they experienced the gap between theory and practice. Bogo (2010) discusses similar findings when indicating that during the training, students learn various theoretical concepts, models and techniques, and become acquainted with various empirical findings; however, despite all this knowledge, they often have difficulties using this knowledge in practice.

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12 Excerpts from students' final papers were marked with the letter FP, the number of question in the final paper, and a familysequence number. The last number is the sequence number of the statement (e.g. question 1 of the final paper of the student who worked with the family with sequence No. 16: FP1.F16.1).

I entered the project with high expectations, I wanted to learn, gain experience and explore these concepts in practice. However, I established that it is much harder to implement them than it is to talk about them. In theory, I am highly familiar with the strength perspective, but in order to implement it in practice a lot of effort is required. The speech you share with a family is often not adapted – at least in my case. I see this as a problem and I will try to work on it. (FSF16<sup>13</sup>)

During the collaboration with families, students received **support for the use of theory in practice** through collaborative dialogue with a mentor within the mentoring meetings and individual consultations at the faculty, where they had the opportunity to reflect upon their own behaviour in practice. In this respect, students highlighted the importance of intensive support in small mentoring groups, which they received from the mentors at the faculty.

I used to consider certain matters too much and I was unable to find a solution. In this respect, the opinions I received from others (classmates, mentors) were useful and helped me to “step out” from the frame I had set so I could see the matter from another perspective and obtain a larger picture. (FP10.F18.20)

Practical learning enabled students to test the use of theoretical concepts in practice and thus obtain professional experience for social work with families.

This last year enabled me to start using the internalised concepts we learned throughout four years in practice. So far, they were only theoretical concepts and I did not always understand the meaning and importance – despite the fact that we discussed them many times and that the professors explained why they were important and helpful. At the beginning of the academic year I felt as though I did not have enough knowledge and concepts that would help me in my work; now I know that I do. This year, I became aware of them and started using them. (FP10.F7.9)

The reflexive use of knowledge in practice **gave students the words to describe how and what they did.**

One of the things I became aware of was that it is better if I know how to express certain things. In the first year, I could not imagine how to set an agreement on collaboration. This year, I panicked when I started practice since I was not sure how to do it. Then you face the situation – and you just find the words. Over the course of the process, I learned a lot about how to use the language, how to talk and in what way. It is not the same as having an informal conversation with your friends. (FSF2)

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13 Student statements that were obtained from group discussions within the focus groups were coded by marking students' statements with the letter F (focus) and adding the sequence number of the student and the family that cooperated with the student (e.g. focus group – a student who cooperated with the family 16: FSF16).

At the same time, practical learning was also an opportunity for the students' **personal growth**.

I also gained a lot personally – to find your own place, win your own space. I was also very surprised to discover that I often have negative expectations, as well as how things can surprise you. (FP10.F6.4)

At the end of collaboration with families, students expressed their satisfaction with the selected form of practical learning.

This has been a very valuable experience. This kind of practice is really worth a lot. (FP10.F16.9)

For us it was important that we achieved the goal we set ourselves within the framework of the project – the students **felt more competent** and more professional in conducting a conversation with a family.

Developing as an expert: at this point I cannot say that over the last five years I have become an expert or reached a level where I would see myself as an expert in the field of social work since I have no work experience, except in the context of the practice. However, I can say that as a practitioner, I reached the point where I feel ready to start the concrete work. (FP10.F7.8)

**Social work concepts** were seen as necessary and valuable support for their work.

Only this year, we realised that these concepts are useful and effective if you embrace and use them. (FSF2)

With this kind of practical learning, students gained new experiences and a new perspective on the use of social work concepts in practice. Above all, they experienced that they **could rely on theoretical knowledge in practice**, use it in the process of support and help to people, and contribute to the development of the social work profession with respect to social work knowledge and a reflexive approach.

I have always liked the social work philosophy, but I have never felt it as intensely as this year. A profession that encourages and gives strength and hope for a better and brighter future. Due to a good experience, I realised that this approach works. I hope that in the future, when I am fully employed, I will not forget this and will always keep in mind the basic philosophy and social work concepts. In the conclusion of the final paper, I would like to point out that the social work course has given me a lot. I can say that it is responsible for some of my good qualities. In the first year of the study I was “narrow-minded”, but now I look at the world more openly and in a non-judgmental way. I have improved throughout each year of the course. Slowly and gradually, I accepted social work and its concepts for my own. Today, I firmly believe in their effectiveness. (FP10.F2.13)

## Conclusion: The Reflexive Use and Development of Skills in Social Work with Families in a Community

The model of collaborative processes within social work with families in a community, which was formed in the project, provides a presentation of developed contemporary theoretical knowledge that we can use in social work with families. After a year of experiencing the use in practice, we *inter alia* present the students' reflection on experiences in collaborating with families in a community. This chapter shows what guided us during the collaboration with families and enabled us a safe framework for the reflexive use of knowledge.

Social work is a science and profession with no predetermined answers about the desired outcomes. **A good outcome is one that is co-created with all participants** and derives from Lüssi's principle of multiple, all-sided gain (1991), strengthening the resilience of participants in the IWPH. This does not mean that we always create the new from nothing: we have contemporary knowledge, which is an important starting point, when such knowledge is used in dialogue with people. We have the support in knowledge from which we draw answers on how to lead the processes of support and help, establish a relationship, and be in a relationship with people as their appreciative and accountable ally. Nevertheless, each collaboration with people is a new journey towards the desired changes, which need to be explored, and the co-creation of conditions in order to achieve them.

In this project, all the participants explored the unexplored: researchers who looked for ways to support students in implementing in practice the concept of the co-creative working relationship, students who looked for ways to co-create good outcomes with families in a community and the families who joined us on the way to the co-creation of the desired changes.

In this project, we have further established how important it is to understand that in social work we must constantly **hold on to the uncertainty of co-creation**. The uncertainty that a social worker constantly faces due to the challenge of possessing anticipatory responses and good solutions for people. The uncertainty of research in practice with people. The continuous development of new knowledge. Apart from uncertainty, there is opportunity, creativity, fulfilment and the luxury of co-creating the new with people. Collaborative processes open up new opportunities for social work; the best things happen when all the voices are heard and considered, when the outcome is co-created. In the



process of support and help to multi-challenged families, something new must happen, and this new must yet be co-created.

Future social workers need support to withstand the uncertainty that is always part of the processes of support and help, and to develop their professional theoretical framework for more certainty. **Mentoring support for reflexive learning** through independent work in practice is the key starting point. Finding the balance between the certainty that closes off the space for collaboration with people but means working from a position of power position, and complete uncertainty where we depend on a good heart and common sense, is the art of social work education, work in practice and the development of new knowledge.

People who need help, our interlocutors in the co-creative working relationship, also need support in the new experience of co-creation. The experience of collaboration, consideration and slow progress with co-created steps towards the desired outcome is often a completely new experience of being in a relationship in the process of help. It also means a possible shift to a **sense of competence** and the experience of **being able to withstand the uncertainty** if we are in the working project together. This can lead to key shifts in the desired direction.

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*Ana Jagrič, Patricija Vidonja*

# Supporting and Helping Multi-challenged Families: Illustrating the Process of Social Work with Families

## Abstract

In this chapter, the authors present the process of co-created support and help with the interlocutor and her family. They show how the establishment of a co-creative working relationship and an individual working project of help in social work with families encouraged the interlocutor to achieve the desired outcomes. Collaboration in the project made possible for the interlocutor to consider herself in relation to others, and thereby establish better interpersonal relationships. The analysis of the process of collaboration in the individual working project of help revealed that the use of postmodern concepts of social work with families contributes to the achievement of the set goals. The readers will be able to gather ideas for their practical work and thus enrich collaboration with their interlocutors.

**Keywords:** *co-creative working relationship, individual working project of help, presentation of the process of work, co-creation of solutions*

## Introduction

Postmodern concepts of support and help co-shape social work practice. The chapter presents the process of work in an **individual working project of help** (hereinafter: IWPH) (Čačinovič Vogrinčič, Kobal, Mešl & Možina, 2008). In the working relationship, a social worker co-creates a project that is individual, because it is created in collaboration with the interlocutor and her family, working, because a social worker and interlocutor concretise the agreed changes, tasks and deadlines, and project, because it takes place at a specific time and is directed to good and desired outcomes.

The presented process of work was **co-created** between a graduate social worker, a student of the Social Work with Families master's study programme and a family that responded to the Association of Friends of Youth Ljubljana Moste-Polje's invitation to collaborate in the project. The collaboration involved 16 meetings, mostly held at the family's home.

In the chapter, the social worker is referred to as a student, because we wish to emphasise the importance of the **learning experience** that she gained in the context of the master's study, and her interlocutor is called Andrea, a made up name to protect her identity.

In order to demonstrate the use of the concepts of social work in practice, we made use of material collected from the action research project<sup>1</sup> – **the study of a concrete example of collaboration between interlocutors**. We analysed the collected material according to the method of qualitative analysis (Mesec, 1998). We analysed the student's records<sup>2</sup> (forms for recording meetings with the family, forms to explore initial expectations, forms for the interim and final evaluations and the final paper), a final interview with Andrea, and focus groups of students who participated in the project. From the materials, we selected parts of the text that were relevant in order to show the concepts of social work with families, and determined the name units that were created based on theoretical starting points and common sense notions. We linked the named units based on the common code, and sort them in superior categories. In this way, we obtained material that is more transparent and formed a theory in which we presented the process of social work with families.

The chapter presents a possible way of establishing and developing a co-creative working relationship, the concept of the instrumental definition of the problem and the co-creation of solutions, a chronological summary of fundamental shifts in direction to achieve the desired outcomes, the concept of strength perspective, the ethics of participation and not-knowing position, the importance of planning the completion of the working relationship and the student's reflection on the process of work with the family.

## The Description of Family Situation

The family consists of Andrea, a single mother, and three school-age children, two of them with a handicap. Mom divorced the children's father a few years ago; since then the father has no regular contact with the children and does not pay child support. The fam-

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<sup>1</sup> We obtained a permission from the student and Andrea to use the material.

<sup>2</sup> Records were prepared by a student Nika Šeruga, as part of her study obligations.

ily's economic status is low because the mother left the labour market in order to care for her children with a handicap. The family is facing severe material and personal distress. Andrea has very little time for herself; if she wants to go somewhere, a babysitter has to watch over the children, which represents an additional cost. Before Andrea started collaborating with the student, her fiancé left her.

## Establishing and Developing a Co-creative Working Relationship

In the introductory chapter, we noted that the **relationship between the social worker and her interlocutor** is a relationship between an appreciative and accountable ally and an expert in experience. It is about co-operation, co-research and co-creation performed by co-speakers, co-partners and co-workers in the processes of help (Čačinovič Vogrinčič, 2015, p. 181). Constructionist, postmodern social work concepts (as in Andersen, 1994; Čačinovič Vogrinčič, 2006; O'Hanlon, 1993; Parton & O'Byrne, 2000; Saleebey, 1997) placed the relationship in the process of help at the centre of attention (Čačinovič Vogrinčič, 2015, p. 183).

Since the relationship mostly contributes to the success of collaboration in the processes of support and help (Lambert & Barley, 2001), it is understandable that students are encouraged, in the context of the study of social work, to practise establishing a **co-creative working relationship** (Čačinovič Vogrinčič, 2006). This way, students learn how to take into account the key elements of the working relationship, which is the foundation for the development of personal contact and the relationship between the interlocutors.

The element of the working relationship, an **agreement on collaboration**<sup>3</sup>, is an important introductory ritual (Čačinovič Vogrinčič, 2006). The student kept this in mind at the first meeting with the family.

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3 See the first chapter of the author Čačinovič Vogrinčič.

I was aware that the first meeting significantly influences how our further meetings will evolve. Before the meeting, I once again renew an agreement on collaboration and the elements it contains. (FP3.F2.4)<sup>4</sup>

At their first meeting, the student and Andrea introduced themselves and spent some time talking about the project. Within the framework of the agreement on collaboration, they agreed to collaborate **here and now**, defined the time available, agreed on how they would work and what the role of all participants involved in the process of help would be.

At this point, I began with an agreement on collaboration. I explained that our collaboration would take place here and now, which means that we would focus on the present, on what we can achieve during our conversations. I proposed that we should meet once a week for about an hour and a half. I told her that in social work we work in a co-creative manner, that solutions are not predetermined but co-created. My role would be to establish and keep a safe space for work, where everyone is invited to speak-up and that I would like her to contribute her part in co-creating solutions. This means that **I do not have a solution to the problem** and that we would both explore the possible solutions and steps that will help her to achieve them. Andrea agreed with this way of working. (FP3.F2.8)

In social work with families, we usually **define working topics at the first meeting**. The student and Andrea, however, did not define them because at the beginning of the collaboration, during the exploration of the desired outcomes, Andrea said that she did not have any problems, but would like to meet the student and talk to her. She did not expect the kind of collaboration with the student that developed later. This was also influenced by the fact that Andrea did not (actively) look for psychosocial help and support, only responded to the invitation of Association of Friends of Youth Ljubljana Moste-Polje. However, they were able to define working topics at the second meeting. At the first meeting, the student joined Andrea in the desire to meet once a week outside for a cup of coffee. She did not force Andrea to participate, she did not have a plan for her, she only joined in her wishes.

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4 For encryption, we marked the extracts from the student's final paper with the letter Z and added the sequence number of the question. Then we added the sequence number of the family, which in this case is F2 and the number of the student's statement (e.g. FP3.F2.4). Statements relating to the final interview with the family are marked with the letter I and the number of the question. We added the sequence number of the family, the first letter of the individual family member, which in this case is M for mother, and the sequence number of the statement (e.g. I3.F2M.2). We marked statements from focus groups with the letters FS, the sequence number of the family and the sequence number of the statement (e.g. FSF2.19). We marked extracts from the interim evaluation with the letter IE, the question number, the sequence number of the family and the letter M (e.g. IE6.F2M). Excerpts from forms for recording meetings with a family were marked with the letter FM, followed by the letter E (for the ethics of participation), C (for completion), or R (for reflection). This was followed by the code for student (S) and the family sequence number, the sequence number of the form and the sequence number of the statement on the form (e.g. FME.SF2.13.1, FMC.SF2.8.1, FMR.SF2.7.1).



She said once a week, whatever is easier for me. I like to go out for a cup of coffee, because I am with children all the time. She said that we could go out for a cup of coffee and talk about anything I want. (I3.F2M.2)

In the project, the student began with the starting point of social work with families – to **invite all the family members to participate**. At the first meeting, the student pointed out that she would like all the family members to be involved in collaboration. Andrea immediately stopped her and said that there was no need to involve children in IWPH, since she has a good relationship with the oldest child and the youngest two cannot collaborate since they are unable to express themselves verbally. The student was still interested in how to establish a working relationship with the children because they may also significantly contribute to the co-creation of solutions. She wondered how she could join them where they are, and explore with them how to involve them in a conversation (Kodele & Mešl, 2013). After the first meeting, the student agreed with her that they would meet alone the second time. This proved worthwhile, as they formed working topics (e.g. a conversation about the ex-husband's violence, the problem of child support and father's contacts with children, the relationship with an ex-fiancé), where the children's participation was unnecessary and inappropriate. Thus, the student supported the interlocutor's desire to spare the children from unpleasant topics that Andrea faced. She wanted to avoid the possibility of children taking over the role of a parent in the family, so the student and Andrea created a space for defining her problems and space to solve them (Bouwkamp & Bouwkamp, 2014).

Although the children were not actively involved in the working process of help, the student had contact with them and they established a good relationship. Despite the fact that the student and Andrea often met alone, many topics in their collaboration involved relationships, which resulted in the **empowerment of the whole family** (e.g. arranging child support, more frequent father's contact with children, better family relations). The student considered the fact that social work with families does not take place under the condition that all family members must attend meetings, but derived from what is possible and reasonable. When a social worker helps an interlocutor in the process of support and help, she not only helps the individual but the family as a whole (Bouwkamp & Bouwkamp, 2014).

The agreement on collaboration, in which we agree on collaboration here and now, the time that is available, the manner of work and the role of the participants in the process of help are **the foundations from which we proceed in social work** as it “sets the social-working framework” (Čačinovič Vogrinčič et al., 2008, p. 10) of the IWPH that is co-created by the participants.

The relationship is built and maintained from the first to the last meeting. Andrea and the student devoted a lot of time to **building a relationship**.

I believe that the first meeting contributed to the well-established relationship between Andrea and me. I realised how important joining is in social work. During the evaluations, Andrea told me that she was positively surprised at my reaction at the first meeting – when **I accepted her statement that she does not have any problems**. (FP7.F2.7)

Through the development of the relationship, the topics of discussion between the interlocutors and the social worker change. Usually we start solving problems at the so-called **first level** – problems connected to topics that people verbalise within the instrumental definition of the problem (Lüssi, 1991); obtaining trust and deepening the relationship may contribute to disclosing topics at the **second level of social work** with families.<sup>5</sup>

At our first meetings, we discussed topics that fall within the first level (e.g. child support, father's contacts with children). When Andrea started to trust me and felt safe in the relationship, our conversation was mainly about topics that fall within the second level (e.g. Andrea in relation to other people). (FP7.F2.13)

## The Instrumental Definition of the Problem and the Co-creation of Solutions

The instrumental definition of the problem (Lüssi, 1991) encourages everyone involved in the problem to give her/his own description of the problem situation, if possible. The main idea of the element is **to move towards the exploration of the desired outcomes**. The concept leads us to co-create solutions, where each person defines her/his aspect of the desired outcome and identifies her/his possible contribution to it. It is important that the social worker and the interlocutor identify patterns that the interlocutor experiences as problematic and patterns that could affect her/his life more encouragingly – solution patterns<sup>6</sup> (Schiepek et al., 2005).

The open invitation to participate helped Andrea talk about topics that were important to her. At the second meeting, Andrea and the student began creating an instrumental definition of the problem. In the process of support and help, the student invited the interlocutor to discuss topics, where she would like changes to happen, **what the desired**

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5 See the first chapter of the author Čačinovič Vogrinčič.

6 See the second chapter of the author Šugman Bohinc.

**outcomes are and how could she achieve them.** Andrea first identified the problem of the non-payment of child support and the lack of contact between the children and their father. She wanted their father to settle unpaid child support, make regular payments in the future, and have more contact with the children.

She said that her ex-husband rarely visits children and when he does, he only takes the oldest one, since he does not wish to take interest with the youngest two. He has never paid child support regularly and she has not received any money in the last 6 months. (FP4.F2.2)

When the student and Andrea established a working relationship and trust between them developed, Andrea became highly motivated to solve problems and wanted to **visit the centre for social work** with the student – this was one of the steps required to obtain unpaid child support. She wanted the student to join her as her advocate, in case anything went wrong, since in the past she had some bad experiences with social workers (they didn't manage to develop a relationship of trust with each other). At the centre for social work, they gathered information on obtaining child support and filled out the form for enforcement.

The shift in the process of work happened when Andrea felt safe enough to discuss her relationship with other people with the student. One of the shifts was when Andrea first **asked the student for advice** on whether she should tell her ex-husband about filing the enforcement for unpaid child support or not.

I told her my opinion and pointed out that it was only **my opinion** and that she does not need to do what I believe is the right thing. I pointed out that it would be all right in both cases, whether she calls him or not. (FP8.F2.8)

The working relationship is a **personal relationship**. The social worker personally responds and shares her experiences or a story that opens up an alternative view on possible solutions (Čačinovič Vogrinčič et al., 2008, p. 10). The student felt that in relation to others, Andrea does not take care of herself, but was afraid to tell her that because she did not know how she would respond. The student was concerned that the interlocutor would not understand that this was only her opinion, and that it might affect the already established relationship, or that she would even want to terminate their collaboration. It turned out to be just the opposite, since the opinion significantly contributed to the change in the process of support and help.

I thought it was **important to share this with her**, even though I was afraid that she would not like what she was about to hear. I told her that I believed that in relation to others, she neglected herself. I pointed out that this is how I see her, and asked her to correct

me if I was wrong. I was relieved when she laughed and said that it was often the case. (FP8.F2.10)

The student's expressed opinion contributed to the fact that the interlocutor identified other problems she faced and the related goals that she wished to achieve.

During the process, we had five problems that needed to be solved. By solving the main problem, we also solved the others. Thus, the main shift was that Andrea in relation to others considered herself her own wishes and needs first. (FSF2.19)

Solving complex social problems with families encompasses the necessity that a family “sees what it does better” (Čačinovič Vogrinčič 2006, p. 29). Therefore, within social work with families, in the context of the working relationship, we also use other skills (e.g. knowledge of solution-focused brief family therapy, family psychology, developmental psychology, sociology) that help open up the space for exploration. During conversations at several meetings, the student and Andrea used a scale<sup>7</sup> that helped them explore how Andrea proceeds, what has changed and what is different than it was when Andrea was lower on the scale. The fundamental question in using the **scale to determine the weight of the problem** is: “Where would you place the difficulty of the problem on a scale of 1 to 10, where 1 means that you are affected by the problem every day, and 10 that you have learned to deal with it and solved it?” (Franklin & Jordan, 1998). The scale was also used to determine whether Andrea had got over her ex-partner, with whom she was engaged.

At this point, I used the scale for the first time. 1 meant that she has not yet got over the ex-partner at all and 10 meant that she had freed herself and was not bothered about this anymore. Andrea said she was at number 6, as she believed she could enjoy certain activities by herself and did not need her partner. (FP8.F2.13)

Using the scale contributed to the fact that the student and Andrea better understood where Andrea was on **the path to the desired outcome** (to settle unpaid child support, get regular payments in the future, for her ex-husband to have more contact with their children, to get over her ex-fiancé), and what she needed to do in order to achieve it. In the process of support and help, the scale helps us explore how the interlocutors manage to take a step towards the desired outcomes. This can stabilise them and contribute to the fact that the interlocutors reflect their ways of acting, which they can use in other similar situations.

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<sup>7</sup> This scale is one of the elements of solution-focused brief family therapy by the authors Steve De Shazer and Insoo Kim Berg (Franklin & Jordan, 1998).

When we proceed from the instrumental definition of the problem, it is important that problem solving is carried out in a **dynamic rather than static way** (Šugman Bohinc, 1997). Thus, the student joined Andrea and regularly checked whether the definitions of the problem and goals remained the same and adapted her work accordingly.

During the meetings, I began to notice that on the one hand we talked about how to get over the ex-fiancé, and on the other hand she told me that things between them are improving, that they are friends and have a great time together. I told her that I was getting mixed messages from her and wanted to know what she really wants. She said that if this relationship continues, she would like to be in an intimate relationship with him again. Therefore, **we redefined the goal** and classified it as a satisfactory relationship in which Andrea takes care of herself and does not focus solely on the needs of her partner. (FP4.F2.15)

Through co-creating solutions, the student and Andrea planned **experiments** that could potentially contribute to the emergence of new behaviours and practices to achieve the desired outcomes.

Through testing the agreed tasks (e.g. “The next time you’re with your ex-fiancé, consider yourself and your needs and talk about them aloud.”) she was able to make a change that, in her words, completely transformed her life. (FP4.F2.18)

During the process of support and help, it is important to stop and make an **interim evaluation of the achievements** and see what our interlocutors experienced as useful in collaboration hitherto, what they did not like and what they wish to achieve in the continuation of the IWPH. In the context of the interim evaluation, the student was interested in what has improved in comparison to the beginning of the collaboration.

I am definitely pleased that you showed me that not all social workers are horrible; before I met you, I thought they were. The situation regarding child support has improved, as you “pushed” me to take the first step in this direction, and I am more satisfied with relations with those close to me. You gave me strength. **As a person, you have given me a lot.** (IE6.F2M)

In further meetings, the student’s **interlocutor became more confident** at answering questions and in her actions; when she attended the mediation, which her ex-husband required after he filed the application for a reduction in child support, she felt calm and strong.

Andrea indicated that the main change she achieved in the individual working project of collaboration is that she has **learned how to be alone and stand up for herself** – which falls within the second level of social work with families as it involves a conversation about family relationships.

During this time, I learned to be alone and self-sufficient. What is my problem? That I do not give 100% but 200% of myself and I expect others to do the same. I gave so much all these years that I remained empty. Then I set the rules, and limits – I will give you as much as you give to me – nothing more, nothing less. This applies to everyone. (I4.F2M.1)

## Using the Strength Perspective

The strength perspective, the concept by Saleebey (1997), contributes an important paradigm shift in the contemporary social work. It is about a filigree discovering of strength to implement concrete changes in the specific social context (Čačinović Vogrinčič 2002, p. 93). The shift to the strength perspective directs us to search respectfully for the family's sources of strength in their contribution (Čačinović Vogrinčič et al., 2008, p. 12). **The source of strength** is the family's experience of being competent for its life, the experience of respect and dignity. The dialogue, which explores, discovers feasible alternatives is the source of strength. Clearly formulated share in the joint project is a source of strength. In the social work practice, we have to carry out a shift already formulated by the doctrine: the shift from identifying the problems and powerlessness to the implementation of strategies of adding strength (Čačinović Vogrinčič, 2002, p. 93-94).

I used the strength perspective by **verbalising every source of strength that I sensed** in Andrea and her family because I wanted Andrea to notice them especially because she did not believe in herself, and did not see herself as being worthy of love. (FP5.F2.2)

The concept of strength perspective helps increase the interlocutors' hope of being able to solve a problem and find a different, more positive view of the situation.

This is one of the things that contributed to the fact that Andrea was able to achieve change. When she was able to see herself in a different way, she obtained **hope for a brighter future**. (FP5.F2.7)

Working from the strength perspective is a social worker's personal decision (Čačinović Vogrinčič, 2006). The family members we work with, are **experts on their own lives**, while social workers are experts on the process; we are responsible for addressing all family sources.

During the process of help, I realised how strong Andrea was as a person. The more she talked about her life and experiences, the more **I applauded her** and thought about how a person is able to go through all these. (FP5.F2.15)

Emphasising sources of strength is also of great importance for our interlocutors.

It is nice to hear that someone noticed it, to get feedback, it gives you additional strength.  
(I7.F2M.22)

## The Use of the Ethics of Participation and the Not-Knowing Position

The expert who relies on the ethics of participation (Hoffman, 1994), resigns from a power that does not belong to her/him. She/he is aware that the aim of a conversation is not to find objective and the only truth, but believes that the truth does not exist. There are only stories that we tell each other. Practitioner enters the relationship with the interlocutor as an equal and equivalent associate, regardless of her/his position (Hoffman, 1994, p. 17). Due to that kind of student's position, Andrea gained an experience that she and the student were **equal interlocutors**.

In my opinion, the ethics of participation contributed to the fact that Andrea wanted to collaborate with me and that she felt good doing so. (FP6.F2.6)

It is important that a social worker adopts a not-knowing position (Anderson & Goolishian, 1994). She/he must enter into the collaboration sincerely interested in the family story. She/he must not invalidate her/his theoretical knowledge and experiences, but should conduct the conversation full of interest in learning about the family members, the desire for a better understanding of the narrative told by interlocutors, and in **joining them where they are**.

I contributed to the participation in particular with a not-knowing position; **I did not create my own interpretations** of Andrea's stories, but made it possible for her to speak by herself, express her problems, define her strengths, and what are the possible solutions.  
(FME.SF2.16.2)

Thus, when the student gave up being an expert who knows what is best for Andrea, she also gave up judgement and took a **narrative stance**, which in contrast to the paradigmatic, focuses on the process, on the here and now (Bruner, 1986).

Andrea told me that she often felt that she could be truly sincere, even if she knew that I would not like the answer because she was aware that **I was not going to judge her**.  
(FME.SF2.13.1)



In this way, the student joined Andrea and also drew from within herself and made sure to express her opinion only as her own thinking, which may be completely different from Andrea's opinion.

She asked me what to do. I said that I personally believe mediation is a better option; however, **my opinion may not be the same as hers.** (FME.SF2.9.1)

In this way, the student encouraged Andrea and enabled her to **make her own decisions.** As we have already pointed out, professional workers do not possess answers and solutions, but co-create them together with interlocutors by learning about their stories (Corey, 2009).

## Completing a Working Relationship

Normally, the working relationship ends when the interlocutors assess that they have achieved what they had set out to do and their collaboration is no longer required. Sometimes a collaboration might be terminated by an interruption in the alliance, or if one of the participants terminates the collaboration for other reasons. In this project, the time of completion was known in advance. Collaboration with families was part of student training, which ended at the end of the academic year<sup>8</sup>. In social work with families, we start from the basis that the IWPH has a reasonable time limit so that families have a positive experience and enough strength and knowledge to cope independently with the challenges brought about by life circumstances.

It was the same in this process. The student knew that her practice would last until the end of May. However, she was concerned how Andrea would cope with the completion of collaboration because she has repeatedly faced feelings of abandonment.

She looks forward to my visits, she seems relaxed with me, and I think **she trusts me.** I like this very much and I am honoured because she often said that it is very difficult for her to trust people – that she has trusted many but ended up alone and abandoned. (FMC.SF2.4.1)

As pointed out by many authors (Walsh & Meyersohn, 2001; Sheafor & Horejsi, 2003; Fieldsteel, 2005; Siebold, 2007), it is **necessary to prepare for the completion of a relationship.** Sheafor and Horejsi (2003, p. 497) suggest that a social worker and an interlocu-

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<sup>8</sup> Students drew on family needs. Precisely for this reason, some of them agreed to continue collaboration and meet families after the envisaged completion.

tor should discuss this subject at the time of the establishment of a working relationship, as both will be better prepared. The student did not talk about the completion of the collaboration with Andrea at the initial meetings and was surprised when the interlocutor brought this up halfway through the process.

At this point, Andrea asked me how long we would be meeting like this. I immediately thought of a sentence that she had repeated several times during our meetings: "Everybody leaves me." I felt a lump in my throat. I told her that this was my mistake and that I should have told her at the very beginning that our practice lasts until the end of May.<sup>9</sup> (FMC.SF2.8.1)

In the following weeks, the student's discomfort due to the conclusion began to lose intensity.

When at the end of the meeting, she asked me what would happen at the end of my practice, I once again felt uncomfortable, but much less than at previous meetings. Now I know and truly believe that **our acquaintance was a positive experience worthy of celebration**. All the things that have changed for her and for me are worthy of celebration. Initially, I did not perceive the conclusion of our meetings in this way. (FMC.SF2.11.3)

It is appropriate that the last meeting of the working relationship evolves in a different way and includes some kind of ritual, as Sheafor and Horejsi (2003, p. 498) put it. Therefore, the **last meeting is intended for celebration and saying goodbye**. Čačinović Vogrinčić (2006, p. 24) also speaks of celebrating the achieved shifts and steps. It is important that the interlocutors recognise all the small successes that contribute to the achievement of desired outcomes, rejoice and celebrate their successful collaboration and reflect on the achieved.

Throughout the meetings, the student rejoiced with Andrea at her achievements, and **expressed her excitement** at Andrea's success, especially by praising her using non-verbal communication (e.g. smiles, applause) and telling her how she felt. This was very important for Andrea.

She always pointed out how happy and proud she is of me; many times she said "Wow, **I am so happy for you**". That meant a lot to me. (I5.F2M.1)

They planned the last meeting a little differently to the others.

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<sup>9</sup> Within mentoring group meetings, students obtained knowledge on how to set a time frame in the collaboration with families. The student who collaborated with Andrea did not define collaboration in time, because Andrea said that she had no problems at the first meeting. The student joined her in this and they agreed that they would meet and chat. Later on, she did not open up this subject because she was worried how her interlocutor would accept it, as she has repeatedly talked about the fear of being abandoned.

She asked me what we were going to do at the last meeting. I told her that we could treat ourselves to some cake and asked her if she knows any good confectionery. I think she was very pleased because she immediately agreed with the idea and told me where we could go. (FMC.SF2.14.1)

Although the student was initially worried about how she would end the collaboration with Andrea, she felt that they would part at just the right moment. Andrea had achieved all the set goals and they had enough time to work on **stabilising new patterns**<sup>10</sup> (Schiepek et al., 2005) and to prepare to say goodbye through the student's praise and setting safeguards. Both the student and Andrea concluded the collaboration with pleasant feelings.

It was nice. I was not down because this was our last meeting. I was not sad at all. (I9.F2M.1)

They agreed to keep in contact in the future, as both had experienced the collaboration as very successful and pleasant.

I thought that I would feel bitterness and sadness upon ending today's meeting, but it was quite the opposite. I am happy. **I am glad Andrea has succeeded** and that I was part of her story, even if it was only for 3 months. I sincerely keep my fingers crossed for her and hope that in times when things are not as she would like them to be, she will remember our conversations and those moments when the sources of strength within her allowed her to face challenges successfully. (FMC.SF2.16.6)

## Student's Reflection on the Process of Collaborating with the Family

The results of the project showed that the students and participating families were satisfied. The student who met with Andrea experienced the same because she gained a lot for her **personal and professional growth**. One of the contributions to the success of practical learning was the mentoring group, in which four other students were included.

**My mentoring group** and the mentor I could turn to whenever I had a problem were of great help to me. I was much more relaxed because I knew that there was someone, who would help me. I was pleased that the girls in the mentoring group collaborated with me, and share with me their opinions, even if it differed from mine, and in particular, they told me how they would act differently. (FP10.F2.2)

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<sup>10</sup> See the second chapter of the author Šugman Bohinc.

The **mentor's feedback** on each submitted record of the meeting also meant a lot to her. These comments were helpful because she knew more precisely how to collaborate with Andrea and was able to prepare for the next meetings more effectively.

I considered the feedback I received on every filled out form for recording meetings with a family as highly valuable. Before every meeting, I read the form and comments so I knew how to proceed. (FP10.F2.3)

At the mentoring group meetings, the student reported about experiencing **mixed feelings of satisfaction and dissatisfaction** regarding the course of events with the family. In the beginning, she wondered what she could do differently to make the conversations more professional. Namely, she had the impression that her relationship with Andrea was more friendly than professional, which was the result of the fact that they spent quite some time getting to know each other and discussed everyday events. The student was more pleased with the subsequent course of events.

I got the impression that I **worked professionally** because I asked more questions, I summarised in a different way than I previously did. I did not just summarise the bare facts, but also her feelings and expressed my understanding, which I verified with her. (FMR.SF2.7.1)

Although the student was not always satisfied with the course of the conversation (several times she pondered over a meeting, felt tired and thought about what she ought to do to achieve more competent leadership), she felt just the opposite at the end of the process of support and help. Mainly because she and Andrea managed to **achieve the desired outcomes** and because she had experienced professional progress.

After our meeting, I thought how I had changed. I **am much more confident in myself**, I see myself as more competent, and I started to believe that I can be the kind of social worker I have been learning about during the study. (FMR.SF2.11.2)

In collaboration with Andrea, the student grew professionally. She enhanced her knowledge on establishing a working relationship, personal leadership, the use of the social work language and thereby strengthened confidence in herself and the social work profession.

I am **truly grateful and happy** that my first experience was positive. I always said that one cannot study social work because of the money, but because of the feedback that you get from people, the happiness in people's eyes when matters are resolved. Until now, we have only discussed this in theory, but through the experience with Andrea, I was able to experience this feeling in practice. (FMR.SF2.12.1)

## Conclusion

In this chapter, we presented the collaboration between the student and the interlocutor through the concepts of social work with families, which contributed to a successful IWPH. With the agreement on collaboration, the student joined the interlocutor and contributed to the creation of a safe space in which they co-created the desired outcomes. In the working relationship, the student was personally involved; she contributed to the empowerment of her collaborator and together they explored potential changes that would create a solution to the problem. The not-knowing approach and the concept of the ethics of participation contributed to an establishment of **a respectful and trusting relationship** between them, which enabled work at the first and second level. Andrea was able to reflect on her behaviour more easily and express the outcomes she wished to achieve in this project.

Through the individual working project of collaboration, she noted that in relation to others, she neglected herself. Therefore, one of the desired outcomes was to set clear boundaries and express her own opinion. Through trying out new behaviours, she formed a pattern that enabled her to consider herself in relationships with others. In this way, she **achieved the desired goals** because she managed to establish satisfying interpersonal relationships, find the strength to solve the problem of child support and confidently attended the mediation with her ex-husband.

The student experienced participation in the project as a challenge, because on the one hand, she faced the fear that she would not be able to use social work concepts in practice and, on the other hand, she considered this experience an opportunity for personal and professional growth. She learned that she was able **to lead the conversation in a social work manner** and began to trust in her competence.

Through the presentation of the process of work, we have presented a possible way of acting in social work with families, which helps in forming the circumstances in which co-creating solutions can occur. The presented process of support and help offers readers ideas for practical work and contributes to the understanding of **the use of concepts of social work with families** and collaboration with people.

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***Mari Nordstrand, Nina Schiøll Skjefstad***

# Motivational Interviewing with Individuals Experiencing Social Challenges: A Norwegian Experience

## Abstract

Motivational interviewing (MI) is an internationally recognized method developed for use in counselling situations where a helper explores the motivational powers for change within an individual. The Sør- Trøndelag University College in Norway has offered practitioners education in MI. Authors have conducted a study of 25 students' stories of how they used MI when counselling. The theme of this chapter is how MI can be useful in working with people. The method of motivational interviewing builds upon a perspective of strength which makes it a viable method for use when working with multi-challenged families. Through the use of MI, client and social worker develop a mutual working relationship where the social worker is an appreciative and accountable ally. This is one of the goals of the project *Helping families in the community: the co-creation of desired changes for reducing social exclusion and strengthening health*, thus making MI a relevant method.

**Keywords:** *motivational interviewing, strength aspect, client-oriented, working relationship*

## Introduction

Motivational interviewing (hereinafter: MI) is an internationally recognized method developed for use in counselling situations where a helper explores the motivational powers for change within an individual (Miller & Rollnick, 1991, 2002). It is a method based on humanistic principles of being accepted by others. Being listened to and respected as the person one is provides a certain healing power (Barth & Näsholm, 2007). MI presup-

poses a fundamental assumption that deep down all people want the best for themselves and that MI can contribute to strengthening and clarifying this desire (Barth, Børtveit & Prescott, 2013).

The Sør- Trøndelag University College in Norway has offered practitioners continuing education in MI for several semesters now. During this time, we have conducted a study of 25 students' stories of how they used MI when counselling clients<sup>1</sup>, demonstrating the practical use of MI. The theme of this chapter is therefore how MI can be useful in working with individuals experiencing social challenges.

The method of MI builds upon a **strength perspective** (Saleebey, 1992) which makes it a viable method for use when working with multi-challenged families. Through the use of MI, the client and social worker develop a mutual working relationship where the social worker is an appreciative and accountable ally. This is one of the goals of the project *Helping families in the community: co-creation of desired changes for reducing social exclusion and strengthening health*, thus making MI a relevant method.

We will start this chapter by giving a brief background of the current Norwegian welfare model and by showing how, in our county of Sør- Trøndelag, there has been a growing need for continuing education in interaction and communication skills. After that, we will go through the most prominent elements in MI before we discuss how MI can be used in practice.

## Background: The Norwegian Welfare Model and the Need for Increased Competence

The latest welfare reform in Norway was approved by the parliament in 2005 and the following year the New Norwegian Labour and Welfare Administration (hereinafter: NAV) was established. Under NAV the offices of labour, social services and the National insurance plan were merged, the aim being to provide clients with an integrated front-line service that could clarify their needs and provide coordinated services. The major goals of the NAV reform were, according to the NOU2004: 13 report, to ensure that:

- To get more people employed and activated and fewer on benefits.
- Services were simplified and adjusted to fit clients' needs.
- Labour and welfare administration were coordinated and made more effective.

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<sup>1</sup> We use the term »client« as the literature in MI do.

The challenges have been many, for the employees, management and politicians, as well as the clients themselves. Criticism has been directed at difficulties in coordinating three diverse cultures, difficulties with incompatible data systems, but mostly at client dissatisfaction with services. This may be the reason that NAV came to the Faculty of Health Education and Social Work in 2013 with a request for an interaction and communication skills course for its employees. We created the course, valued at 15 semester credits, entitled Motivational Interviewing in the Norwegian Labour and Welfare Service.

## Motivational Interviewing

### Background

MI came about in the beginning of the 80ies at a clinic in Bergen, Norway that treated clients with alcohol problems, often in combination with lesser psychiatric diagnoses or other social problems. Behavioural therapy, social learning therapy and systematic family therapy have been, and still are, sources of inspiration. The American professor William Miller was conducting research at the above-mentioned clinic at the time. He wrote an article, *Motivational interviewing* (1983) about the experiences and discussions he had in a counselling group. This article was the beginning of what has become a comprehensive international research and treatment tradition. The focus was on getting people with alcohol and drug-related issues to talk about and clarify their **ambivalence** to change. When the first edition of *Motivational interviewing* (Miller & Rollnick, 1991) was available, it became clear that the method could also be used in areas other than addiction. Problems with ambivalence to change are not unique to substance abuse, but are characteristic of all human beings (Rollnick, Miller & Butler 2008). The method is under constant development with over 25000 articles being written mentioning MI and 200 randomized clinical studies conducted (Miller & Rollnick, 2013).

### The Spirit of MI

Even though the method has changed in the course of time, the authors claim that the underlying spirit in MI, the process and approach the method practices, has not changed (Miller & Rollnick, 2013, p. 18). MI is a cooperative **partnership** between client and practitioner.

It is about how one, in a respectful manner, is able to elicit the client's inner motivation and strengths. It shows complete acceptance for the fact that the client is the one who decides if change will occur. Empathy and compassion are important components. The latter is known as *agape* (Miller, 2000) and what Buber (1971) described as an "I-you relationship" as compared to an "I-it relationship". The spirit of MI has similarities with age-old wisdom about humanity that crosses time and culture, and is about how people engage with one another in the process of change (Miller & Rollnick, 2013, p. 19). This is an important underlying essence in MI. Without this, without the compassion, MI can quickly become technical and viewed as cynical tricks, a method used to manipulate others to do something they do not want to do.

## Communication Skills

The basic interaction skills in MI are **open questions, affirmation, reflection and summarization**, better known by the acronym OARS (Miller & Rollnick, 1991). A more detailed description of these skills will be given in the next section. It is important to emphasize, that these core skills alone do not define MI, but are pre-requisites for competent MI practice. What characterizes MI is the strategic use of these skills in helping people move towards change (Miller & Rollnick, 2013).

## Ambivalence

According to MI, ambivalence has a natural place in the process of change. The word implies that one has a network of parallel and contradictory feelings, thoughts and attitudes, for one and the same thing and for what change can lead to (Barth, Børtveit & Prescott, 2013). Motivation for change exists in the client, but it exists together with a motivation to continue along the same path. Even though something can be a problem at times, it also has positive aspects like enjoyment, relaxation or stress management. Both sides are legitimate and important but often completely incompatible. Ambivalence can be expressed in word pairs: shall/ shall not; will/ will not; on the one hand/on the other hand (Barth, Børtveit & Prescott, 2013). Ambivalence has three focal points: ambivalence to the problem, ambivalence to change, ambivalence to non-change (Barth & Näsholm, 2007). Helping clients explore and resolve ambivalence lies at the core of MI intervention. Counselling directed at addressing ambivalence means giving the client room to reflect and gain insight into their own motivation and resistance. Clients are given the chance to examine, evaluate and reprioritize elements in ambivalence in order to reach more robust and informed decisions (Barth & Näsholm, 2007, p. 98).

## Change Model

At this point, it is appropriate to mention Prochaska and DiClemente's model of change, **The Stages of Change Model**, later known as **The Transtheoretical Model** (Prochaska & DiClemente, 1986; Prochaska, DiClemente & Norcorss, 1992). From the beginning, this model was associated with MI, even though it was developed, with empirical data related to smoking, to describe what happens when a person tries to break a substance dependency relationship. The change model is presented as a broad perspective that shows how to describe and understand change on a behavioural, systematic and personality level. The model is comprised of the following phases: pre-contemplation, contemplation, preparation, action and maintenance. MI can be used independently from the stages of change model, but the idea behind the model is that conditions for change evolve and vary during the process of change. By using this model, it becomes more apparent how far along in the process the client has come. Knowing this makes it easier for counselor and client to “dance”. This can be related to the concept of co-creation as described in the first chapter<sup>2</sup>, where the client and helper co-create the solutions needed to achieve the desired changes.

## Motivation

The term motivation can be associated with resistance. If motivation is all about a client's wishes, will-power and ability to follow a treatment program, then resistance is motivation's counterpart. There are also degrees of motivation: everything from a relatively unmotivated state, via phases of alternating motivation, to a strong and consistent motivation. A helper and client have a common project; they have the same goal when it comes to change. In other words, both parties need to be motivated – the client for the change and the social worker to support the client. According to The World Health Organization (hereinafter: WHO), there are many good methods of treatment for the majority of illnesses today. The problem is that about half of the resources we apply become ineffective because of insufficient compliance with treatment regimes. Most practitioners say that clients are not utilizing the treatment. According to the WHO report, one explanation is clients' lack of information and motivation; the report suggested that motivational strategies accompany all treatment goals. MI is mentioned as a relevant method (Barth, Børtveit & Prescott, 2013, p. 14).

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<sup>2</sup> See the first chapter of the author Čačinovič Vogrinčič.

## Change Talk

In their book from 2002, Miller and Rollnick use the terms **change talk** and **non-change talk** to describe whether statements are change oriented or not. A goal in a MI session is to reinforce the change talk side and reduce the influence of non-change talk. In this way, it is possible for the client to make a committed decision and mobilize forces to attempt change. A helper facilitates the discussion so that clients have the opportunity and ample room for change talk and where the non-change talk takes up as little space as possible. “Change talk is any self-expressed language that is an argument for change” (Miller & Rollnick, 2013, p. 129). The statements come from the client and are arguments for change, but will only have meaning when related to a specific goal. Miller and Rollnick (2013) explain that there is both **weak** and **strong** change talk. An example of weak change talk can be: “I wish I could lose weight.”, where the word “wish” expresses a weak desire. A stronger expression could be: “I need to lose weight.” Here the word “need” expresses a strong desire and is an example of strong change talk.

## The Continuing Education Course and Use of the Method

The continuing education course, “Motivational interviewing in NAV”, was conducted during three semesters in the years 2014 and 2015. The course was approved on a master’s level and awarded 15 study credits. Altogether, about 100 NAV employees completed the course. The following is a description of the content of the course: A two-day introduction in theoretical and practical MI. Two months of practical work during which the students had obligatory group guidance in the use of the method. A paper where students were to write about their experiences using MI at their workplace in conversations with clients. Another two-day class meeting before the course ended with an exam.

## Database

As mention above, one of the study requirements was to write a paper where students were to answer the following:

Describe the goal/goals of a recent client-related counselling session. Analyse the session based on the interaction and communication skills you used. Relate this to theory.

During one semester, we asked permission to use the student's papers as a base for an article on MI. All students, 25 at the time, granted permission. This means that we had 25 descriptions and analysis of meetings between clients and students. Our analysis is based on this material and is inspired by the qualitative method STC (Systematic Text Condensation) (Malterud, 2003). This is a process in four stages: 1) To get an overall impression 2) To identify significant units 3) To abstract the content in the significant units, and 4) To summarize the meaning of this. First, we read the papers thoroughly to get an overall impression. Then we set up categories based on the MI skills like "open questions", "affirmations" and "reflection". We also created categories to describe the client's sex, age, source of income and type of problems. Then we read the stories to identify the categories. We put the categories in a matrix, allowing us to analyse tendencies in the material. We highlighted the text sections describing these categories with markers of different colours in the text. This was to examine the extent that the student was able to make use of the MI skills, and in what way this was being conducted. Some of the highlighted sections are also used as examples in this chapter. Below, we will discuss some of the general findings, before the use of the MI skills are being illustrated by a representative case.

Students describe 25 different clients. Among these are 18 men and seven women. Nine clients are between 18-30 years old, eight are 31-50 years old, and four are over 50 years. Four clients are of unknown age. 19 persons had various health-related problems including physical difficulties like back problems and mental illness problems of various degrees. Four of these had substance abuse problems. Two of the younger clients had dropped out of school, while others had financial troubles. The majority of clients received economic benefits from the government. The long-term goals of the caseworkers at NAV were to make the majority of clients self-sufficient, and preferably able to live off the income of a job. For many clients though, the immediate necessity was to gain control over their other problems.

## Client-orientation: from Expert to Helper

Several students explained that the common method when preparing for a meeting with a client was to set up a plan both for the meeting and for the steps ahead.

As a NAV counsellor, I want to have a solution ready before he comes....But that was before I started the MI course....

During the course of the MI classes, students have shifted their focus and become more **client-oriented**. Client-oriented means that it is the client's own thoughts, feelings and



resources that are the focal point, the idea being that the client has the best solutions for his or her own goals, as well as the ability to implement the process of change. This requires that the helper has a style of interaction and communication that is centred on the client in order to assist in finding the best solutions (Barth & Näsholm, 2007).

In a broad sense, one can say that social workers operate with two different perspectives, an expert model and an interaction model (Aamodt, 1997, 2003). In the expert model, the helper sees himself as an authority whose task is to treat, change, guide and advise. This is a subject-object orientation where the client is an object for the helper's actions. Support and care are key terms, but these express an attitude of action to go **from** helper **to** client. According to Aamodt (1997, 2003), there is no reciprocation or interaction between equals. The interaction model puts emphasis on the relationship in such a way that both parties influence both the process and each other, opening for mutual understanding. The differences between the models are largely associated with how authority is handled. Even in an interaction model, the social worker still has the authority and professional accountability. At the same time, in an interaction model, it is not only the helper's knowledge that is relevant, but also the client's knowledge and where the two can unite. In counselling situations, the two parties will be subjects for each other and an inter-subjective exchange and understanding will lead to a potential for personal change and development. Through our studies of theory, we feel that MI can be placed under an interaction model, which is in line with the spirit of MI. The analysis of the following case confirms that MI functions in a client-oriented manner.

All the students have a client-oriented perspective. We can see this for example, by their use of OARS (open questions, affirmation, reflection and summarization). 13 of the students used changed talk. One example is when the student and the client discussed the client's need to find a place to live that is more suited to his needs. After a while, the client was able to express a need that could be categorized as **strong change talk**: "I need to find another place to live". 12 students did not think clients were ready for this approach. The students experienced resistance in the form of defensive or blocking actions avoiding help. An example of this is when clients do not want to talk about the subject at hand, but change the topic. The analysis shows that the students then were following an important principle of "being where the client was". On the other hand, it could be that they are reluctant to enter into a real discussion on important issues. At the same time, students are showing sensitivity to the client's need to explore ambivalence, something that may be necessary before there can be much change talk. 20 of the students conduct an exploration of ambivalence. This means that they, for instance, are also willing to explore the positive sides of the use of drugs. In this exploration they mostly used the OARS

approach. Many experience that clients are more open to talk of change when the helper acknowledges and generalizes that change is difficult and that the current behaviour has both positive and negative sides.

There are many similarities in the way the students describe their MI conversations. As a representative case, we have chosen to give an account of the highlights from a conversation described in one of the student papers. MI techniques were applied and we will comment on these along the way.

## **Case: The Man with Substance Abuse Problems**

The client is a man in his 30's who has lost his driver's licence while under treatment for drug abuse. He is required to provide clean urine samples twice a week for a period of six months in order to get his driver's licence reinstated. The man is qualified as a driver and construction machine operator so the driver's licence is important since he would like to pursue work in that field. The client is referred to NAV because his doctor has reported that he has not shown up at appointments for urine sampling the last four weeks.

### **Open Questions**

The student explains that the purpose of the meeting is to establish the client's motivation for continuing treatment of his drug problem. The student deems it important to continue the good relationship she has had with the client from previous meetings. She emphasizes that she intends to bring forth the client's voice through the use of communication skills in MI – open questions, affirmation, reflection and summarization. After welcoming the client, the student starts with a closed question to confirm that the client has not met with his doctor as agreed. An example of a closed question could be: "Your doctor has informed us that you have not met for any of your appointments, is this true?" Confirmation of the facts is important, but one should not use too many closed questions or the client will just sit and wait for the next question and become passive. It is also difficult to show empathy and understanding through closed questioning. Such questioning originates from the questioners thoughts and concepts and is not client-oriented (Barth & Näsholm, 2007, p.55) The student is aware of this and follows up with an open question, asking what could be the reason for not showing up for appointments. There are several ways to phrase such a question, for example: "Can you tell me a bit about what led up to

you not turning in a urine sample?” The client answers that he had been taking cannabis and amphetamines again and saw no reason to turn in a sample that would only register positive. Open questioning allows the client to tell about his experiences and share his point of view (Barth, Børtveit & Prescott, 2013, p. 56). The student interprets the client’s answer as proof that the client feels secure enough to be honest about his situation. Since the client has actually shown up for a meeting with the social worker and is open about his return to drugs, we can conclude that the student has been able to establish a relationship based on trust and confidence. The use of MI skills helps reinforce this relationship.

## Affirmation

The student chose to give positive feedback to the client about his openness about not showing up for doctor appointments. She did this through **affirmation**. Affirmation is an MI communication skill that aims at confirming a client’s worth and value (Barth, Børtveit & Prescott, 2013). There are two kinds of affirmation in MI: implicit and explicit. A practitioner gives implicit affirmation by using client-oriented communication such as open and exploratory questioning, accurate reflection and precise summarization. Explicit affirmation provides feedback that is more like compliments where the practitioner communicates her appreciation for the positive aspects of a client’s behavioural traits. To confirm is also to encourage and support. Rogers (1967, p. 94) describes positive recognition as “a type of love for the client for the person he is” (see also Lewis, 1960; Miller, 2000). An example of explicit affirmation in our case can be: “I appreciate your honesty. It shows you are brave and want to take hold of the situation”.

## Scaling Question

Directed dialogue is often characterized by a shift in perspective, and helps the client see an issue from a different angle. One way of exploring motivation is to use a so-called scaling question. Using the element of scaling question has shown to be so effective in use with clients that it has been incorporated in the method. The student wanted to see how motivated the client was to become drug-free. It can be helpful to take a step back and focus directly on a client’s degree of motivation, both to the importance of change and the belief in accomplishment. Scaling has the following steps: ask permission, placement on a scale from 1 to 10, rethinking (Barth, Børtveit & Prescott, 2013, p. 132). One asks permission because it is the client who determines if he wants information or advice from the counsellor. One way of asking is: “If it is okay with you, I would like to ask a ques-

tion about your level of motivation for changing your drug habit.” In our case, the client answered in the affirmative. The scaling question was posed in this manner: “On a scale from 0-10, where 0 is not important, how important is it to you to become drug-free? The answer was immediate - 10! In an open question, the student asked the client to explain why the placement was so evident. The client referred to the “prize” which meant keeping his girlfriend, getting back his driver’s licence, keeping his circle of drug-free friends, and getting a normal life with a job. The student perceived the rating as being well thought out.

The student continues to describe that in order to bring out the client’s **inner motivation for change** she wanted to have more information about his life situation. She asked an open question about his living conditions. The client describes a home where he is comfortable. The open question led to more information about the girlfriend and to their plans to move in together. The student responds to this with an explicit affirmation, stating she is happy for him that he has a girlfriend and a happy home. The affirmation encourages the client to tell more about the girlfriend, that she is drug-free and that his circle of friends does not belong to the drug scene. The client explains that all of them have jobs. This opens up an opportunity to explore the client’s thoughts about getting work. This can be done with another open question: “You say that your girlfriend and friends have jobs; what are your thoughts about getting a job?” Client expressed he had a need to do one thing at a time - first become drug -free, so get back his driver’s licence before looking for work.

## Reflection

Reflection mirrors the core of the client’s response. A reflection can be a sentence, a word or an assumption. The helper responds to the client’s statements and keeps them as a focal point. A simple reflection is a confirmation of what the client is saying. Such reflections are almost a repetition of what the client said or parts of what he said. For example: “First drug-free...” A simple reflection can also be a rephrasing of what the client said without changing the contents. A complex reflection is more like qualified guessing about what lies behind the actual words. A complex reflection goes “deeper” than a simple reflection. The use of reflection, particularly complex reflection, can be challenging. In this form of emphatic listening, it is not always easy to achieve the precise underlying meaning, and a helper can jump to conclusions too quickly (Barth, Børtveit & Prescott, 2013). In this case, the client received support for his plan through the student’s use of simple reflection by which she confirmed that the plan was sensible. A complex reflection could have been:

“You are worried about losing the good things you have in your life....” This approach could have led to a closer exploration of what lay **behind the client’s statements**.

## Summarization and the Road Ahead

Summary statements can be assertions and ascertainments. Social workers take control by highlighting what they assess the most central aspect of what has been said (Barth & Näsholm, 2007, p. 35 ). Summarization occurs not only at the end of a session but ideally through statements by the helper throughout the session. One can differentiate between unifying, connective and transitional summaries (Miller & Rollnick, 2013). In the case study, the student summarized the client’s inner motivation to be drug-free and put emphasis on the importance of keeping a girlfriend and a drug-free circle of friends, as well as getting back his driver’s licence so he could apply for jobs. The statements the client makes about change, which the counsellor reiterates in the summarization, will play an important part in the continued help offered the client (Barth, Børtveit & Prescott, 2013, p. 54). This is exactly what happened in this case. The student was able to bring forward the client’s inner motivation through the use of open questions, affirmation and scaling questions. The client was “lured” to put into words what motivated him to be drug-free. This had a more profound effect than had the counsellor had just told him or given advice on what to do.

The student concludes her paper by stating she felt confident that the meeting and counselling session worked well because of the MI techniques. She felt she had been able to bring forth the client’s inner voice, and was able to clarify the client’s motivation for resolving his problems. We agree. If the student had been more confrontational, the conversation could easily have ended up being a discussion of the client’s failures and lack of motivation. By being client-oriented the student achieved a different result, as described above.

## Conclusion and Some Critical Notes

In this chapter we have explained MI and how it is used in practice in a Norwegian context. We would like to conclude with some critical notes to MI based on our own knowledge and experience with the method. There are many methods in social work, the strengths of one method being often the weaknesses of another. Our knowledge and experience with

MI shows that it is too focused on the individual, not taking into account limitations on a more structural level and that many social problems are related to outside factors in society like unemployment and poverty. By using a method oriented towards the individual, we have a tendency to **individualize social problems**. But, we need to work on several levels at the same time - we must work to change the unfortunate conditions on a societal level at the same time as we work at meeting an individual's immediate needs.

An ethical challenge is that the context in which MI is used will influence how MI is used. We have described how MI can be used in NAV, which is a Norwegian context, requiring work and active participation. MI can be used to influence people to change their behaviour in a particular way that the system finds beneficial. This leads us to another criticism of MI, namely that used incorrectly MI, like any other psychosocial method, can be manipulative. It is important to emphasize an ethical aspect when teaching MI.

Some think MI is too technical. True, there are specific techniques one can use, but this must not be done in a mechanical way, following a pre-set list of instructions. Social workers must always be aware of their client's present state and apply appropriate techniques.

It is not indifferent how people are met by the system. People want to be seen and heard; they want to be met with respect and acknowledgement. With its client-oriented approach, MI gives social workers a good base for developing appreciative attitudes and actions. The examination of the student papers showed that the students had become **more client-oriented** through the use of MI.

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# Physical Activity Intervention for Non-active Adults from Economically Challenged Families: »Will for Movement and Movement for Will«

## Abstract

Due to the recent socio-economic crisis, the poverty rate in Slovenia is increasing. Not only a high unemployment rate but also working in low-paid jobs can often lead to poverty and social exclusion. In economically challenged families where adults are trying to provide resources for family members, their everyday life often revolves around negative and unpleasant experiences. Low socio-economic status (hereinafter referred to as SES) and limited resources often lead to unhealthy and inactive lifestyles. One of the aims of the project was to create a physical activity intervention to promote an active lifestyle and through that an improvement of the quality of life. »Will for Movement and Movement for Will«, a 15-week long physical activity intervention, was developed for the project. Besides increasing physical functioning, strong emphasis in the intervention was placed on the psychological aspects related to motivation and determinants of behaviour change. 17 non-active adults (aged from 19 to 66) attended the program. Measures of physical activity were conducted at the beginning and after the end of the program. The intervention, its process and outcomes will be presented and discussed.

**Keywords:** *physical activity, multidisciplinary intervention, adults, low socio-economic status, physical performance*

# Introduction

As the project *Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health* is multidisciplinary in nature, the Faculty of Sport as one of the partners conducted a physical activity intervention aiming at the promotion of an active lifestyle. The goal was to stimulate adults from economically challenged families to be more physically active thus to improve the **quality of their life**. Following the principles of modern theories of motivation, participants were guided through the process of training towards the activation of the individual's potentials. The aim was to change the unhealthy and risky behaviours to a more active and healthy lifestyle.

This chapter presents an overview of the role of physical activity in a healthy lifestyle, focusing on social determinants related to health and health inequity. The multidisciplinary exercise intervention »**Will for Movement and Movement for Will**« and its effects on different measures of physical activity (hereinafter referred to as PA) will be described.

## The Role of Physical Activity in a Healthy Lifestyle

According to the World Health Organization (hereinafter referred to as the WHO), chronic diseases are the leading cause of mortality and morbidity in Europe (Busse, Blümel, Scheller-Kreinsen & Zentner, 2010). It is predicted that complex conditions such as diabetes and depression will impose an even greater burden in the future. The WHO (2009) defines **chronic noncommunicable diseases** (hereinafter referred to as NCD) as “diseases of long duration and generally slow progression”. This type of disease includes cardiovascular disease, diabetes, asthma or chronic obstructive pulmonary disease (hereinafter referred to as COPD), many varieties of cancer, HIV/AIDS, mental disorders (such as depression, schizophrenia and dementia) and disabilities such as sight impairment and arthroses. The WHO's updated data (WHO, 2015) show that 38 million people worldwide each year die from NCDs and 46% of them die from cardiovascular diseases (17.5 million). Different types of cancers account for 8.2 million deaths annually, followed by respiratory diseases (4 million) and diabetes (1.5 million). Data shows that all age groups and all regions are affected by NCDs, however low- and middle-income countries are disproportionately affected. Unhealthy lifestyles such as physical inactivity, an unhealthy diet, harmful use of alcohol and tobacco significantly increase the risk of NCDs. These **modifiable behavioural factors** altogether account for 14.2 million deaths every year

and about 3.2 million deaths annually can be attributed to insufficient physical activity (WHO, 2015) making it the fourth leading risk factor for mortality. In Slovenia (WHO, 2009), which is considered as a country with a high income, NCD's account for 87% of all deaths (i.e. cardiovascular diseases 40%, cancers 31%, respiratory diseases 3%, diabetes 2% and other NCDs 12%). According to the data from 2008, 31.2% of NCDs in Slovenia can be linked to physical inactivity.

As can be seen from the above-mentioned studies, several **behavioural factors** play an important role in preventing NCDs. These factors are defined as **modifiable** because these behaviours and exposures can raise or lower a person's risk of NCDs, and they can be changed, at least in theory. Among these modifiable behavioural factors, regular PA plays one of the vital roles in preventing and treating many diseases (WHO, 2009). The question that arises by itself is why people remain physically inactive given that NCDs could be prevented. Low-income families and their children face significant barriers to PA and recreation (WHO, 2010). They do not engage in PA due to a set of five key **barriers**: the socio-economic (e.g. prohibitive effect of the cost of recreation), organizational (e.g. lack of supportive policies and facilities), communicational (e.g. information about recreation resources and services doesn't reach the low-SES families), cultural (e.g. people feel uncomfortable and unwelcome due to visible SES markers) and gender barriers (e.g. bias in favour of men).

According to the **WHO's recommendations on PA for health** (WHO, 2010), adults from 18 to 64 years should do at least 150 minutes of moderate-intensity aerobic PA throughout the week in order to improve muscular and cardiovascular fitness, bone health and reduce the risk of NCDs and depression. This effect can also be achieved by at least 75 minutes of vigorous aerobic PA during the week (WHO, 2010). PA is considered to include any type of activity regardless of content, as a person can be active engaging in recreational (or leisure type) PA, transport (e.g. walking, cycling), occupational (i.e. work related), activity during household chores, play, games or planned exercise. According to the general guidelines (WHO, 2010), physical activity should be balanced as 50% of time should be dedicated to aerobic activities, 25% of the time to flexibility exercises and 25% of the time to muscular strength exercises.

## Social Determinants of Health and Health Inequity

Social factors, including education, employment status, income level, gender and ethnicity have a marked influence on how healthy a person is (WHO, 2015). Everywhere around the world there are wide disparities in the health status of different social groups.

The lower an individual's socio-economic position, the higher their risk of poor health (Buzeti et al., 2011). According to the WHO (2015) definition, **health inequities** are systematic differences in the health status of different population groups. These inequities have significant social and economic costs both to individuals and societies.

The differences in wealth between the most and least well off in society are increasing, as are the health and longevity that have been closely linked to SES (Goldman, 2001; Everson-Hock et al., 2013). People with low SES are more likely to have higher levels of obesity, an unhealthy diet and be physically inactive, which puts them more at risk of developing chronic conditions (Cleland, Tully, Kee & Cupples, 2012; Everson-Hock et al., 2013). In Slovenia, the percentage of smokers, overweight and obese is significantly higher among adults from low SES (Buzeti et al., 2011). Social determinants also influence life expectancy. In Slovenia, a man's life expectancy ranges from 72.7 (low SES) to 80 years – a difference of 7.3 years (Corsini, 2010). Life expectancy for females from low SES is 81.8 and for high SES is 84.3 years. These differences in life expectancy are congruent with other European countries with comparable income (OECD, 2014).

As stated above, physical activity plays an important role among modifiable behavioural factors that prevent NCDs. Among Slovenian adults of all age groups, a good 10% engage regularly in intense physical activity, while 20% engage in moderate physical activity (EHIS 2007). Physical activity typically increases with educational and economic status. In the low SES group, 15% of adults are totally physically inactive (in high SES 5%), among them more females than males (Buzeti et al., 2011).

Several studies (Taylor, Baranowski & Young 1998; Powell, Slater & Chalupka, 2004; Buzeti et al., 2011) show that low-income people suffer disproportionately from **health problems** related to PA. People from low-income families are more likely to be diagnosed with diabetes or asthma, to be obese, and to be at risk of health problems related to lack of exercise than the general population (Powell et al., 2004). Centres for Disease Control and Prevention from the USA (2002) reported that people with low-income families are three times more likely to live a sedentary lifestyle (39.5%) than people with higher incomes (13.2%). Among people from low-income families, only 17.6% are achieving the recommended levels of PA and 25.1% are considered obese with a body mass index (BMI) more than 30 (Centres for Disease Control and Prevention of the USA, 2002).

The **prevalence of NCD** and their long duration do not only affect individuals and their families but also have a major impact on the public health system. As the low-income population is more likely to be sedentary than the general population (Buzeti et al., 2011) and due to the aforementioned health disparities, increasing PA in this group is an im-

portant public health challenge. Interventions targeting low-SES groups, therefore, have the potential for major public health impact (Everson-Hock et al., 2013).

## Physical Activity Interventions for Low-Income Adults and their Effectiveness

There are several **PA interventions** that have been developed and implemented but relatively few have directly targeted the **socio-economically disadvantaged communities** (Marcus et al., 2006). Taking into account PA's many benefits and low prevalence rates, it is imperative that the designed interventions effectively **promote the adoption and maintenance of active lifestyles** (Marcus et al., 2006). Various behavioural and environmental intervention approaches have been developed and implemented. These interventions target individuals, groups or communities (Muller-Riemenschneider, Reinhold & Wilich, 2009). Different systematic review studies (e.g. Baranowski, Anderson & Carmack, 1998; Kahn et al., 2002; Ogilvie et al., 2007) are not consistent in reporting whether interventions have any effect on PA and which factors (if any) significantly modify people's behaviour.

However, as the primary purpose of intervention programs is to change PA behaviour, the **systematic review of interventions** for the general population by Kahn and colleagues (Kahn et al., 2002) has shown that community-wide education campaigns, individually adapted behaviour change programs, social support and enhanced access to physical activity areas had a small but positive effect on PA. The most effective were interventions that were a) tailored to increase walking, b) delivered at the level of the individual, household or group and c) targeting the most sedentary or most motivated (Ogilvie et al., 2007). On the other hand, there are also systematic reviews of research (Baranowski et al., 1998; Taylor, Baranowski & Young, 1998; Marcus et al., 2006) showing that the majority of PA related published intervention studies had little or no impact on PA behaviour. Of those interventions for the general population that did modify behaviour, either the participants were volunteers and can, therefore, be considered as already highly motivated or changes were related to school physical activity programs (Baranowski et al., 1998).

The reviews of interventions that promote PA in socio-economically disadvantaged groups (Taylor et al., 1998; Cleland, Tully, Kee & Cupples, 2012) recommended that there should be more focused and theory-based research that would identify critical factors for

effective interventions. Among studies that targeted individuals living in low SES communities (for review see Cleland, Tully, Kee & Cupples, 2012) and implemented counselling interventions, negligible or small effects were found. Given the small number of studies and the inconsistent findings, the strength of evidence of effectiveness is insufficient to make a recommendation (Cleland et al., 2012).

## Motivation for PA and Psychological Determinants

**Motivation** is one of the central topics of human behaviour. Although many kinds of behaviour can contribute significantly to an individual's healthy lifestyle, there are often considerable difficulties in attempting to start, maintain or resume involvement in such activities (Biddle & Mutrie, 2001). According to the general definitions, motivation is often described in terms of direction and intensity. Maehr and Braskamp (1986) describe motivation through five behavioural patterns, i.e. direction, persistence, continuing motivation, intensity and performance. The first indicator of motivation is direction, implying the decision-making process (e.g. the choice of whether to exercise or not). The second motivation factor, according to Maehr and Braskamp (1986) is persistence, which refers to the degree of sustained concentration on one task. Although persistence is also a reflection of choice and the decision-making process (Biddle & Mutrie, 2001), it is probably correlated with how important something is to the individual. The third indicator of motivation is continuing motivation (Maehr & Braskamp, 1986), referring to the regular returning to a task after a break. The fourth indicator of motivation is behavioural intensity, which reflects the individual's investment of the self and their identity in an activity. According to Maehr and Braskamp (1986), the last indicator of motivation is performance. For PA and other leisure activities, performance cannot be explained simply in terms of competence, skill or physiological factors (Biddle & Mutrie, 2001).

Exercise psychology has applied several theories to explain and predict the adoption and maintenance of an active lifestyle and the effects that PA has on mental health. Among the numerous theories and models that have been developed to explain motivational aspects of PA, only two will be described here, i.e. the **transtheoretical model** (hereinafter referred to as the TTM) and the theory of planned behaviour (hereinafter referred to as the TPB). Both theoretical frameworks were used in our intervention. The TTM developed by Prochaska and DiClemente (Prochaska & Marcus, 1994) is an important theoretical construct describing when, how and why people change their health behaviours. The



main goal of the TTM is to explain how health change occurs, identifying six stages of change. The stages of change are labelled as precontemplation (not seriously considering a change), contemplation (seriously considering a change), preparations (making small changes), action (making changes to an appropriate level) and maintenance (sustaining the change over time) (Prochaska & Marcus, 1994). One of the key constructs of the model is self-efficacy, taken from Bandura's social cognitive theory (Biddle & Mutrie, 2001), which reflects a person's confidence in undertaking the health behaviour change.

The second theoretical background used in our intervention is Ajzen's **theory of planned behaviour** (Ajzen, 1991). The TPB is one of the most validated models for understanding why people exercise (Biddle & Mutrie, 2001; Courneya & Bobick, 2000). According to the TPB, the central determinant of behaviour is a person's intention, which reflects the person's level of motivation and willingness to exert effort. Intention is determined by attitude, subjective norm and perceived behavioural control (Ajzen, 1991). The TPB proposes that a small set of salient beliefs underlie attitudes (i.e. behavioural beliefs), subjective norms (i.e. normative beliefs) and perceived behavioural control (i.e. control beliefs). These have to be key targets for interventions as they explain why people change their health behaviours.

## The Intervention »Will for Movement and Movement for Will«

One of the aims of our project was to design an intervention to promote PA and healthy lifestyle for socio-economically disadvantaged adults. "Will for Movement and Movement for Will" is a **multidisciplinary physical activity intervention** that, besides exercise sessions, offers **psychological support**. Participants were encouraged to invite a family member or friend that would offer additional motivation and social support for participation. The exercise program was focused on improving physical functionality, which is closely linked to general health (e.g. the prevention of musculoskeletal illnesses, osteoporosis, obesity, cardiovascular disease, risk of falling). Participants were also encouraged and advised how to adopt a more active and healthy lifestyle and to integrate PA in their everyday life even after the end of the intervention.

## Participants

Non-active adults from low SES families were invited to participate in the intervention. They were recruited with the help of the charity organization Association of Friends of Youth Ljubljana Moste-Polje (hereinafter referred to as the AFY Moste-Polje) and most of them were receivers of material support. They contact AFY on a voluntary basis. Most of the participants were also receivers of state support.

A total of 25 people entered the trial and 17 (2 men and 15 women) concluded the exercise program. The invitation for the program was offered to the non-active adults during their sessions with AFY's consultants. The recruitment took place from February to April 2015. Although the invitation was equally offered to man, only few decided to join the program. Table 1 shows the characteristics of the respondents that visited the exercise program over 15 weeks. Mean attendance among those who completed the program was 57%. People who attended less than third the sessions of the program were excluded from these analyses as effects were unlikely in the case of such low exposure.

Table 1 *Participants' characteristics*

	N	Min	Max	Mean	SD
Age (years)	17	19.0	66.0	44.7	11.9
Body weight (kg)	17	63.6	113.8	84.5	15.5
Body height (m)	17	1.59	1.82	1.68	0.08
BMI (kg/m <sup>2</sup> )	17	23.7	40.8	29.9	4.1

Participants were non-active adults from families with very low income (monthly income per family member from 358.92 to 428.74 EUR). Respondents finished lower ( $n = 2$ ), middle ( $n = 9$ ) or higher ( $n = 4$ ) education. The majority of the respondents were unemployed ( $n = 11$ ), others were retired ( $n = 2$ ), employed ( $n = 3$ ) or students ( $n = 1$ ). During the intervention, eight respondents were single, divorced or widowed, the other nine were in more or less permanent partner relationships. Two participants (including one younger one who was a student during the intervention) did not have any children, while the others have up to five children.

## Experimental Overview

Before the start of the intervention, the interested candidates were invited to an informative meeting where the goals and program of the exercise intervention were presented. On that occasion, participants completed a health and PA questionnaire, developed for

the purposes of the study, so the exercise program could be tailored to the needs and limitations of the individuals. All the participants gave their informed consent to the procedures of the study and were informed about the possible risks of the experimental protocol (e.g. injuries).

The participants visited the laboratory for the initial (before the intervention) and the final (after the intervention) physical testing on two occasions, each separated by two days. On the first visit the height, weight, aerobic capacity, flexibility and strength endurance was assessed. On the second occasion the maximal strength measures and static balance tests were performed. Physical performance measures were completed at baseline and following the 15-weeks intervention. During the intervention, progress in the exercise execution was monitored by the students who were leading the exercise and the kinesiologist who was a supervisor. Used as a motivational tool, participants were encouraged to focus on their exercise execution and keep track of their progress.

## Measures of Physical Activity – Physical Testing

### Anthropometrics

Weight and height were measured and BMI was calculated.

### Aerobic capacity

Maximal oxygen consumption ( $\text{VO}_{2\text{max}}$ ) was estimated from a 1.6 km walk. The 1.6 km (1 mile) walk is a sub-maximal test and a popular protocol that can classify individual fitness levels (based on walking time, heart rate, gender, age and body weight) (Kline et al., 1987).

### Flexibility

The flexibility of the hip and trunk extensors was tested with seat and reach test. The test was performed in a sitting position with legs extended and slowly reaching forward with both hands as far as possible. The “zero” point was set at the 40-cm mark, three repetitions were made and the best score (the most distant point in cm) was considered for further analysis.

### Strength endurance

Trunk lateral musculature was tested with the person supporting himself on one elbow and on the feet while holding the hips off the floor creating a straight line over the entire

body length. Side support was held on the left and right side as long as the correct position was maintained (McGill, 2007).

### Maximal strength

Leg extension was carried out on a leg press machine equipped with a force plate perpendicular to the direction of the sled. The participants were placed in a semi-lying supine position (i.e. the hip and knee joint angle was 90°) and instructed to place their foot on the force platform, while keeping the plantar surface of their foot flat on the plate throughout the contraction. The subjects performed two maximal isometric contractions.

Trunk flexion and extension were performed on a custom-made isometric trunk strength measuring device. The subject was firmly fixed to the rigid support at the pelvis and just above the chest. The upper fixation strap was attached to a custom-made force sensor mounted on the rigid support that measures the pulling force. Two repetitions of maximal isometric flexion and extension contractions were performed with the spine in the neutral position, feet at shoulder width and arms beside the body.

A hand flexion to test grip strength was performed with digital hand grip dynamometer. The test was performed standing, the dynamometer was held in the dominant hand and parallel to the side of the body. The subjects performed two maximal isometric contractions. For all the maximal strength measures, data was sampled and analysed using Labchart/PowerLab.

### Static balance

The subjects stood on a force plate and had to maintain a stance for 10 seconds, with their feet parallel and hands across the chests. Balance was tested under three different conditions; stance with opened eyes, stance with closed eyes and stance on an unstable surface (compliance foam). Data was sampled and analysed using the ARS system and the mean total CoP (centre of pressure) velocity was calculated.

### Statistics

All statistical analyses were performed using SPSS. Means and standard deviations (SD) were calculated for each variable. The normality of distribution of all the outcome variables was verified using a Kolmogorov–Smirnov test. We used repeated measures ANOVA to test the differences between the baseline and follow-up measurements, while for nonparametric variables, pre-post differences were examined using the Wilcoxon signed-rank test. The significance level was set at  $p < 0.05$ .

## The Exercise Intervention

The **exercise intervention** consisted of two 60-minute group sessions per week for 15 weeks held in the faculty setting. Participants could choose morning or afternoon classes. A three to one participant to staff ratio was maintained for close supervision of exercise intensity. The exercise was led by master students of kinesiology at the Faculty of sport and supervised by a kinesiologist with a PhD. Among the students invited to take part in the project, those with high academic achievements and good communication skills were chosen. As the participants were from socially vulnerable groups, high empathy and emotional intelligence were necessary for the students and colleagues to create an inviting and safe exercise climate.

The exercise program was aimed at improving **health-related physical fitness**, focusing on aerobic capacity and strength of the trunk and lower extremities. Ten minutes of warm-up was followed by 20 minutes of aerobic conditioning ( $\sim 60 - 70 \% \text{VO}_{2\text{max}}$ ), which was carried out in one of the following forms: brisk walking, Nordic walking, light jogging, light aerobics to music or a coordination polygon with different obstacles. During favourable weather, the aerobic part of the training took place outdoors. In the second part of the session, medium to high-intensity strength training was done (concentric contractions: 60-80% maximal load, 10-14 repetitions, 2-3 sets; isometric contractions: 60-80% maximal voluntary isometric contraction, 15-30 sec, 2-3 sets; work to rest ratio 1:1). Usually, a total of 8-10 exercises for leg, trunk and arms were done and were modified based on individual progression. Examples of the exercises that were used: squats, push-ups, curl-ups, X-walk (side walk with difficult hip abduction), rowing, left side support, right side support, bridging and back extension.

At the end of the exercise session, 5 minutes of stretching of the main muscle groups that had been working was performed. Stretching was sometimes substituted with balance or coordination exercise with a note of competitiveness and playfulness.

At the exercise classes, participants also learned about the benefits of exercise and PA and were educated about ways of increasing their PA and its benefits. The participants discussed potential unpleasant sensations associated with exercise and learned how to eliminate them (e.g., shortness of breath, delayed onset of muscle soreness, muscle spasms, low back pain etc.). If participants were interested, exercise instructors advised them on nutrition and low-fat foods.

The **psychological aspect** was an important part of the intervention. It included the use of psychological instruments for assessing the participants' functioning (before and after

the intervention) and various **motivational techniques for encouraging persistence in the program** (during the intervention). In order to **tailor the exercise program** to the needs and limitations of the participants, two semi-structured in-depth interview schedules (one before and one after the intervention) were designed for the purposes of the study. The questions encouraged participants to talk about their lives and describe their life stories, experiences with PA and other health related aspects. Series of questionnaires were used to gather relevant information on the psychological functioning of participants. The psychological outcomes of the intervention are described in Cecić Erpič, Tomažin and Prevc (2016).

Participants were instructed to write diaries of their PA according to the standards of the cognitive behavioural approach in order to stay motivated for exercise. The form of the diaries was designed for the purposes of the study. As the aim of the intervention was also to self-regulate PA, participants were instructed to add a third exercise session per week, conducted on their own. The motivation was also influenced by **positive and encouraging task-oriented motivational climate** during the exercise sessions. Task-oriented goals (Biddle & Mutrie, 2001) suggests that a person is interested in mastering a skill or task. By mastering certain skills, one feels competent with his/her ability to perform. This indicates that they are also intrinsically motivated and evaluate success by effort and improvement. Encouraging task-oriented goals means that strong efforts are highly valued, the person is doing his/her best, there is a lot of collaboration among the participants who enjoy the exercise and, most importantly, a strong emphasis is put on the value of the individual's progress throughout the program.

## Results of the Intervention – Physical Performance Measures

The pre- and post-intervention values for all physical performance measures are presented in Table 2 and are expressed as relative changes in Figure 1. Regarding aerobic capacity, participants showed a significant improvement in maximal oxygen consumption (~ 19%,  $p < 0.001$ ). While participants did not show any significant change in flexibility or in hand grip strength, all the other maximal and endurance strength measures significantly improved after exercise. Maximal leg extension strength increased by ~ 9% ( $p = 0.047$ ), while the change of maximal trunk extension and flexion strength was even more pronounced (~ 29%,  $p = 0.019$  and ~ 27%,  $p = 0.028$ , respectively). Following the

exercise, great improvements in the strength endurance of the lateral trunk muscles were observed; on average, participants were able to hold left side support 17.5 seconds longer (~ 95% increase,  $p = 0.009$ ) and right side support 13.5 seconds longer (~ 64% increase,  $p = 0.014$ , respectively).

Table 2 *Pre- and post-intervention data (mean SD) for performance measures*

Performance measure	Before	After
<i>Aerobic capacity</i>		
VO <sub>2max</sub> (mL · kg <sup>-1</sup> · min <sup>-1</sup> )	± 7.6	± 7.6***
<i>Flexibility</i>		
Seat and reach (cm)	± 10.5	± 8.7
<i>Strength endurance</i>		
Left side support (sec)	± 13.5	± 20.9**
Right side support (sec)	± 12.8	± 17.7*
<i>Maximal strength</i>		
Leg extension (N)	± 422.0	± 461.7*
Trunk extension (Nm)	± 89.5	± 110.0#
Trunk flexion (Nm)	± 60.1	± 120.2#
Hand flexion (N)	± 75.5	± 86.3
<i>Static balance</i>		
CoP velocity (mm/s)		
Parallel stance with OE	± 3.8	± 3.4
Parallel stance with CE	± 14.6	± 10.0
Parallel stance during US	± 9.4	± 9.7

\*denotes significant differences between pre- and post- intervention obtained using RMANova (\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ )

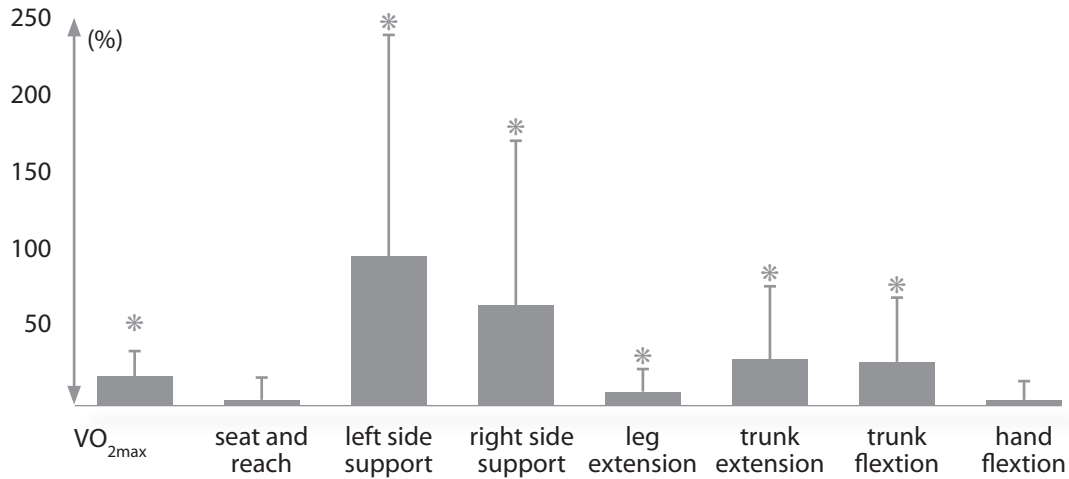
#denotes significant differences between pre- and post- intervention obtained using the Wilcoxon signed-rank test (# $p < 0.05$ )

CoP – centre of pressure, OE – opened eyes, CE – closed eyes, US – unstable surface

The exercise did not influence the sway velocity of the centre of pressure (CoP) during static balance tests. Although in all three balance conditions, a small tendency toward decreasing CoP velocity was observed (opened eyes -2.6% change, closed eyes -3.5% change and unstable surface -3.3% change; all  $p > 0.05$ ).



Figure 1 *Relative change of performance measures after exercise. \* $p < 0.05$*



## Discussion and Conclusion

The main finding of the present study was that a 15-week multidisciplinary exercise intervention was able to improve the health-related physical performance in people with low SES. The main improvements were observed in aerobic capacity and trunk (core) maximal strength and endurance. Given that the applied training was mostly focused on aerobic exercise and also on core and lower body strength, these results are not unexpected.

The **improvement of VO<sub>2max</sub> uptake** is one of the most important results of our exercise intervention. Studies show that the cardiorespiratory fitness level is the strongest predictor of mortality in follow-up years, rating as high as smoking, high blood pressure, high cholesterol and obesity (Blair et al., 1996; Wei et al., 1999). Low strength endurance of the core muscles is an important predictor of lower back pain (McGill, 2007), emphasizing the importance of the improvements in maintaining side support that were observed in our study.

The present study had a small sample size and was of relatively short duration. Interestingly, the majority of participants included in our study were female (15 vs. 2). According to several other studies (e.g. Brownson et al., 2004; Cleland et al., 2012), it is difficult to engage men in PA interventions. Our sample was also highly diverse regarding the age of

the participants (19 – 66 years); we were aware that by focusing the PA intervention by gender or age, we could miss potential opportunities to take advantage of the relationships and interactions between different generations and the multigenerational unit that exists as part of the family (Marcus et al., 2006)

The dropout rate in our study wasn't that high, but the attendance rate of those that completed the exercise program was relatively low (~ 57%). Hovell et al. (2008) also reports that maintaining the attendance level was extremely challenging. In their aerobic exercise intervention for low-income Latinas, the levels of exercise session attendance (65%) were similar to ours (Hovell et al., 2008). According to Hovell and colleagues (2008), they had to put great efforts into continuous vigorous outreach and the re-recruitment of dropouts to stop the loss of participants. In our intervention, similar tactics were used as described by Hovell et al. (2008): participants absent for two consecutive sessions without clarification were telephoned to determine the reason and prompted to return to the exercise. If possible, each participant was assigned an exercise “buddy” who encouraged participation and provided assistance for returning to class.

To overview the process of the intervention, it has to be emphasized that a lot of effort was put into **tailoring the exercise to the participants' abilities**. The **motivational aspect** of the exercise protocol was focused on the self-referenced progress. At every exercise session, it was strongly emphasized that participants should only compare themselves to their own initial physical abilities and focus on their own progress. One of our main goals was to create a climate where all the participants would feel accepted and competent. As the participants were inactive adults who had little experience with the guided exercise, or their experiences were negative, a lot of effort was focused on creating a welcoming and pleasant motivational climate. It can be concluded that the multidisciplinary PA intervention was very successful in improving important health-related physical performance. The exercise program enabled participants to interact with others, share experiences and barriers and also, based on participants feedback, represented a rich and memorable social experience.

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# Public Transportation and Mobility Enhancement Exercises as Support for the Independent Mobility of Older Family Members

## Abstract:

An independent life for older family members depends on their physical condition as well as on the quality and accessibility of public transport. Together it has a significant impact on social interactions of community-dwelling older adults, their participation in the community and the family. One of the aims of the project was to research the habits, perceptions and satisfaction of older public bus users and to develop and assess an exercise programme for mobility enhancement. The results of the research indicate that older public bus users are satisfied with the bus services on average. Visual impairment, musculoskeletal pain and balance impairment are the most common health problems of the public transportation user and were emphasised in the mobility enhancement programme that was developed for community-dwelling older adults.

**Keywords:** *community-dwelling older adults, mobility, independent life, exercise programme*

## Introduction

Active participation in the community, family and leisure activities well into advanced age are important personal goals for the majority of community-dwelling **older adults**<sup>1</sup>. Leading an independent life is related to and affects the self-perception of the quality of life, as

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<sup>1</sup> Community-dwelling older adults are persons older than 65 years that live in the community.

well as to satisfaction with it. Since most of these activities are related to changing location, the quality and accessibility of **public transport** is expected to have an important impact on social interactions. Access to public transport can thus prevent social exclusion and can add to building social capital. We may well accept the notion that traffic and services have important consequences for **social networks** in advanced age (Boniface, Scantlebury, Watkins & Mindell, 2015). Reports show that due to significant public transport disadvantages, older adults are often limited in their participation in community interactions (Iwarsson & Stahl, 1999). Public transport is, therefore, a necessary condition for the older adults to maintain their **quality of life** by being able to participate in family, social and leisure activities (Boniface et al., 2015). Besides, the independent use of means of transport by the older adults results in great relief for more able family members in terms of the concerns, time and effort for the required support. Therefore, as a part of our project “Helping Families in the Community: Co-Creation of Desired Changes for Reducing Social Exclusion and Strengthening Health”, special attention was given to the **mobility** opportunities and possible disadvantages and improvements for older family members. This was performed on two levels: firstly, the habits, perceptions and satisfaction of older public bus users were determined using a survey in the city of Ljubljana and secondly, a special **exercise programme** for enhancing mobility skills was developed and evaluated.

These activities are very important since it is expected that the need for public transportation for older adults (over 65 years of age) will increase in the near future. It is estimated that by the year 2050 25.1 % of the population in the OECD countries will be of that category, while this estimation is 20 % for Slovenia. And in the metropolitan areas, this increase is expected to be even higher (OECD, 2015). It is suggested that their travel needs will be highly heterogeneous in relation to their **travel habits** and their motor, sensory and cognitive impairments (Hensher, 2007). These facts need to be considered by the transport providers and transport planning authorities. Therefore, the potential of mobility for older adults and the quality, accessibility, usability and affordability of public transportation is an important indicator of the quality of life of the older adults, especially in metropolitan areas.

Age-friendliness is a policy approach to making services and environments more usable for the specific needs of older adults and thus promoting improved opportunities for social participation, active ageing and health (WHO, 2007). Transport providers and transport planning authorities are therefore expected to adjust their policies and action plans in accordance with the needs of the older adults. It has been reported that in USA and Canada, 1-18 % of all trips by older adults are made using public buses (Banister & Bowling, 2004), while a somewhat higher percentage (30%) has been reported for the UK



(Broome, McKenna, Fleming & Worrall, 2009). On the other hand, it has been recognised that ageing is also associated with a decreasing number of trips using public transportation, as well as with shorter distances travelled (Metz, 2000).

Older adults reported that they would be willing to use public transport if it were designed to meet their needs (Broome et al., 2009). **Obstacles to the use of public transportation** were identified as: difficulty getting on and off the vehicles, the distance and height of the kerb, the presence of steps, the speed of driver start-up, the friendliness of the driver and comfort during travelling (Broome, Nalder & Worrall, 2010). Another issue with public transportation use in advanced age is the problem of non-collision accidents resulting in injuries. It has been reported that 64.3 % of all public transport injuries in the UK resulted from non-collision incidents (Kirk, Grant & Bird, 2003). The same study showed that 5.6 % of the incidents on UK buses resulted in serious injuries and that 9.4 % of all incidents occurred while boarding, 17.2 % while alighting, 29.7 % to standing passengers and 43.7% to seated passengers (Kirk et al., 2003).

Ljubljana is a central European city with 287,000 inhabitants, 24 % of them older than 60 years (MOL, 2013a). Therefore, an initiative was issued in 2013 to make it an **older adults friendly** city. This initiative included also the increased demand for public transportation for the older adults. An action plan called “Age-friendly Ljubljana 2013-2015” (MOL, 2013b) included goals in the field of increased accessibility to public transportation for older inhabitants. As an initial result, the local authorities issued a brochure addressing the older public transportation users emphasising their safety during boarding, transportation and embarking (MOL, 2011).

To assist in developing up-to-date policies for the transportation of older inhabitants, insight is needed into the current habits, frequent difficulties and obstacles that older bus users are confronted with, as well as information on their satisfaction with the current service.

The purpose of the present study was thus to evaluate the habits, perceptions and satisfaction of older bus users with the current Ljubljana public transportation services. This information was used for the preparation of mobility enhancement exercise programmes. Additionally, knowledge of the habits, physical impairments and complaints of older bus service users served as a basis for the preparation of recommendations for older public transportation users and for transportation providers. The results presented in this paper are an important contribution to the project. They can help in improving the environment leading to a more independent lifestyle for older family members, which could result in relief for more able family members in terms of the concerns, time and effort for the required support.

## Methods

A structured **questionnaire** was used to determine the **habits**, perceptions and satisfaction with Ljubljana public transportation services. For this purpose, a Scandinavian questionnaire (Svensson, 2003) was adopted and validated for the Ljubljana situation. The translated and adapted questionnaire was first validated using a small sample of Ljubljana public transport users. The final version was then performed as a structured interview of randomly chosen bus service users. Specially trained undergraduate students of occupational therapy performed on the spot interviews. The questions were of two types, the first part consisted of multiple choice questions while the second was a list of 13 statements related to satisfaction with bus services. Participants were asked to rate these statements on 5 point Licart scale where 1 stands for completely disagree, 2 disagree, 3 neither disagree nor agree, 4 agree, 5 completely agree.

**Satisfaction with the mobility enhancement programme** and its efficacy were assessed with two questionnaires. The Satisfaction questionnaire, aimed at finding the level of satisfaction with the exercise programme, consisted of 15 statements on the programme that were rated on a 5 point Licart scale. The Global Rating of Change scale (hereinafter: GRC) (Kamper, Maher & Mackey, 2009) was used to quantify the **effect of the mobility exercise programme**. The magnitude of the perceived change was scored using a numerical scale where 0 means no change, the maximum score for positive change is +5 and the maximum score for negative change is -5. The GRC scale is known to be valid, reliable and has good reproducibility (Kamper et al., 2009)

## Study Sample

The sample of participants is regarded as a convenient one. Public transportation users in Ljubljana were approached at a bus stop after the completion of their journey or while waiting for the bus. Participants were approached on 6 different bus lines and four different bus stops. All the bus stops were in the city centre and were chosen so that all bus journeys had also begun in the city centre. 195 public transport users were invited to respond to the structured interview. 80 refused to participate while 14 of them were later excluded from the analysis due to their younger age than the required 60 years. Thus 101 structured interviews remained for the final analysis. The average age of respondents was  $74.2 \pm 7.1$  years, 30% males and 70% females. The age structure of the respondents

was 47% in the age group between 60 and 69 years, 38% between 70 and 79 years, 23% between 80 and 89 years and 3% 90 years or more.

A convenient sample of thirty-one older adults aged  $70.1 \pm 6.1$ , 28 females and 3 males, height  $163 \pm 7.5$  cm and weight  $66.5 \pm 11.6$  kg, who participated in the mobility enhancement exercise program twice a week were asked to rate their satisfactions and change in mobility as a result of the participation.

## Procedures

The **model** is described in detail elsewhere (Rugelj, 2016). In brief: The mobility enhancement exercise programme developed by our team is based on the system model of motor control (Shumway-Cook & Woollacott, 2012), of balance assessment (Horak, 2006) and on the results of multi-component balance-specific training of the frail (Rugelj, 2010) and community-dwelling older adults (Rugelj, Tomšič & Sevšek, 2012); fallers and non-fallers, as well (Rugelj, Tomšič & Sevšek, 2013a). The reported exercise programme increased balance and resulted in a longer tandem stance, decreased postural sway on a firm and compliant surface with open and closed eyes, significantly increased gait speed of both nursing home residents (Rugelj, 2010) and of community-dwelling older adults (Rugelj et al., 2012). Key components of balance were addressed in a series of balance-specific exercise for the older adults where biomechanical constraints, movement strategies, sensory strategies, orientation in space, control of dynamics and cognitive processing were included. This multi-component programme was organised as circuit training. The components of the modelled balance-specific programme are: 1. changing the centre of gravity position in the vertical direction and its shifting to the border of stability, 2. rotation of the head and body about the vertical and horizontal axis, 3. standing and walking on a soft supporting surface 4. walking over obstacles, on a narrow path and changing direction, 6. multitasking.

## Statistical Methods

The Statistical Package for Social Sciences (SPSS 23, SPSS Inc., Chicago, IL USA) was used for statistical analysis. Descriptive statistics were calculated for the questionnaires and the results of the GRC scale, as well as the graphical presentation.

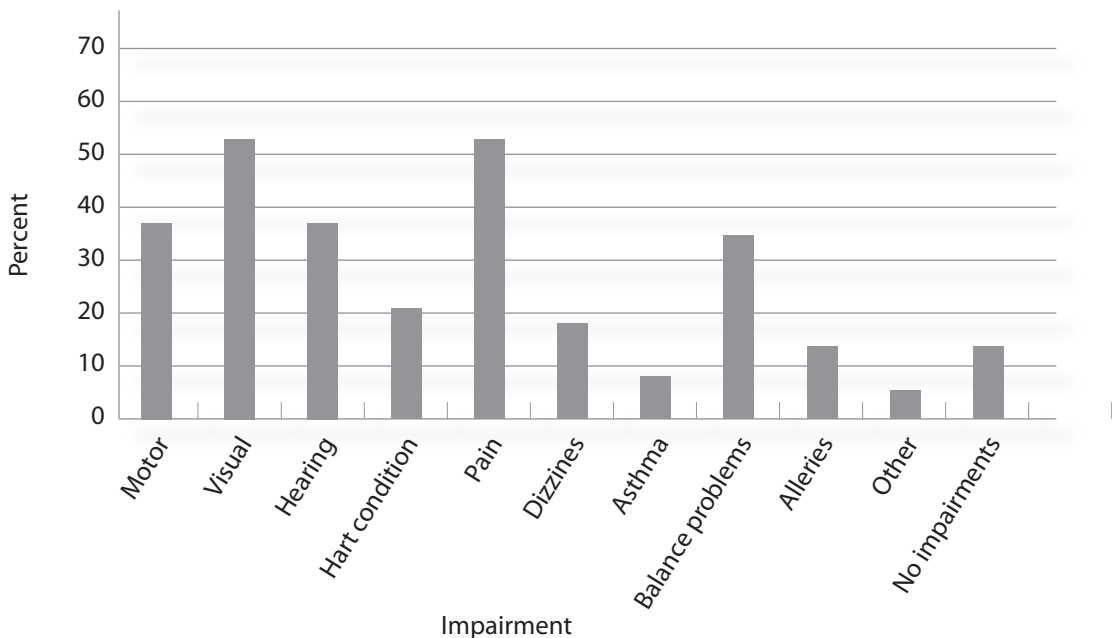
## Results

The results are presented in two parts: firstly the results of the bus users' survey, physical impairments and habits followed by perceptions of the quality of services. The second part presents the results regarding the mobility enhancement exercise programme for community-dwelling older adults: beginning with the satisfaction with it and followed by the perceived efficacy of the programme.

### Bus service survey

The respondents' perceived **physical impairments** expressed as percentages of the frequencies for all of the reported physical limitations are presented in Figure 1. The most frequent answer was **decreased vision** (53%), followed by motor impairment (37%) and **balance problems** (36%). Only 12.4% of the respondents reported no physical limitations. Of those who reported physical limitations, 33.7% perceived their physical limitations as making their travelling difficult. The number of reported physical limitations per respondent ranged from 1 to 7, averaging  $3 \pm 1.6$ .

Figure 1 *The percentage of individual physical limitations as reported by the respondents*



When asked to estimate their **physical fitness**, the majority of the participants reported being able to walk more than 300 m while 37% of respondents reported using a walking aid during outdoor walking. The most usual type of walking aid reported was a walking cane followed by crutches.

The **frequency of public bus** use by the respondents was 37.6% daily, 41.6% weekly, 8.9% monthly and 11.9% seldom use public transportation. On average, the respondents reported making  $9 \pm 6.7$  one-way journeys per week using the services of Ljubljana public transportation.

The bus users most often have to **walk** between 50 and 150 metres (34.7% of respondents) to the nearest bus stop, followed by 32.7% less than 50 metres, 21.8% between 150 and 300 metres and 10.9% more than 300 metres. The walking time to the nearest service bus stop was  $6.87 \pm 4.2$  minutes on average.

When asked whether they could **sit** during the journey and whether they were offered a seat, 66.3% of the respondents claimed to be offered a seat, of those who were offered a seat, this was done voluntarily in 41.6% cases and upon request in 24.8% cases, while 33.7% of the participants reported that they were not offered a seat. 83.2% of the respondents reported that they had enough time to take a seat before the bus drove off while 16.8% reported that there was not sufficient time to safely sit down.

Perceptions of the **quality of services**, which was the second part of the interview, consisted of 13 statements related to satisfaction with the services, such as “You are treated well on the bus”, and respondents were asked to rate the statements on the five-point Licart scale. The responses indicate the passenger’s satisfaction with the bus service. The majority of the respondents agreed with these statements. The detailed frequencies expressed as percentages are given in Table 1.

**Table 1** *The frequencies of agreement or disagreement with the 13 statements related to satisfaction with the bus services expressed as a percentage*

	Complete-ly disagree	Disagree	Neither disagree Nor agree	Agree	Com-pletely Agree
a. Travel on the bus is fast	2	5	31.7	40.6	20.8
b. Travel on the bus is comfortable	3	10.9	28.7	35.6	21.8
c. Travel on the service lines is cheap	5.9	12.9	23.8	33.7	23.8
d. There are enough bus departures	1	5.9	27.7	44.6	20.8
e. There is a bus stop nearby (your residence)	0	8.9	7.9	30.7	52.5
f. You are treated well on the bus	0	11.9	31.7	26.7	29.7
g. There is no problem finding a seat	4	20.8	27.7	24.8	22.8
h. It is easy to change buses	0	11.9	13.9	30.7	43.6
i. It is easy to enter and exit the bus	0	17.8	22.8	22.8	36.6
j. There is enough time to take a seat	4	29.7	24.8	18.8	22.8
k. Travel on the service bus is pleasant	0	7.9	29.7	30.7	31.7
l. I am satisfied with the bus services	2	4	23.8	41.6	28.7
m. The bus drivers are friendly and helpful	1	13.9	20.8	37.6	26.7

## Mobility enhancement exercise programme

The results of the questionnaire (Table 2) indicate that the participants were satisfied with the exercise programme (4 – I agree, 5 – I absolutely agree). The pace of exercises received the lowest average score and therefore this will be the ground for exercise pace adjustments.

Participants in the mobility enhancement exercise programme rated their **perceived efficacy** using a GRC scale and 52 % of the participants reported the perceived improvement as +3 (out of max. +5) and 17% as +2. The perceived improvement in confidence in mobility was rated by 43% of participants as +3 and 26% as +2.

Table 2 *Responses to the satisfaction questionnaire*

	Question	Average score
1	The variety of exercises is appropriate	4.6
2	The exercises are appropriately challenging	4.5
3	The exercises are performed at appropriate pace	4.3
4	I like the music during exercise	4.4
5	There is enough rest between exercises	4.9
6	I feel safe during the exercise	4.9
7	The instructor appropriately leads the exercise	4.9
8	I like the involvement of students in the programme	5
9	I feel good in the group	4.9
10	After the exercises, I am pleasantly tired	4.9
11	In addition to exercise, I like socializing with the group	4.7
11	I feel better since I started attending the exercise	4.6
12	My family and friends support me for exercise attendance	4.6
13	Participation in measurements is interesting	4.8
14	I am looking forward to being informed about the results	4.9
15	I would like to continue attending the exercise program organised by Faculty of Health Sciences	5

## Discussion

Living in a community with good **public transportation** is a “building block” of the quality of life (Banister & Bowling, 2004). In order to provide a comprehensive understanding of public transportation usability, one should not just consider the physical and sensory environment, but also social, cultural and institutional factors need to be taken into account. One of the purposes of our research was thus to assess the **habits, perceptions and satisfaction** of older public transportation users in the Ljubljana metropolitan area. The results indicate that they are satisfied with the bus services in Ljubljana on average.

The age distribution of the respondents indicates a high proportion of the **younger older adults**<sup>2</sup> public transportation users. The majority of the participants in our on the spot street survey were female and aged between 60 and 70 years. The overall gender distribution of the participants was 70% in favour of female participants. These results do not reflect the gender distribution of the inhabitants of Ljubljana (MOL, 2013). However, this

<sup>2</sup> The diversity of old age is recognised by defining sub-groups: young-old (65 to 74), middle-old (75–84), and oldest-old (85+).



gender distribution of bus users corresponds to those previously reported: Banister and Bowling (2004) reported 60% female bus users while Kirk, Grant and Bird (2003) claimed that there were three times more female bus users than male ones.

The reported frequency of bus use indicates that 80% of the respondents were **regular users** of bus services. Those who rarely use the bus service were predominantly in the oldest age group. The lower number of very old public transportation users was also reported by Banister and Bowling (2004). While the distances travelled using other means of transportation decrease with age, presumably due to the reduced use of other means of transport such as car, plane and walking, the distances travelled by bus increase with age (Banister & Bowling, 2004).

In general, older adults users of public transportation in Ljubljana are satisfied with the service provided. With 12 out of 13 statements that positively evaluated the bus services, more than 56% of respondents either agreed or completely agreed and between 20 to 30% of respondents neither agreed nor disagreed with the statements. The highest percentage of disagreement was with the statement on sitting and boarding the bus: 25% of respondents reported problems **finding a seat** and 34% of respondents reported not having **enough time** to sit down before the bus started to move. Finding a seat and having enough time to sit down are two areas where Ljubljana public transportation services could improve. Another area with unsatisfied users is entering and exiting the bus since 18% of the respondents reported having difficulties entering and exiting. Difficulty getting on and off the vehicles and the speed of driver start-up are commonly reported in other studies as a major obstacle to the use of public transportation by older service users (Broome, 2010). It has been reported that 9.4% of injuries happen during boarding, 17.2% during alighting and 29.7% to standing passengers (Kirk et al., 2003). The major weakness of our study is the choice of participants - it was a convenient sample of participants travelling through the city centre. Of those approached, only those who were willing to participate could be analysed. It seems reasonable to assume that those who were willing to participate in the study belonged to the more satisfied end of the distribution. A randomised sample of all adult public transportation users would probably be needed to decrease the potential bias.

In 33.7%, the respondents reported that they perceived the use of public transportation as limited by their various physical conditions. In community-dwelling older adults, various health conditions can lead to less frequent trips and additional health conditions are strongly correlated with the incidence of traffic injuries (Hong, Lee & Jang, 2015), with the legs, back and chest being the most frequent sites of injuries (Hong et al., 2015).

Perceived **balance problems** were reported by 38% of respondents. Impaired balance alone is an important risk factor for accidental falls of older adults. Added to this is the inherently unstable supporting surface of the moving, accelerating and decelerating bus. Unfortunately, the accessibility of public transportation may also increase the possibility of incidents, especially for the more fragile travellers. Older adults are less resilient and more vulnerable to stress, and stressful events could lead to a reduction in concentration, physical balance and gait velocity (Hong et al., 2015). Therefore the mobility enhancement exercise programme is a possibility for community-dwelling older adults to increase their resilience to the stress of travelling by bus. Boarding, finding a vacant seat and preparing for getting off the bus are typical activities that require divided attention where a person needs to combine one or two motor tasks with a cognitive one. Additionally, carrying bags can add to a person's instability and may also occupy their attention. Studies of divided attention and multitasking have clearly shown that the balance performance of older adults while multitasking is reduced (Borel & Alescio-Lautier, 2014) and their gait speed is significantly lower while multitasking (Rugelj et al., 2013b). With appropriate training, the costs of multitasking can be decreased even at advanced age (Agmon, Belza, Ngujan, Logsdon & Kelly, 2014), although the training should be as specific as possible (Taube, 2011). Within the mobility enhancement exercise programme, we created situations similar to those encountered in public transportation and provide a close relationship between the training and functional situations.

The **impaired balance** that was reported by 36% of bus users is an important risk factor for accidental falls of older adults. Therefore, we tailored the mobility enhancement exercise programme accordingly. The creation of the programme, together with the survey of public transportation use and perceptions of older community-dwelling adults, was an inherent part and one of the aims of our project. Since awareness of the benefits of balance maintenance exercises is increasing among the older adults, more and more decide to participate in the programme before serious mobility problems occur. These **balance-specific programmes** are reported to be effective in various components of balance, given a sufficient frequency and number of repetitions (Shubert, 2011). Therefore, we assessed the perceptual domain of the exercise programme with the assessment of satisfaction and the GRC scale. With an average of 4.6 on the five-point Licart scale, the mobility exercise programme is liked by the participants. And when assessing the perceived impact of the programme on their mobility, the majority of participants rated the change as +2 and +3 (of maximum +5). The global aspect of the measure allows the participants to rate the aspect of mobility they consider important and most relevant to them. It is reasonable to

believe that such high ratings of the impact of the programme may also reflect when the participants are bus service users.

The programme was organised as **circuit training** and therefore we additionally assessed the time needed for the efficient performance of each station in the circuit. The results indicate that 7 minutes per station is optimal. Satisfaction with the balance-specific programme was very high and its adherence rate was 70%. The results indicate that the safety during exercises received the highest and the pace of the exercises the lowest average score. Based on the assessment of the feasibility of the programme, the improvement of balance and satisfaction with the programme, we can conclude that the mobility enhancement exercise programme is **feasible, effective, well-liked by the participants and perceived as efficient**.

## Conclusion

In conclusion, older inhabitants of Ljubljana metropolitan area **frequently** use the public transportation services despite their physical weaknesses, they perceive travelling on buses as **pleasant** and in general the respondents are **satisfied** with the services. There is still an opportunity for improvement in the promotion of voluntarily offering seats to older fellow passengers. Our specially developed mobility enhancement exercise programme proved to be efficient and well-liked by the participants. It would thus be desirable to consider the means of including a much larger number of the older adults in it in an effort to enhance their independent participation in the community and to enable them to participate in family and social life as long as possible. Keeping older family members **independent** provides relief for other family members in terms of the concerns, time and effort required for support.

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A scientific anthology based on social work in an intersubjective context is an important contribution to practice as well as for teaching and research communities. The book also profits from a close cooperation with users (here named interlocutors) to enhance the need for a respectable and decent dialogue in everyday practices.

*Edgar Marthinsen, Prof. (Social Work),  
Norwegian University of Science and Technology, Norway*

This is a timely book because it re-asserts the vital importance of the relationship-based centre of social work at a time when it is being drastically eroded by the bureaucratic nature of contemporary practice. It provides social work students and practitioners alike, with the theoretical concepts, processes, and frameworks to develop the skills to form such relationships. It enhances the development of critical practice skills by integrating the language and purpose of traditional social work and invites practitioners to relinquish professional power, and defensive practice in return for developing a co-creative, collaborative alliance, in order to work through the uncertainty of the social work terrain in pursuit of the social work goals of empowerment, social justice and human rights.

*Eileen Oak, Senior Lecturer (Social Work),  
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Co-creating a process of help with families who face many challenges is a learning path for all the professionals working with families to learn what it means in practise to create a process of help in a dialogue, acknowledging and accepting the fact that the families already possess a great deal of knowledge and capacities that they can use. Moreover, it is not only about the acknowledging and accepting that fact but also about making it happen.

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