
The continuing relevance of casework ideas to long-term child protection work

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ABSTRACT

This paper is a personal reflection on how casework ideas have informed my own practice. Traditional social work is under threat. Casework, which was once a core method of working in social work, is particularly vulnerable because it has become a private, personal activity that is often misunderstood. It still has its followers but it is hard to find any modern accounts of casework practice. This paper attempts to remedy this by describing the application of casework ideas to work with families following registration of a child on the child protection register. The casework approach is described and illustrated using two case examples. This shows that casework with involuntary clients remains an important method of working but there are inherent constraints within the statutory role which limit what social workers can achieve in terms of therapy or in tackling poverty and inequality. This is followed by a discussion of contemporary social work practice and ideas for ways forward.

THE HERITAGE OF CASEWORK PRACTICE

Earlier philanthropic work with the poor was based on the belief that in most cases personal inadequacy was at the root of the family's failure to remain independent and self-supporting. The early caseworkers found that developing a proper 'helping relationship' to enable families to function better was an important skill. Hall (1952) identified an approach based on humanistic values and a co-operative client-worker relationship which she described as 'casework'. It was the casework model that defined the approach of the emerging social work profession and became an important part of professional training (Younghusband 1959).

Changing views of casework over the past 50 years

More than 50 years ago the language of casework expressed a fundamental principle of child care work – that the personal welfare of the child was paramount. According to Britton:

The Children Act, 1948 could well be described as an attempt to ensure that the principles and methods of social casework should be extended and applied to the whole child care field. Each child coming into public care should be treated as an individual in need of personal help, and not as one whose need presents simply an administrative problem (Britton 1954, p. 168)

Early casework ideas were often influenced by Christian beliefs. Biesteck (1961) described the client-worker relationship as being based on a set of values, or principles of practice, which included individualization, the purposeful expression of feelings, controlled emotional involvement, acceptance, a non-judgemental attitude, client self-determination and confidentiality.

During the 1950s psychiatric social workers tended to look for the sources of their client's difficulties in early experiences and relationships. They regarded the casework relationship as an opportunity for the client to look at these difficulties, feel supported and, if possible, gain 'insight'. Their casework approach implied the existence of a 'secure' or 'good'

relationship with the psychiatric social worker if it was to be successful. However, Irvine (1956) offered an alternative to 'insight-giving' techniques. She compared the activities of the caseworker with that of stable parents 'who have their own way of helping children deal with unconscious anxieties, by remaining benevolent and undamaged, and by retaining a benign control of the situation; by being in fact actively parental' (Irvine 1956, p. 114). In this type of casework the essential process lay in the acting out of a parent-child relationship between worker and client which could include a firmer, more persuasive approach, if appropriate. The theoretical implication of this was that the quality of the 'counter-transference', i.e. the social worker's feelings towards the client, was an important component of casework.

During this period caseworkers were becoming more concerned with attitudes and relationships than their predecessors and were more prepared to use their special skills to influence the client and to help the client adjust to his or her social situation. Perlman's influential book on casework practice encouraged social workers to see themselves as involved in problem-solving processes and to focus on the difficulties that clients had in performing their social roles (Perlman 1957). Her ideas suggested that casework should focus on the short-term aim of educating clients in problem-solving rather than on pursuing long-term goals in an open-ended way.

Hollis's 'psycho-social approach' (Hollis 1964) encouraged a wider perspective, combining methods aimed at resolving internal psychological difficulties with methods for relieving environmental stress. Her ideas showed how it was possible to work on both internal and external factors within the framework of a steady, dependable and nurturing relationship. However, Hollis generally used the language of 'treatment' and her view of the social work role was essentially conservative. For example, she seemed to assume that social workers, in their dealings with organizations, were required to conform to the status quo rather than to challenge it.

The radical social work movement that emerged in the 1960s provided an important critique of casework as a method of working. It attempted to widen the focus of the social worker from the individual to the social and economic structure and encouraged collective action to deal with social problems. It provided a radical ideology concerned with the reduction of inequality and social injustice and attacked professionalism for being elitist and too narrowly concerned with its own interests.

Although casework gradually disappeared from training courses it still had its supporters and continued being included in the literature on social work methods. Vickery, a defender of social casework, acknowledged the difficulties for caseworkers owing to the fact that agencies set goals for social workers which were different from casework goals (Vickery 1977). She nevertheless thought it was possible to combine authority with a casework relationship and also believed that casework should be concerned with promoting children's healthy emotional development. More recently, Coulshed (1991) recognized the value of the psycho-social approach in situations which are difficult to change and suggested that it has a continuing relevance in helping social workers understand the apparently irrational behaviour of their clients.

Throughout this period social workers who have modelled themselves on traditional caseworkers have continued providing a considerable amount of support to families. They have made a sustained commitment to helping parents care for their children, believing that their professional relationship with the family could contribute to this process. Their work was based on a belief in the power of compassion and caring, sometimes expressed in practical ways, as the most powerful motive for personal growth and change. They recognized the intensity of the relationship if vulnerable individuals were to be cared for adequately and this included a willingness to remain involved over a long period and a deepening of their knowledge of the family's difficulties. This paternalistic style of family work, which was typical of the 1970s, has continued up to the present day in some community-based family centres.

Casework with children

Casework with children in the early child care service essentially consisted of carrying out statutory duties, visiting children and maintaining continuity of care as the child's environment changed. Much of the social work literature indicated that the role of the child care officer should be seen as performing 'parental' responsibilities towards the child whose parents had failed in their responsibilities. However, even in those days the child care officer had a difficult task. As Britton said

The task of helping children who are deprived of a normal home life to find personal relationships which they can make use of, is no easy one. It is one thing to realize that they need security, affection and a chance in life, but it is another thing entirely to know how to give it to them and how to help them to accept it (Britton 1954, p. 176)

In the 1950s and 1960s therapeutic techniques with children were being developed in clinics and residential settings and there was an optimism about what could be achieved through direct work with children. However, by the 1970s there was a growing interest in making more effective use of resources in the community, and the tension between this and direct work with children was being acknowledged. Nevertheless, Clare Winnicott (1972) argued strongly in support of giving children personal support and understanding and of knowing them as individuals, both for the purpose of assisting the child and for that of identifying his or her need for community resources.

Casework with parents

There has been an ongoing tradition of casework with parents in the voluntary sector and in child guidance clinics. Obviously, social workers who are not required to perform statutory duties are more likely to be able to build relationships of trust with parents. Psychiatric social workers in the early child guidance clinics saw their task as working with parents, particularly the mothers, and giving advice, guidance and support. The casework they provided had much in common with notions of psychotherapy and was strongly influenced by the medical model (Kahn & Nursten 1968). Psychoanalytic concepts and theories were useful in illuminating this type of casework practice and in helping to think about its responsibilities and burdens (Salzberger-Wittenberg 1970).

However, casework with parents was never given the support it needed to emerge as an important approach in statutory child care work. Mattinson & Sinclair's (1979) classic study of social work practice with parents, focusing on difficulties in the couple relationship, found that social workers did not receive the necessary support from social services departments in doing sustained relationship work. There was also the risk of social workers getting into a collusive relationship with parents. Casework with parents came under attack following the Inquiry into the death of Jasmine Beckford when Blom-Cooper criticized social workers for supporting parents and losing sight of their over-riding legal duty to protect the child (Blom-Cooper 1985).

Family casework

Family casework dealt with a wide range of problems that can arise in any family and was the least specialized of all forms of casework. The need for some kind

of family casework became more clearly recognized as experience of working with the deprived and neglected child pointed to the need for preventive and after-care services to deal with the family problems as a whole. Some family caseworkers were employed by Children's Departments but the majority were employed by voluntary family casework agencies which often chose to work intensively with a limited number of families. During the 1970s there was a growing interest in seeing whole families together and social work with families was generally known as 'family casework' (Jordan 1972).

Sainsbury's study into social casework among clients of a Family Service Unit showed that family casework was concerned with reducing the professional distance in the client-worker relationship by such methods as informality, getting close enough for honest discussions, patience, and equal caring for everyone in the family (Sainsbury 1975). This study concluded that the parents were generally positive about the casework service they received and found it helpful and appropriate. This type of family casework has a long and respectable tradition and continues to be practised in many social work agencies in the voluntary sector.

Counselling

Traditional casework with its emphasis on the use of the client-worker relationship is very similar to counselling. Carl Rogers' (1976) client-centred counselling and Egan's (1990) ideas of 'the skilled helper' have clearly been influential in describing the necessary qualities and skills that the caseworker brings to the relationship. These include warmth, empathy and genuineness as well as the capacity to think about feelings. Counselling is a predominantly psychological process and works on problems presented by the client, with the aim of promoting the client's personal growth and development. However, this kind of non-judgemental counselling is generally regarded as incompatible with statutory responsibilities. The shift away from this approach can be traced back to the emergence of child abuse as a 'social problem' following the death of Maria Colwell in 1973 and the subsequent creation of child abuse registers. This was the beginning of a change in organizational culture in which child care was gradually transformed into a service dominated by child protection, with much greater emphasis on procedures. It is therefore remarkable to discover that counselling/casework is still ranked by social workers as their primary method

of work in a recent study into the workings of the Children Act (Sedon *et al.* 1996).

THE APPLICATION OF CASEWORK IDEAS TO CHILD PROTECTION PRACTICE

Social work intervention in child protection matters is sometimes referred to as 'social care' but this is misleading. Whilst the provision of 'social care' services is important, child protection also has a social control function and most clients are involuntary clients. The use of authority is therefore of central importance in child protection work. Whether or not there are grounds for compulsory measures, social workers must carry out their negotiations with parents from a clear and explicit power base. Their skills in developing effective working relationships with parents without losing sight of the over-riding duty to protect the child are at the core of this work. The qualities of sound judgement, wisdom and tact in the social worker are profoundly important in view of the risks to children if mistakes are made.

Government guidance about interagency child protection arrangements and responsibilities (Department of Health 1999, 2000) can only clarify the tensions and conflicts within the Children Act 1989, without resolving them. Guidance does not determine what should happen in an individual case – this requires professional judgement. For example, working in partnership with parents is an important principle but occasionally social workers need to take action to protect the child without consulting parents. These conflicting principles ultimately get resolved through the practice of professionals and the legal process.

In child care work there is a central dilemma regarding the question of how professionals can share responsibility with parents over the upbringing of their children. If the basis of much child protection work involves uninvited surveillance of private behaviour, which is likely to provoke anger and fear in families, then how are families going to view the social worker who wants to get into a supportive relationship? Clearly, there are problems for social workers in establishing trust and genuine partnership.

In recent years government has been encouraging social services departments to integrate family support and child protection work (Department of Health 1995). The task of the social worker is to assess needs and mobilize services whilst also assessing the level of risk and ensuring the necessary action to protect the child. Throughout this work the social

worker needs to have a reasonably clear idea of what is wrong, what needs to change and how this might be achieved. The skills required of the social worker in getting alongside the family, offering help, gathering information, assessing risk and monitoring the situation generally receive little attention but they are effectively casework skills.

CASEWORK IN POST-REGISTRATION WORK

The challenge facing the social worker when a child is placed on the register is to find some way of getting closer to the child and family in order to understand the reasons for their difficulties. Getting close enough to see what may be hidden is a core social work skill but one that is hardly ever discussed, possibly because of a reluctance to face up to the underlying manipulative intent. Meeting the child and family in their normal environment, seeing the physical conditions in the home and community, listening and observing are all important. However, in the longer term the aim is to get beyond normal politeness and to be able to raise sensitive subjects, ask probing questions and explore things more deeply. Invariably, there will be barriers to an authentic meeting between the social worker and family, such as barriers of class, race and religion. Much will depend on whether the social worker has the necessary skills – such as accurate empathy and intuition – to develop effective working relationships.

Many of the families coming to the attention of social services have multiple needs and entrenched problems and the social worker must seek to understand these within the wider family and community context. Registration often follows when the efforts of family, friends and neighbours to address problems have been unsuccessful. At this stage the social worker, as key worker, is given the authority to speak directly to the family about concerns and to say things that others have possibly felt unable to say.

Social workers who are open and explicit about what they are doing have a greater chance of achieving a meaningful relationship with parents. The parents' perspective must be understood but not necessarily accepted. The social worker needs their permission to see the child alone. If the child is to be helped social workers often have to help parents face up to some painful realities about themselves and the child. Social workers therefore need skills in saying things to parents that are difficult for them to hear and supporting them in making necessary changes.

PSYCHO-SOCIAL CASEWORK AND CHILD PROTECTION PRACTICE

Applying psychoanalytical thought to the casework relationship can provide new understanding and this approach was illustrated by Halston & Richards (1982). They acknowledged the fact that in child protection work social workers find themselves working in a hostile climate a great deal of the time. The important point they made was that the parents of children at risk of abuse or neglect are often people with complex problems and terrible experiences from their own childhood which need to be understood and tackled if appropriate help is to be given to the family. Secondly, they suggest that the parents are likely to act out their problems in relation to the social worker, who enters the family as a person in authority, and the social worker immediately becomes caught up in the family's cycle of suspicion and hostility. If these parents are to be helped to change, the social worker will need to acknowledge and work with the disturbed and disturbing feelings. Working at this level is a very complex and difficult task but they argued that psychoanalytically informed supervision can assist this process. The establishing of a trusting relationship between worker and parent was considered essential. However, the authors failed to acknowledge the inherent problem of the imbalance of power between worker and parent. The paternalism that is evident here reflects a time when the profession was more confident and held in greater public esteem than it is today.

Psychoanalytic ideas were more fully elaborated by Preston-Shoot & Agass (1990), who suggested that the task of the therapeutic social worker is to be a parent figure to the client who has been affected by the absence of 'good enough parenting and a facilitating environment' (Winnicott 1965). The therapeutic social worker acts as a 'good enough parent' and is required to 'hold' and 'contain' anxieties and bad feelings that the client cannot manage for the time being in the hope that this may open up the whole process to understanding and discussion, eventually enabling the client to take back what was previously unbearable and work it through for themselves (Preston-Shoot & Agass 1990, p. 41).

FIRST CASE EXAMPLE

Ms A was very anxious during her pregnancy about her ability to cope with her new baby and welcomed social work support. Her previous child had been

removed from her and adopted. At that time she had been in a violent relationship, was suffering from depression and the child had shown serious developmental delay linked with brain damage, possibly as a result of non-accidental injury. It was therefore unclear whether this child had been abused but questions remained about her competence as a mother. Ms A had herself suffered poor mothering as a child, which included neglect and admission to care at the age of 12, and she was without any support from either her family or her foster mother. She and her new partner were both delighted about her pregnancy. The couple related well to me as their social worker and were therefore quite accepting of the decision to include the baby on the child protection register. The mother was open and co-operative and tended to use me as a therapist during my weekly visits after the birth of her baby. However, I noticed that she was often tired and lethargic and inclined to relate to her baby in a detached way. Both she and her partner were vulnerable and needy people who were socially isolated.

The therapeutic work consisted of exploring difficult and painful feelings and enabling Ms A to link these with her current situation and past events whilst also acknowledging her loving feelings towards the new baby. Her partner was sometimes included in this work and difficulties in their relationship were also explored. The casework offered to the couple was supportive and therapeutic and could well be described as 'psycho-social casework'. I was aware of being idealized by the mother and had to be careful that this did not cloud my judgement. The casework relationship that I developed with the parents enabled me to closely monitor the level of risk to the child and to give advice that was generally well received. I observed Ms A gradually becoming more confident and secure in her role as a mother and when the child was six months his name was removed from the child protection register. Support to the family from the social services department continued for a few more months.

This piece of work achieved a key objective of improving the parenting sufficiently so that the child's name could be removed from the register. However, it is unlikely that this relatively short period of casework help would have made a significant difference to the overall functioning of the family in the longer term. Ms A remained a vulnerable person and an anxious mother; the couple relationship was fragile and the family remained socially isolated. These factors obviously raised some concerns about the future

for the child. However, it was not thought that the risks to the child were serious enough to justify further involvement from the social services department and the case was closed. The parents were told to contact the department if they needed further support and I believe that their positive experience of casework made them more likely to seek any further help.

SECOND CASE EXAMPLE

Mrs B had found it hard to cope with her three children when they were small and received support and practical help from social workers over a number of years. She related warmly to her children but was of limited intelligence and her standards of care tended to deteriorate when she was under stress and depressed. Previous concerns about the children during their early years, suggesting possible physical abuse or neglect, had resulted in registration of the children over a five year period. Mrs B later became divorced and for eight years she coped well as a single parent with support from her extended family. The case had been closed by the social services department. She then met an unemployed, single man, Mr C, aged 35, when she was 40 and became pregnant and he moved in with her. After the birth of their son, Mr C regularly went out drinking and sometimes caused a violent scene on his return home, with the police becoming involved. During one of these domestic incidents the baby had suffered a minor injury. Mr C had a history of violent and aggressive behaviour in his youth and admitted that he had been feeling under a lot of stress. The children, aged 14, 12 and 10 and the baby, were placed on the child protection register.

Because Mrs B and Mr C were inclined to minimize their problems and insisted on continuing to live together I found it necessary to establish a working relationship based on control. The controls consisted of: unannounced home visits to monitor the situation, seeing the older children routinely on their own, holding regular core group meetings where action plans were agreed and reviewed, and drawing up a written agreement with the parents. I had to work with the resistance, the suspicion and hostility from the family without being deflected from my duty to protect the children, whilst also trying to demonstrate my understanding of everyone's difficulties. As a caseworker I was like a parent figure who sometimes had to take a stand, and show the family that violence was not acceptable and that the children would be protected, if necessary by legal proceedings.

After more than a year, during which further domestic incidents occurred involving the police, legal proceedings were instigated and supervision orders on all the children made by the court. During this period Mr C sought help from a psychiatrist and a counsellor for alcohol problems. He sometimes moved back to his parents after family arguments but after a reconciliation would return to the family and the situation would remain calm for a short period. During the three years that I was involved with this family I offered support to the family in practical ways, including material and financial help for the children, day nursery placement and assistance in claiming benefits. My controls and willingness to engage in the couple's struggles provided them with important feedback, reminding them of their responsibility to consider the needs of the children. The three older children were helped by the fact that I always listened to them, took their feelings seriously and was prepared to take action to protect them, if necessary. However, by the end of the court proceedings Mr C had moved out permanently.

On the surface this might be seen as a standard piece of child protection work, offering a package of services plus control. It was not exactly casework but the work was informed by casework principles. Mrs B and Mr C were often unco-operative and antagonistic toward me, particularly when I was unable to protect them from the interventions of the wider professional and agency system, which they experienced as blaming and attacking. Even when I gained their co-operation they still regarded me as unsupportive, mainly because they felt under pressure and were struggling to cope. They were sometimes deceitful and inclined to conceal things from me but they were not particularly cunning or calculating. The older children also seemed under stress and worried about their mother. They were intensely loyal to her and therefore shared her suspicious and negative attitude towards me.

A sound knowledge of casework sustained me in this piece of work and assisted me when the question of legal proceedings was being considered. This is a time when many social workers are under pressure and in danger of being overwhelmed by other people's perceptions. I had used the framework for assessing risk (Department of Health 1988) to carry out a comprehensive assessment. This was assisted by my in-depth knowledge of the whole family and its circumstances and my close involvement with the family over an extended period of time. As already stated, by the time supervision orders were obtained Mr C had

left the household but the existence of the orders strengthened the power of the department to act should the situation change

Mrs B sometimes turned to nursery staff for sympathy and support when she was anxious and depressed. Clearly, she felt pressurized by the department and did not look to me for support. There was no escaping the dilemma that, by putting her through the ordeal of going to court, the department was adding to the stress on her. However, it was felt that the longer-term benefits to the children justified this course of action

It is worth noting that during the court proceedings Mr C spoke positively of my work with the family. He had apparently found the assessment process useful in making him think about his strengths and weaknesses and his ability to cope with parental responsibilities. This had given him the opportunity to reflect on his feelings and to begin to act in a more considered way – a process which might be called therapeutic

THE PIVOTAL ROLE OF THE SOCIAL WORKER IN POST-REGISTRATION WORK

Research shows that after the child protection conference the social workers do the majority of the work (Farmer & Owen 1995). Although post-registration work involves a core group of professionals it is the social worker who is expected to act as the lead worker and co-ordinator of the child protection plan (Department of Health 1999). The social worker is often trying to help with very delicate and sensitive matters in the family while being aware that he or she, and the whole organization, would be liable to public scrutiny if things went wrong. While many of these social workers tend to be 'child-centred' or 'family-centred' in their concerns, their organizations are increasingly concerned with the world outside, being sensitive to political influence and media campaigns. In this climate it is remarkable that so many social workers find ways of negotiating with their organizations to achieve what they consider to be in the best interests of clients. The approach of these social workers often reflects humanistic values and pragmatic notions of what would help the child and the family.

THE INHERENT CONSTRAINTS WITHIN THE STATUTORY ROLE

The social worker may try to be a caseworker who tries to tackle problems of individual psychology and environmental deprivation but there are limits on

what can be achieved with clients who resist social work help, or at least are ambivalent about it. The defensiveness of parents and their reluctance to talk openly about problems may inhibit them from seeking help. Parents often fear that any signs of their not coping may be used by social workers as evidence against them.

Farmer & Owen (1995) described the difficulties that social workers face in meeting the needs of carers and found wide variations in practice. Obviously, the desirability of supporting carers is always secondary to ensuring the safety of children. Sheppard (2001) in his study of social work practice with depressed mothers talks of some social workers 'going the extra mile' in their casework relationships and giving more support than required by their departments. However, the social worker who gets into a supportive relationship with the mother should not attempt to treat the depression. If depression is identified as a problem a referral to a counsellor, or therapist, should be considered. This separation of therapy and casework is recommended, in order to prevent the social worker from getting over-identified with the mother and with her view of the family situation.

Many of the families being helped also have problems associated with poverty and poor living conditions. Social workers may work hard to provide services to meet financial and practical needs but this often seems an impossible task. Firstly, they have limited resources within their own departments and, secondly, any resources available are more likely to be focused on crisis-intervention and immediate needs. For those families suffering grinding poverty and hardship over a longer period there may be little the social worker can do to raise living standards significantly.

DISCUSSION OF CONTEMPORARY SOCIAL WORK PRACTICE

In recent years social services departments have been re-focusing services from child protection to family support. While the intentions are good in themselves the attempt to develop a needs-led approach has been associated with a loss of clarity and focus on child protection matters. This paper is not about the investigation of child abuse and neglect but suggests that 'the competence with which this stage is handled will crucially influence the effectiveness of subsequent work' (Department of Health 1988).

This discussion is about the next stage when the child has been registered on the child protection

register. Clearly, this work requires the highest possible standards of the social worker in terms of relationship skills and professional judgement. A structured, interagency approach with a clear focus on child protection is essential. The use of core groups for sharing information, planning and reviewing is considered good practice and Calder & Horwath's (1998) research into the use of core groups shows the benefits of this approach. The structured assessment framework (Department of Health 2000) may be useful to social workers in providing a framework for thinking about children's needs but it is proving difficult to use with parents whose children have been placed on the child protection register (Corby *et al.* 2002). This highlights the importance of social workers being able to use structure flexibly and creatively and making good professional judgements. However, academic studies into professional judgement are more often linked with notions of evidence-based practice than with understanding the social work processes involved in making judgements (Munro 1998).

Current trends to reduce social work to a technical and rational activity will inevitably fail unless the importance of the casework relationship in child protection is recognized. Casework puts the focus on the interpersonal dynamics of the relationship between the social worker and family. It attends to the emotional undercurrents of this relationship and ways the social worker can remain involved for the benefit of the child. Effective communication between the social worker and family is important but it requires more than the clear and honest exchange of information. There has to be some kind of emotional experience if both sides of the exchange are to understand each other and achieve the necessary changes.

The care management approach, gaining ground in child and family social work, is gradually transforming the role of the social worker into that of 'case manager', who has oversight of the work of others, coordinates the child care plan and maintains a certain distance from the family. There are now strong pressures on social workers to work with families in this more detached way, as privatization and specialization take hold. The professional style is often up-front and direct and the needs of the child are considered paramount. Inevitably, these social workers become more concerned with managing problems than with actively seeking out the views of clients and furthering their interests.

The present culture of managerialism is encouraging a growing interest in social work practice that is evidence-based. Managers often incorrectly presume

that casework is merely 'supportive' social work and therefore lacks the necessary academic rigour and research base. However, as this paper argues, casework in child protection work is both 'supportive' and 'controlling' and it operates within the legal system, where 'evidence' is scrutinized and challenged. Social workers also have to give an account of their work and their views to interagency conferences and reviews. Anecdotal evidence from social workers suggests that casework knowledge is often being ignored by managers wanting to retain their power and control over decision-making. There are also concerns that managerialism, with its top-down style of management and frequent restructuring, is seriously undermining social work values, particularly those associated with casework.

Social workers have onerous responsibilities in their work with children deemed to be at risk. They are concerned with building trust with families and pursuing casework goals which are modest and specific enough for managers to see when they have been achieved. Obviously, social workers perform better in a management culture which is supportive and where open discussion is encouraged. Social workers are poorly served by managers who are excessively defensive and afraid of taking risks.

WHY THE EMPHASIS ON THE CLIENT-WORKER RELATIONSHIP?

The essence of good social work is helping, not hindering, and bringing something human to the relationship. In my view family work involves relating to each individual member of the family in a personalized way. This is supported by Aldgate & Stratham's (2001) research into the workings of the Children Act 1989 which recognizes the importance of the personal relationship in work with children and families, 'in short the process of psycho-social casework' (p. 136).

Social workers need a coherent belief system about the meaning of their activities if they are to remain convinced that social work is a worthwhile activity. I suggest that the philosophical stance provided by casework remains as important as ever in giving meaning and purpose to their work.

HOW RADICAL IS CASEWORK?

The problem with any discussion about social work theory is the contradictions inherent within the social work role. Traditional social work values emphasized the personalized nature of the relationship between

the social worker and the individual receiving help. More recently newer social work values, such as empowerment, advocacy, and user involvement, have sharpened the focus on the needs and wishes of the individual. When I entered the profession about 30 years ago, social workers and their employing organizations took it for granted that they shared certain values, based on compassion and caring. Now, the values of many social services departments have changed so much it is increasingly difficult to identify a common set of values shared by social workers and their employing organizations. It now seems radical to insist on social work values being preserved in a more meaningful way.

On the other hand, social work cannot ignore fundamental problems at the heart of our society. Income inequality and poverty remains a serious issue but social services departments do not address issues of poverty and inequality in society. The organizations that employ social workers rarely mention poverty in statements about their purpose or the key tasks of social workers (Davis & Clark 1997). Social workers might address such problems for individual clients but they only work within the existing social and economic arrangements to access resources. Much social work is essentially about mediating between the most vulnerable people and the rest of society and accepting the status quo.

On a broader level, it must be recognized that it is in the interests of professionals to gloss over the potential for conflict in the client-worker relationship. Those in positions of power may choose to depict social work as simply a practical activity based on effective communication and clear goals. However, a class analysis suggests that there are enormous barriers to an authentic meeting between middle class professionals and clients of child protection services, who are most likely to be from the working class. Many working class parents regard social work as 'policing'. Middle class social workers need to understand how their well-intentioned efforts are perceived by working class clients and be more honest with themselves about what can be achieved across the barriers of class.

Finally, we cannot avoid the paradox that the social work process of helping in child protection is often experienced by parents as the opposite. In effect, the social worker is saying to parents: 'I understand that it is difficult for you, with your background, your lack of resources, stressful circumstances, etc. but you *must* control your anger, attend to your child's needs, respect sexual boundaries, act more responsibly, etc.'

WAYS FORWARD

The underlying aim of this paper is to encourage the development of casework skills so that social workers are more confident, less defensive, and more explicit about what they do. It aims to counter the over-reliance on procedures and forms – which prevent social workers from developing the capacity for independent thinking and intuitive reasoning.

Social workers doing long-term work with families should be familiar with the casework approach because it encourages a way of working that is less confrontational. They need the skills to incorporate elements of both care and control in their work and use their judgement with confidence as they move between these two positions, i.e. helping and supporting the family and protecting the children. Social work training courses should have a clearer focus on skills training and professional judgement.

Casework practice is only possible in an organizational culture that supports it. Managers therefore have a responsibility to develop supportive teams that are fully staffed and where morale is high. Supervision should be supportive and encourage a broader casework approach. There should be a culture of openness and a willingness to learn from experience.

CONCLUSION

There is a good deal of confusion about the nature of casework. This paper argues that casework is about the understanding of client-worker relationships and the process of psychological change, *together with* the identification of needs and the provision of hard services. It shows that casework offers important insights into the social work role and also provides a framework for combining supportive services with child protection.

Finally, in trying to make the case for social workers to reflect upon and question what they do a little more I do not want to give the impression that social workers can achieve everything on their own. The effectiveness of social workers is inevitably linked with the ability of agencies to meet the material needs of families who are struggling. There is plenty of evidence that many departments have a very restricted definition of need, have very limited resources, and that many children in need do not receive essential services. Casework is no substitute for essential services.

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