Social Work
Perceptions for a New Era

Edited by Helena Belchior Rocha

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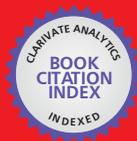
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Meet the editor

Prof. Dr. Helena Belchior Rocha has a Ph.D. in Social Work. She is a professor in the Department of Political Science and Public Policies, ISCTE-University Institute of Lisbon, Portugal, Deputy Director of the Soft Skill Lab, and Director of Transversal Skills Nucleus. She is also an integrated researcher at the Centre for Research and Studies in Sociology (CIES), linked to national and international research projects of the Marie Skłodowska-Curie Actions program. Her publications and research interests include public and social policies, ecological sustainability, well-being, ethics, and education. She is an expert at the UNESCO Policy Lab and the Dispute Resolution Lab, Complutense University of Madrid, Spain. Dr. Rocha is also a member of COST Action working groups.

Contents

Preface

In an era marked by rapid technological advancements, evolving societal norms, and unprecedented global challenges, the field of social work stands at a critical crossroads. *Social Work – Perceptions for a New Era* brings together diverse perspectives and innovative approaches to address the multifaceted dimensions of social work in the contemporary world. This book aims to illuminate the evolving landscape of social work, highlighting the critical role it plays in fostering resilience, promoting well-being, and advocating for justice.

The chapters within this book are authored by a distinguished group of scholars and practitioners from around the globe, each contributing their unique insights and experiences. From hybrid interventions that leverage virtual platforms to address the needs of marginalized groups to the integration of ecological consciousness in social policy, this compilation delves into a wide array of themes that reflect the dynamic and interdisciplinary nature of modern social work.

In Section 1, we explore "Innovative Interventions in Social Work", shedding light on how virtual tools and innovative practices can enhance service delivery and support for marginalized populations. Section 2 digs into "Health and Wellbeing (Post COVID-19)" emphasizing the importance of building health-centric life models and addressing the unique challenges posed by the COVID-19 pandemic.

As we progress to Section 3, "Technology and Social Work" becomes the focus, examining how information and communication technologies are reshaping child protection services and the broader social work landscape. Section 4 discusses "Educational Approaches in Social Work", highlighting the significance of intercultural awareness and integrity in social work education, plus the importance of embedding ecological perspectives in the curriculum.

Section 5 discusses "Leadership and Social Policy in Social Work", providing insights into the roles of social work leaders and the integration of eco-social work in education. Section 6, "Community Resilience and Humanitarian Efforts", underscores the importance of community rebuilding and the necessity of humanitarian actions in social work training.

Environmental concerns are addressed in Section 7, focusing on "Environmental and EcoSocial Work", which explores the impact of nature on wellbeing and the fascinating world of Lepidoptera. Finally, Section 8, "Community-Based Practices" highlights the renewal of social work practices through community-based approaches and the critical role of social workers in crisis intervention and prevention.

This book would not have been possible without the contributions of our esteemed authors, whose dedication to advancing the field of social work is evident in their

rigorous research and thoughtful reflections. We are also grateful to the numerous practitioners and scholars who continue to push the boundaries of social work, ensuring that it remains a lively and essential discipline.

As you journey through the chapters of this book, we invite you to reflect on the transformative potential of social work in creating a more just, equitable, and compassionate world. Whether you are a student, practitioner, educator, or policymaker, we hope this book serves as a valuable resource and inspires you to innovate, advocate, and lead in the ever-evolving realm of social work.

We extend our heartfelt gratitude to all the contributors and reviewers who have contributed to bringing this book to fruition. We give special thanks to our editorial team for their unwavering support and meticulous attention to detail. Lastly, we thank our readers for their interest and engagement with the critical issues presented in this volume.

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Section 1

Innovative Interventions in Social Work

Chapter 1

Hybrid Intervention Based on Virtual Intervention with Marginalized Organizations, Outcast Groups, and Professional Users of Technology

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Abstract

Technological developments have seriously affected all areas of life, including sciences and various professions, and social work has not been immune from these effects. Therefore, fundamental questions are raised, such as how social work has adapted to technological changes. How has this profession been able to enrich its field of knowledge, skills, and ethical standards in terms of extensive technological changes? Are social workers able to use technology-based services for their clients? Are all clients able to use technology-based services? Has technology increased or decreased the severity of social exclusion of clients? Therefore, to answer these questions, qualitative research was conducted using structured interviews with 15 social workers in various public, private, and charitable institutions in Tehran, who were identified through targeted sampling. After that, the findings were analyzed based on coding, and five main themes were extracted, which include virtual citizenship, virtual empowerment, smart client management, and virtual marginalization. The conducted research shows that social workers do not consider the use of technological tools as a fundamental right of the client and do not consider it among the client's basic needs.

Keywords: hybrid interventions, digital transformation, professional users of technology, marginalized groups, teamwork

1. Introduction

Social work is rooted in interaction with disadvantaged and marginalized groups, and one of its historical foundations has been the effort to increase the social inclusion of these groups [1]. The historical evolution of social work shows that this profession has constantly had an evolutionary route in responding to needs and problems ([2], p. 105). Through the years, the target population of this profession has

accelerated and turned out to be more diverse. In other words, social work considers a part of its scientific identity dependent on its dynamic and well-timed response to societal changes ([3], p. 19). But has the profession been capable of responding to the technological advances that affect human being's lives each day? Has technology become one of the fundamental issues in this field? Evidence indicates shows that technology-based intervention in social work has failed to engage any of these three groups effectively: (1) disadvantaged groups unfamiliar with technology, (2) groups living in faraway regions and unable to access are not technology-savvy, and (3) groups that have access to technology and use technology skillfully. Some of these inefficiencies are rooted in insufficient social worker knowledge and skills, and others are partially due to professional inattention to the impact of technology on the social worker's target populations. For instance, the development of technology-based services, such as various health platforms, for the first and second groups is unsuitable due to the lack of access to these services.

In contrast, the third group faces many health facilities and digital support, services whose designers are not necessarily social workers, and a range of software engineers, industrial engineers, etc. Such a situation exacerbates inequality and deprives disadvantaged groups of a significant portion of services. It also alienates the third group from social work services because technology professionals have ruled this group by surpassing social workers. This case can be a warning for social workers and revive the old query of whether social work is a science that keeps its foundations within the historical evolution of humankind. Based on this, it seems that social work has come to recognize its conventional techniques and interventions and flow toward technology-primarily based hybrid services and empower its goal network in this location.

2. Statement of the problem

The development of technology has affected all aspects of life and has had positive and negative consequences on human life. In this chapter, we are not looking for the positive effects of technology in social work. Still, by adopting a critical approach, we seek to understand the negative consequences of technology on the target population of social work. We begin the discussion with a set of fundamental questions: Is technology development from the most basic type, which includes the phone and smartphones and the mass production of applications, equally available to all people? Are all social work target populations literate in the use of technology? As food, clothing, housing, etc., are considered basic needs, social workers in various governmental, charitable, and private institutions seek to provide needs for their deprived clients. Are tools such as tablets, laptops, etc. among clients' basic needs? A fact that became more apparent during the outbreak of coronavirus showed how many students were left out of education due to online teaching and lack of access to it. And another question: just as "citizenship" has become a criterion for the efforts and realization of people's social, civil, and political rights, has the concept of "virtual citizenship" also been able to find its place? Finally, the question is, what do social workers do with a part of their target population who are professional users of technology, users who do not evaluate social work services as appropriate for them? Does this group also experience another aspect of deprivation? Because it seems that according to the development of technology, all people include two aspects of citizenship: real citizenship and virtual citizenship.

Most significantly, we review the competencies and professional qualifications of social workers. Have the courses related to technology literacy and acquiring skills in this field become one of the primary syllabi in social work? Is it necessary to form a trend called digital social work? The lived experience of working with disadvantaged groups shows that technology itself has created a new area of problems and increased social inequality. At times, it seems to have made the face of poverty more objective. As an example of a student who does not have a smartphone in class, his poverty is apparent, unlike in the past when poverty may have a hidden layer.

On the other hand, field observations display that social workers do not consider the right to technology as an inherent right of the client. Consequently, it's feared that their interventions will be ineffective and one-dimensional. Accordingly, this research tried to investigate the aspects of technology that neglect has disrupted social work services in a qualitative and exploratory manner.

3. Research method

A qualitative research of thematic analysis type using semi-structured interviews was conducted in 2023 in Tehran (Iran). The sample population consisted of 15 social workers from support and service organizations who were selected through purposive sampling, and interviews with them continued until theoretical saturation was reached. The interview criteria included more than 5 years of experience working with underprivileged groups and providing support services to clients, experience in social work during the coronavirus epidemic, experience working with clients who use technology professionally, and at least a bachelor's degree in social work. After the

Grade	Age	Position	Interviewee
MSW	25	Child and family welfare social worker	Social Worker1
BSW	24	Psychiatric Social Work	Social Worker2
MSW	26	Child and family welfare social worker	Social Worker3
BSW	39	Psychiatric Social Work	Social Worker4
BSW	27	Child and family welfare social worker	Social Worker5
MSW	25	Social worker of female heads of household	Social Worker6
BSW	23	Social worker of female heads of household	Social Worker7
BSW	25	Social worker of female heads of household	Social Worker8
BSW	22	Social worker of female heads of household	Social Worker9
MSW	27	Substance Abuse Social Worker	Social Worker10
Ph.D.	26	Substance Abuse Social Worker	Social Worker11
BSW	24	Substance Abuse Social Worker	Social Worker12
BSW	43	Psychiatric Social Work	Social Worker13
BSW	45	Substance Abuse Social Worker	Social Worker14
BSW	42	Child and family welfare social worker	Social Worker14

Table 1.
Demographic characteristics of the sample population.

Category	Theme	Row
The right to media literacy	Virtual Citizenship	1
The right to access virtual networks		
The right to access technology tools		
Sensitizing clients to technology	Virtual empowerment	2
Making clients aware of technology		
Action based on technology		
Demanding		
Hybrid technology-based interventions	Smart client management	3
Virtual and non-virtual assessment		
Virtual and non-virtual interventions		
Virtual and virtual follow-ups		
Delay in professional competency		
Denial of access to technology tools	Virtual marginalization	4
Ignorance in technology policy		

Table 2.
Extraction of themes and categories.

interviews, the information was analyzed by coding, and themes and categories were extracted. **Table 1** presents the demographic characteristics of the sample population ([4], p. 31).

4. Findings

According to the data analysis, four main themes, including virtual citizenship, virtual empowerment, smart client management, and virtual marginalization, were extracted, which are given in **Table 2** and are discussed in detail below.

5. Analysis of the first theme

5.1 The first theme: virtual citizenship

The development of technology has led to the formation of a new concept called "virtual citizenship," A type of citizenship that gives every person the right to benefit from technological achievements. This concept has dimensions such as the right to media literacy, the right to access virtual networks, and the right to access technology tools ([5], p. 63). Some social workers stated in the interviews that their clients cannot use their facilities due to illiteracy. As an example, social worker Code 1 said:

> *"During the outbreak of the coronavirus and the non-attendance of schools, the number of children not attending school increased, especially children who were in primary school, and this increase had two main reasons: not having a smartphone*

and the illiteracy of parents in using applications designed by education and breeding."

On the other hand, the social worker of code 7 stated: "Educational planners and the government did not consider the diversity of the population during the Corona period. For example, we had children whose parents were drug addicts. When the child was required to attend the class virtually because they used drugs to sleep or did not have the necessary behavioral stability, they could not continuously benefit from education.

In this context, social worker Code 5 stated: "One of the problems we have with women heads of households is that we teach them various skills such as small production, but they are not able to use digital markets, and their products are not sold." On the other hand, when we get help from a technology expert, the cost is high, or they take advantage of our ignorance."

5.2 The second theme is virtual empowerment

The development of technology and a multitude of innovations has brought one of the primary services of social work as "empowerment" under the radius in such a way that the new concept of "virtual empowerment" can be introduced with four categories: sensitization of clients to technology, awareness of clients To technology, act based on technology and demand. In the interviews with social workers, it seemed that they still focused on the classic and traditional concept of empowerment. As an example of school literacy, training in technical-professional skills in conventional and limited digital marketing was vital for them, and the cultural category of empowerment focusing on technology was not a priority. This shows that technology has not yet become a prominent area and concern in social work.

The interviews showed that no social workers consider technology a fundamental right as a leading service and do not act in the direction of awareness and sensitizing in this area. As an example, social worker Code 9 states:

> *"We have never taught this skill to our children or other clients who do not know how to use the phone because we thought it was not our duty, and to be honest, we did not think about it at all." We were." Social worker Code 11 said:*

> *"We only realized during the coronavirus period that the Internet and phones are important because our children were facing a lot of problems, and because of this, during the coronavirus period, our demand for phones increased, but now the Corona is over and Even if we apply, our managers will not agree because they believe that the applicants have more fundamental problems such as lack of food, housing, health, etc."*

The findings show that the use of technology is still not considered an essential and fundamental welfare right, and social workers, especially in working with disadvantaged groups, focus on five basic welfare needs: housing, health, classical education, insurance, and employment. Also, the findings show that some social workers cannot empower their clients and teach them how to use it properly due to a lack of media literacy, so they cannot provide services to their clients who use technology professionally. As an example, social worker Code 15 said:

"Currently, among the problems of our teenagers, especially teenage girls, is that they dangerously use the Internet and networks; for example, they become friends with those whom they sexually abuse, but we are not able to help them because the power of friends Their virtuality is more than ours, on the other hand, they have so much information that sometimes I can't figure it out myself... The new generation is different from us."

5.3 The third theme: Smart client management

Technology has brought one of the main parts of social work, that is, planning and intervention, under the spotlight. In such a way, we are facing a new concept, such as "smart customer management." This theme has five main categories: hybrid technology-based interventions, virtual and non-virtual assessment, virtual and non-virtual interventions, virtual and non-virtual follow-ups, and delay in professional competence. The findings show that social workers in the service process consider traditional formats dominant over modern and technology-based forms. As an example, social worker Code 13 said:

"In my opinion, clients should participate in face-to-face meetings, and online and telephone services are not very effective, and the client does not get the desired result."

Social worker Code 8 said:

"I close the case when the client does not answer my phone calls or attend meetings. I do not accept sending messages on networks such as WhatsApp and Telegram for follow-up because it makes the professional relationship informal."

Social worker Code 4 said:

"I didn't have a course on technology in social work at all in the university, and I'm only familiar with the traditional methods of social work. I don't even know what the codes and ethical responsibilities have changed regarding technology, and I think universities should train social work students in this field. introduce."

5.4 The fourth theme: virtual marginalization

The findings show that technology provides the basis for marginalizing a group of service recipients, so we found a new "virtual marginalization" theme in the data analysis. This theme has two main categories under the title of denial of access to technology tools and neglect in technology policy. As an example, Social worker Code 5 states:

"During the Corona period, I realized that the planners and policymakers did not see the diversity of the population in welfare and social planning; for example, during the Corona period, disadvantaged students were not seen at all, and the programs and actions were focused on the middle and upper-class students of the society, and this shows that a unified view It doesn't exist, and sometimes the programs themselves cause the spread of discrimination and injustice."

Social worker Code 10 said:

> *"When Corona came, the society was in chaos, and this shows that at the governance level, policies are not based on future research. I think even for them, technology was not taken so seriously. On the other hand, I am worried that the importance of using the technology that has increased tremendously during the Corona period will continue without regard for the disadvantaged and marginalized groups, and this will increase social exclusion and exclusion because all services may be based on technology, while I believe a hybrid view. There must be."*

6. Conclusions

The conducted research shows that social workers do not consider the use of technological tools as a fundamental right of the client and do not consider it among the client's basic needs. Therefore, this criterion is ignored in the social work process, including evaluation, planning, and development of support plans. On the other hand, social workers stated that if a client asks for a mobile phone, tablet, etc., this is a "want" and not a "need," other issues have priority, which means technology tools and how to use them. It is not considered part of the essential goods and needs of the client. Therefore, social work interventions have failed to reduce poverty caused by the development of technology.

In a more precise language, it can be said that technology and its weakness in social work can be discussed in a four-factor system. The client, social worker, support organizations, and government are four factors. Exploratory findings show that the lack of literacy in the use of technology can be seen both in the social work community and in the client system. On the other hand, government policymakers, especially in developing countries, do not take into account the diversity of the population, especially the deprived and illiterate population or those living in remote areas, in the design of technological tools and applications, as an example, currently in Iran electronic systems design, it has happened that some clients do not have access to them due to lack of literacy. Therefore, they are forced to seek help from others, which violates the code of ethics of "confidentiality" in social work and sometimes causes negative feelings such as disclosure of information and shame. It serves the recipient and increases the client's dependence on the surrounding people. Another critical issue is that technology is based on the Internet. If the Internet network is interrupted, there will be a general disruption in the process of providing services, especially in countries where the Internet and access to virtual networks may be filtered and overshadowed by political issues and social issues a more precise language, it can be said that the development of technology has tied social work to political and social matters more than ever before and has put new and significant challenges in front of them.

Also, the findings indicate that Newcomers enter the field of social work and provide services in this field without having professional qualifications. These people are the same software engineers, industrial engineers, and other technology experts who, by producing different applications, diverse sites, and expanding virtual networks focusing on health services and social services in some areas, have surpassed even social work. It is feared that with the entry of non-professionals, the fundamental values of social work, such as service, social justice, professional competence, and honesty, will be damaged. For these people, profiting and winning the competition is a priority to essential values such as service and first commitment to the client. The conducted research makes it necessary to design a model of combined interventions

in social work, and before that, it requires social workers to use a "technology-based approach." If social workers do not look at their profession and services through the lens of innovation, including technology-based innovations, this profession will lose its dynamism. It can even be argued that the new wave in social work is the wave of technology and its achievements that will change everyone's life. Has affected and created a new form of discrimination, deprivation, and injustice. Therefore, along with other modern concerns such as the environment, it is necessary to give this critical priority, and social workers, with a commitment to the roots of the profession, which is one of the essential cases of depriving themselves, put virtual marginalized people in the text of their interventions and virtual inclusion. This is important when the virtual citizenship of clients is accepted as a fundamental right in social work, and by using combined interventions, the list of basic needs of the client is added, such as the right to media literacy, access to technology, increasing technological abilities, and the like.

Combined interventions mean using "technology-based" and "traditional methods" together. This type of intervention has two aspects; it includes both the social worker and the client. On the one hand, social workers need to use new approaches and not rely solely on traditional methods of service because technology has created a range of facilities, needs, and problems that lack attention and cause professional delays. For example, providing services is no longer limited to face-to-face meetings, and social workers must understand the importance of offline and online services. On the other hand, social workers cannot limit their assessments, interventions, and follow-ups to the real world and tangible tools because this limitation is considered a severe obstacle to developing the boundaries of knowledge and skills in social work. On the other hand, technology returns to clients. For example, social workers should consider these essential questions in their initial client evaluations: Can the client use a smartphone? Does the client have a smartphone? Where does the client live? Does he have access to the Internet? What kind of services does the client prefer, face-to-face counseling? Online counseling? On-phone consultancy? Advice by Email.

Since the development of information technology will increasingly offer new goods and services to society in virtual networks, information circulation, etc., the last one or two decades should be considered the first encounters of social workers with modern technology products. More diverse and complex products than the current phones and tablets will soon enter our lives, so social work should prepare itself for more profound and decisive contact with new technologies and their positive and negative consequences. Therefore, the design and implementation of experimental research in this field will become more necessary.

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Chapter 2

Perspective Chapter: Transcending Resistance of Innovation in Traditional Social Work Settings

Jerry Parker Jr.

Abstract

This chapter explores the challenges and opportunities for innovation in traditional social work settings, emphasizing the changing landscape, importance of embracing new approaches, and expanding roles beyond traditional boundaries. It discusses accepting intersectional identities, being self-aware, reflective, trauma-informed, culturally humble, and knowledgeable about factors impacting clients' lives. Additionally, it highlights the significance of diversity in the field and the potential for social workers with different backgrounds to contribute to social activism. The abstract also mentions the Grand Challenges for Social Work initiatives, addressing pressing social issues through collaborative efforts. It touches upon innovative applications of social work, including collaboration with engineers, consulting with the entertainment industry, and providing support in emerging industries like marijuana farming and societal programming through media outlets, emphasizing the integration of intuition and spirituality with traditional logic for decision-making and problem-solving. In conclusion, the chapter advocates for a centralized and self-sufficient social work profession serving as the backbone of organizational connection, leveraging unique skills and traditions, embracing uncommon backgrounds, and building stronger networks for sustainability, social awareness, and justified incredulity enlightened by the power of love.

Keywords: innovation in social work, changing landscape of social work, intersectional identities, trauma-informed social work, cultural humility in social work, diversity in social work, Grand Challenges for Social Work, collaborative social activism, innovative applications of social work, centralized social work profession

1. Introduction

Our professional identity as social workers are essential to the work that we do ourselves because it informs us of the nature of intimacy, we have with the grand challenges that we choose to serve. According to recent statistics, there are currently 255,843 social workers employed in the United States [1]. Many social workers are women, accounting for 80.5% of the workforce, while men make up only 19.5%. On average, social workers are 44 years old. The ethnic breakdown of social workers is as follows: White (58.5%), Black or African American (19.9%), Hispanic or

Latino (12.3%), and Unknown (5.4%). The highest demand for social workers is in New York, NY. In terms of the highest-paying industry, the government sector ranks the highest for social workers. It is also notable that 13% of all social workers identify as LGBT. These statistics may, to some, correspond with a reflection of the effects of historical white supremacy in America, while others may correlate them to the proportional numbers in the population. No matter the holder of resistance to innovation due to racial bigotry or natural causes, our profession has become legitimized by medicine and psychiatry. Researchers have identified the medical and psychiatry model as a crittical factor in legitmizing social work as a profession. According to a recent study, social workers in the early twentieth century aligned themselves with the medical model, emphasizing the importance of scientific knowledge and professionalization [2]. This close association with the medical field helped medical professionals recognize the value of social work in addressing patients' social and emotional needs. This resulted in the establishment of social work as a legitimate profession, paving the way for future collaborations between social workers and medical professionals. Today, in the twenty-first century, our identities as social workers cannot define everything that we do because social workers collectively, as individuals, work in any sector. We are composed of specialists and generalists. Today, more than ever, we have served marginalized populations but only now are we learning that non-profit industries are not the only solution for sustainable infrastructure in social activism. We have embraced corporate, government, and small businesses as social ventures. Now there are consultants, coaches, social entrepreneurs, social responsibility directors, philanthropist, case managers, and more. The Grand Challenges for Social Work is an initiative that was launched by the American Academy of Social Work and Social Welfare in 2016 to address the most pressing social issues of our time [3]. Those 12 Grand Challenges identified are to: Ensure healthy development for all youth, Close the health gap, Stop family violence, Advance long and productive lives, Eradicate social isolation, End homelessness, Create social responses to a changing environment, Harness technology for social good, Promote smart decarceration, Reduce extreme economic inequality, Build financial capability for all, Achieve equal opportunity and justice Each of these challenges has significant implications for the social work profession and requires innovative and multidisciplinary approaches to address them [3]. The initiative aims to inspire social workers, researchers, policymakers, and other stakeholders to work collaboratively to address these challenges and improve social and economic well-being for individuals, families, and communities. A collective impact can be made by only the absolute acceptance of individuals that have not been "typically" represented whether that is by ethnicity, race, skill, or talent. I might go as far as to say, that the social work profession can be the infrastructure for all professions if it became more centralized, self-sufficient, and legitimate by being the backbone of organizational connection to all the other agencies by providing communication, support, measurement systems, capacity building, and more rather than relying on clinical backgrounds for diplomacy as a recognized profession. The empowerment of people with different skills sets, from multiple backgrounds, and networks utilized as social workers in addition to being accredited would not only increase the number of social workers, but it would expand social work in every one element of our economy leveraging accountability of our entire capitalistic geocentric paradigm. The innovation that is required on a rudimentary level for those social workers are:

1. Acceptance of others and yourself as a social worker with intersectional identities

2. Being self-aware and situationally aware

3. Reflective of self and analytical

4. Knowing your traumas and being sensitive to others with compassion

5. Reading the room (Micro), reading culture (Mezzo) and reading policy (Macro)

The acceptance of self as a social worker with intersectional identities is a critical aspect of social work practice. Being self-aware and reflective of one's identity, including experiences of oppression, privilege, and intersectionality, is necessary to establish a therapeutic alliance with clients [4]. Self-awareness can also promote greater cultural humility, as social workers who are aware of their own biases and limitations can be more open to learning from diverse clients and communities [4]. In addition to being reflective of self, social workers should also be knowledgeable about their own traumas and be sensitive to the potential impact of those traumas on their work with clients [5]. Trauma-informed care is a growing area of social work practice, and social workers who are aware of their own traumas can better understand the experiences of clients who have also experienced trauma [5]. Reading the room, culture, and policy/ societal rules at the micro, mezzo, and macro levels is also critical for social workers. At the micro level, social workers should be able to read the room and understand the interpersonal dynamics that may affect client interactions [6]. At the mezzo level, social workers should be able to read the culture of the community or organization in which they work. Finally, at the macro level, social workers should be able to read policy and societal rules to understand how they impact their clients' lives and how to advocate for systemic change. Taken together, the acceptance of self as a social worker with intersectional identities involves being self-aware, reflective, trauma-informed, culturally humble, and knowledgeable about the interpersonal, cultural, and systemic factors that impact clients' lives. By cultivating these skills, social workers can establish stronger therapeutic alliances with clients, better understand their clients' experiences, and advocate for systemic change to promote social and economic justice. Being situationally aware of the dynamics that are fostered in those around you can give you insight into the problems and justifications of reasons of thought through specificity.

2. Being different and uncomfortable must be embraced confidently with humility in social work

As the field of social work continues to evolve, social workers are finding new and innovative ways to apply their skills and knowledge in a wide range of settings. Some examples of these innovative applications of social work include working with engineers to develop more socially responsible technologies, consulting with Hollywood productions to promote accurate depictions of social issues and providing support to employees on marijuana farms. In the field of engineering, social workers can work with engineers to develop more socially responsible technologies. For example, social workers can work with engineers to develop technologies that are more accessible to people with disabilities, or that are more environmentally sustainable [7]. In Hollywood, social workers can consult with production teams to ensure that social issues are accurately depicted in films and television shows. For example, social workers can provide input on storylines that involve mental health or addiction and can

help to ensure that these issues are portrayed in a way that is both accurate and educational [8]. In the emerging marijuana industry, social workers can provide support to employees on marijuana farms combatting the misuse of the law as well as advocating for efficient yet safe regulations in production. This can involve helping employees to navigate the complex legal and supervisory landscape of the industry, as well as providing counseling and support for issues such as workplace stress and burnout [9]. Awareness and education through evaluation rather pre-test or post-test on products, business flow, or revising budgets through discretion are just several of the faculties that social workers can navigate. Despite the differences between these examples, they all share a common thread: a commitment to applying social work principles and values in innovative and impactful ways. Whether working with engineers, Hollywood producers, or employees on marijuana farms, social workers are using their expertise to make a positive difference in people's lives through coordinated responses that also build their communities around the social problems that may exist locally around the organization or agency. The examples that were used here are to express that social workers can work as consultants or coaches in any career sector. They are trained to learn, research, and implement strategies for the success and sustainability in any region with ethics that resemble integrity, service, and humility with dignity. Since we are systems and strengths focused, it is imaginable that a field such as social worker being fluid and abundant has not yet been fully framed in context of the possibilities that can get produced willfully in Spirit, by an educated and creative social work force.

3. Intuition and spirituality

Logic (traditional, what you know, standard linear ways of doing it) and Wisdom (application in intimate way that reflects uncommon ways to understanding truths that resonate on a emotion-spiritual way then marrying the two together to make an evidence based empathetic response that his more holistic based than following solely based statistical linear correlated and casual doctrines of utility. Bigger than hunch, more collective conscious oriented and comprehensive to applied knowledge. Abstractions of logic used with extra sensory perception is coined by me as transcendent logic. In management-oriented outcomes, the integration of intuition and spirituality can lead to a more holistic approach in decision-making and problem-solving. This approach involves combining traditional logic and knowledge with wisdom gained from uncommon ways of understanding truths that resonate on an emotional and spiritual level. By merging these two approaches, social workers can create an evidence-based, empathetic response that is more comprehensive and reflects a meta-psychological status. This approach is not limited to following solely based statistical linear correlated and casual doctrines of utility, but rather a more collective conscious oriented approach. Transcendent logic, which involves using abstractions of logic with extra sensory perception, can help to broaden perspectives and lead to more creative and innovative solutions. For example, in social work management, the use of transcendent logic can help in developing more effective programs and interventions for clients. Sadler-Smith and Shefy conducted an investigation to examine the impact of intuition on executive decision-making. The analysis, which was published in The Academy of Management Executive, focused on examining and applying gut feelings in the decision-making process. The authors illustrated the importance of intuition in executive applications setting up emphasis on how it influences decision-making processes [10]. Sinclair and Ashkanasy executed a study in the field of Management Learning to explore the idea of intuition and how it works

in decision-making [11]. The research conducted stimulated an examination of whether intuition should be regarded as a simple myth or an invaluable tool in decision-making processes. In the view of Sinclair and Ashkanasy, it is important to recognize and examine the role of intuition in management learning, rather than disregarding it. Montero and Evans conducted a study that explored the intricate connection between intuition and concepts in the larger context of decision-making [12]. The research, which was published in Phenomenology and the Cognitive Sciences, examines the potential consequences associated with relying solely on intuition in decision-making processes. It indicates decision-makers may be at risk of forfeiting the game if they are lacking an adequate foundation of relevant concepts or frameworks. The significance of combining both intuition and conceptual thinking has been highlighted in this study. Dörfler and Ackermann made significant contributions to the analysis of miscommunication in complex, multiiteam systems [13]. The research inquiry, which was published in the Journal of Applied Communication Research, utilized a multimodal investigation method to gain observations regarding the difficulties associated with successful communication. The study conducted by Dörfler and Ackermann provided the intricate details of communication segments and their possible ramifications. Gobet discussed the significance of perception and its connection to concepts in his commentary. Gobet's emphasis in Phenomenology and the Cognitive Sciences is on the potential challenges of concepts that lack intuition, as they may ultimately result in suboptimal outcomes. According to Gobet, the commentary emphasized the value of discovering an acceptable balance between analytical thinking and intuitive processes when making decisions [14]. Hoffrage and Marewski performed a study on the analysis and facilitation of intuition in the process of decision-making. The study which was published in the Journal of Applied Research in Memory and Cognition, sought to uncover the basic principles behind intuition. It conducted provided valuable insights into the modeling and guidance of intuition to enhance decision-making [15]. The research investigation conducted by Okoli and Watt focused on examining the degree to which intuitive and analytical strategies intersect in the overall context of crisis decision-making [16]. The research, that was published in Management Decision, emphasized the significance of incorporating both intuitive and analytical approaches when navigating crisis situations. According to the research it is essential for understanding the synergy of these strategies with the intention to make reliable choices.

As a social worker who believes in the Word of God through Yeshua Hamashiach (John 3:16, "God so loved the world that he gave his only begotten Son, that whosoever believeth in him should not perish but have everlasting life") and utilizes factual evidence-based research, I find it rewarding that life has provided principalities of hope beyond the empirical existence of history (Holy Bible, KJV). Ultimately, the integration of soul transcendence in spiritual humility utilized with traditional logic can lead to more effective management strategies in social work. By not being confined by problems that were created in finite terms yet can be solved by taking a more holistic approach, social workers can make better-informed decisions that not only address the immediate concerns of their clients but also consider their long-term well-being and psychological status by accepting creation through the lens of the creator's complete yielding of what's on the surface to a more cognizant plan of resonation called love. My experience in the collective healing process has involved a resilient attitude, active listening, attention to detail, ability to read a room, kindness, creativity, long patience, hope, understanding, empathy, and analytical thinking. It is not a requirement for a social worker to be an eclectic however they must strive to coexist with those that are eclecticist with empathy and professionalism because as a collective consciousness their combined mission is to serve goodness. Many elements of light are not of darkness however many complex events that are associated

with darkness can get exposed by the light. For example, Light and darkness can be comprehended in terms of the existence or non-existence of visible electromagnetic radiation. Light is composed of photons, which are independent components of electromagnetic energy. The process of perceiving an object involves the emission or reflection of light from the object, which then enters our eyes. Darkness, conversely, is an effect of the absence of visible light. From a scientific perspective, darkness can be characterized by the absence of photons. The statement "Many elements of the light are not of darkness" concludes that light can exist separately from darkness. The use of light, particularly as a source of illumination, is commonly employed as a metaphor to represent knowledge, comprehension, or lucidity. The statement suggests that the presence of light can bring to light or make evident various intricate events or situations that are typically associated with darkness. This metaphorical interpretation implies that light has the power to reveal hidden truths or complexities. Light plays a crucial role in our perception of the physical world as it interacts with matter and enables us to gather visual information. The presence of light enables us to perceive objects and events with clarity. The phrase "Many elements of light are not of darkness" implies that light and darkness are separate entities. Light is not synonymous with darkness, but rather a distinct force that enables us to perceive our environment. The phrase "Many complex events associated with darkness can get exposed by the light" can be interpreted metaphorically in the context of knowledge or understanding. It suggests that acquiring knowledge or insight has the potential to reveal and clarify intricate or concealed elements within situations or events. The metaphor uses "darkness" to symbolize ignorance, lack of awareness, or confusion, while "light" represents knowledge or understanding that can illuminate and clarify complex matters. This concept can be analyzed in different scientific fields, including psychology, neuroscience, and education. These fields examine how the process of acquiring knowledge and understanding can shed light on complex aspects of human behavior, cognition, and learning.

As the world changes, the field of social work is necessitating a reexamination of traditional practices and the adoption of innovative approaches to unyielding grand challenges. The incorporation of intuition and spirituality is an essential component to be taken into account in order to attain a holistic approach to decision-making and problem-solving. The aforementioned approach surpasses standard linear reasoning and embraces knowledge derived from non-traditional sources. The technique known as transcendent logic integrates conventional knowledge with insights derived from emotional and spiritual comprehension. The use of this approach may be beneficial for fostering heightened levels of creativity and innovation, as well as facilitating the development of comprehensive, evidence-driven, and empathic interventions across many domains, such as the realm of social work. This chapter explores the challenges and opportunities faced by social workers in traditional settings and highlights the importance of transcending resistance to reform. By embracing new ideas and expanding their roles, social workers can better address the complex social issues of our time and make a meaningful impact on individuals, families, and communities. God is always the same and Love has never changed.

3.1 Evolving demographics in social work

To understand the context in which social work operates, it is crucial to examine the evolving demographics of the profession. As mentioned earlier, the majority of social workers in the United States are women, accounting for 80.5% of the workforce. However, there is still work to be done to ensure diversity and representation within the profession. Efforts must be made to encourage and support individuals from

underrepresented groups to enter and thrive in the field of social work. Additionally, the changing demographics of the population being served also present unique challenges and opportunities. The growing recognition of the importance of cultural competence and intersectionality in social work practice necessitates an ongoing commitment to self-awareness, reflective practice, and cultural humility. Social workers must continually strive to understand and address the diverse needs and experiences of their clients, which can only be achieved through an open and innovative mindset. Inclusivity Is vital to teaching and learning understanding of information that can get applied for the formation of evidence, intervention, and application of the law. Language is essential to guiding the apprenticeship of communication. Limited communication is essential for self-reflection yet invasive beyond reach to those that attempt foolish commodities. The fruit of language is in understanding the complexity of origin.

3.2 Expanding roles and settings

Traditionally, social work has been associated with nonprofit organizations and direct practice in areas such as child welfare, mental health, and community development. However, the field has evolved to encompass a much broader range of settings and roles. Today, social workers can be found in corporate environments, government agencies, educational institutions, research organizations, and even entrepreneurial ventures. This expansion of roles and settings presents both challenges and opportunities for social workers. On one hand, it allows for a greater reach and community coordinated impact, as social workers can address social issues from multiple angles and collaborate with professionals from diverse disciplines. On the other hand, it requires social workers to adapt to different organizational cultures, navigate unfamiliar contexts, and develop new skillsets while building upon traditional methods that face evaluation through practice.

3.3 The grand challenges for social work

The Grand Challenges for Social Work initiative, launched by the American Academy of Social Work and Social Welfare, identifies the most pressing social issues of our time, and calls for innovative and multidisciplinary approaches to address them. These challenges, which include promoting equal opportunity and justice, ending homelessness, and advancing long and productive lives, serve as a roadmap for social workers to drive meaningful change in society. The Grand Challenges initiative highlights the need for social workers to transcend resistance to innovation and embrace new strategies, technologies, and partnerships to avoid stagnation whilst pestilence is at play. By leveraging their expertise and collaborating with professionals from diverse fields, social workers can develop innovative solutions and achieve greater social and economic well-being for individuals, families, and communities by functioning at a reasonable level of change formation.

4. Embracing innovation in social work practice

4.1 Rethinking professional identity

To effectively embrace improvement, social workers must first examine their professional identity. While the medical and psychiatric models have historically influenced the profession's legitimacy, it is essential to recognize that social work is not

limited to clinical practice and must get viewed as fractal. The diverse roles and settings in which social workers operate require a broadened understanding of the profession's scope and potential while striving for consistency in measure by its ethics. By embracing a more expansive professional identity, social workers can position themselves as integral stakeholders in various sectors and representatives to stoicism. Social workers have the unique ability to connect different agencies, provide communication and support, establish measurement systems, and build capacity across organizations but not without grit to the effective demeanor of the personification of the essential measure to trustworthiness to their clients. This shift toward a centralized, bold, and honestly self-sufficient profession can strengthen social work's influence and impact, ultimately advancing social justice and well-being for those untamed by the truth.

4.2 The power of different perspectives

Innovation in social work is not solely dependent on the adoption of new technologies or practices but the willingness to apprehend gut responses to igniting satisfactory outcomes. It also requires the inclusion of diverse perspectives and experiences, knowing exactly how the narrative of any inscription may affect others and not just the alignment of the story but the application of its authority. Social workers with different backgrounds, skill sets, and networks bring fresh insights and creative approaches to addressing social issues with the expertise and discernment they may hold. It is crucial to recognize and value the contributions of individuals who may not fit the traditional mold of a social worker. By embracing professionals with knowledge basis, talents, skills, specializations, contextual knowledge from various disciplines leaders such as consultants, coaches, social entrepreneurs, and innovators, social work can tap into a broader range of proficiency and resources regardless of expertise. This diversity of perspectives can foster innovation, challenge conventional wisdom, and lead to more comprehensive and effective solutions to complex social problems by simply being salient.

4.3 Integrating intuition and spiritual in social work

In addition to embracing diverse perspectives, social workers can enhance their original capacity by integrating instinct and spirituality into their practice. This approach involves combining traditional logic, biblically spiritual comprehension, knowledge with wisdom gained from uncommon ways of understanding truths that resonate on an emotional and spiritual level for those that apply it with love. Transcendent logic, which involves using abstractions of logic with extra sensory perception, can broaden perspectives and lead to more creative and groundbreaking solutions beyond the principle of empiricism [17]. By incorporating sensitivity and spirituality into decision-making and problem-solving processes, social workers can tap into immersed levels of capacity building in addition to understanding of applied empathy with its rewards. This holistic approach goes beyond purely statistical and linear thinking, offering a more comprehensive and empathetic response to the needs of clients and communities that require systems of support only through the lens of love.

5. Conclusion

The field of social work is undergoing significant changes to the nature of its scope. To truly embrace the opportunities presented by these changes, social workers

must reexamine their professional identity, expand their roles and settings, and cultivate a mindset of openness and adaptability holistically as a multifaceted being of practice. By doing so, they can become agents of positive change in addressing the complex social issues of our time. The evolving demographics of the profession call for a commitment to cultural humility, diversity, and equity. The expansion of roles and settings offers social workers the chance to collaborate with professionals from different fields and make a broader impact while exercising their own unique backgrounds. It is important to recognize and value the contributions of individuals with diverse experiences and perspectives, as they bring fresh insights and new approaches to social work systems. Likewise, embracing intuition and spirituality can lead to a more universally empathetic approach in decision-making and problem-solving. By integrating transcendent logic, which combines traditional logic with extra sensory perception, social workers can tap into deeper levels of understanding and wisdom. This approach goes beyond purely statistical and linear thinking, allowing for innovative solutions to intricate social problems. In this newfound era of social complicity, social workers have the power to be at the forefront of optimistic change by walking by faith. The embracement of new ideas, fostering of diversity, and multiplicity of integrating spirituality into practice, social workers can be a more effective profession at its roots of servitude. Through collaboration, commitment, and encouragement of social, emotional, spiritual well-being, social workers can truly make a meaningful impact on the global network of communities as a unified profession whose legacy is love.

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Chapter 3

Perspective Chapter: Interventional Base for Social Work Profession – Methods, Practices, Roles, and Approaches

Iranna Ronad

Abstract

This chapter provides a comprehensive understanding about social work intervention and emphasizes the importance, types, theories, approaches, and processes of social work interventions. Generally, individuals, groups, and communities require intervention by professional social workers. Practitioners and social workers working at different levels are committed to providing professional services (social work services) and enhancing the capacity of their clients through social work intervention, where social workers play significant and improved roles, and relevant and appropriate techniques to deal with their clients. Timely and appropriate intervention not only ensures the solving of the problems of the client but also brings positive growth and development. Socio-economic, political, and ecological phenomena have brought new challenges and problems that cause under-development at the global level. Certain situations and circumstances emphasize the importance of social work intervention [SWI]. Effective social work interventions made by professional social workers can bring positive outcomes and solutions. This chapter also advocates how social workers provide appropriate social work intervention or social work services skillfully to individuals, groups, organizations, and communities. It also seeks new areas where social workers can test the interventional methods and skills.

Keywords: social work intervention, methods, process, roles, practices, perspectives

1. Introduction

There is a diversity of life in this world. It includes animals, birds, plants, and many biological components, including human beings. As sages and saints say, where there is life, there is fear and problems. Problems do not come with non-living things, e.g. stones [Abiotic components]. Problems are common to everyone. But some of them have complexity in nature, while others may be simple. Man faces problems in social relations while living in society. Similarly, he is facing problems of physical, psychological, economic, social, political, and educational types. The development of human society can take place only when all these problems are successfully solved.

Social work is an applied science and an important discipline of study. Social work may be defined as the applied science of helping people achieve an effective level of psychological functioning [1]. The social work profession aims to intervene at the point where people meet their environment, which requires social workers to have an understanding of the operations and complexities of working with and within these different systems, Barbara Theatre [2]. Social work around the world has its own historical steps. In India, especially, it is closely associated with social service, charity, and social movements, and since the twentieth century it has taken a number of steps and developed its own conceptual framework, but the contribution of many social workers, volunteers, and leaders cannot be ruled out. Even though the duality between service-welfare-development and social work still exists in contemporary society, these have remained as functions of professional social work. Throughout the history of Indian society, social work has expanded its horizons in the form of social service and social welfare. In those days, it was considered as welfare work. However, it has not received a formal status or professional status. Sir Dorabji Tata from the Graduate School of Social Work, established in Mumbai in 1936, wrote a milestone in the history of professional social work education. Today, in the twenty-first century, it is moving from informality to formality and professionalism. Space for professional social workers has received more demand and status globally than ever.

In the present context, social work is being practiced at various fields and levels, from the domestic to international level, such as families, schools, industries, hospitals and nursing homes, old age homes, adoption centers, counseling centers, remand homes, courts, prisons, military, government agencies/departments, other voluntary organizations, and humanitarian/charitable organizations. The basic aim and focus of social work is the welfare of people. The research writer's objective in this chapter is to analyze the mediating bases and facts of the social work profession and present them to the reader community analytically.

2. Social workers

The twenty-first century has invited various arenas as we are moving toward our dreams and imaginary lives. Life is not the same for everyone. For some, it is easy and for some, it is very difficult. While I conducted the interview with the mass of social work students, amazingly, I found the meaning and concept of life and problems, i.e. what is life? and the perspective on the problems they have. There were different answers to these questions. This implies that social workers must become "mini" legal experts, "mini" educators, "mini" social engineers, "mini" managers, "mini" psychotherapists, or all of the above Staub Bernasconi [3].

We are always thinking about ourselves, but not about other people. This leads us to selfishness. In fact, there is no place for selfishness in social work because we social workers are less selfish people. Social workers are human engineers, social engineers, and change agents. We are making remarkable footprints toward the welfare of the world. For us, our client is very important. We are working for vulnerable groups, women and children, youth and youth offenders, child laborers, bonded laborers, individuals with disabilities and the list goes on….. Isn't it amazing? Whatever it is, the main aim of social work practitioners is to achieve humane welfare.

While for the welfare and development of a nation, social workers are responsible for removing stressful problems in society; they are directly and indirectly involved in this process. Various departments of the government and various human welfare

organizations engaged in the process of achieving the interests of individuals, groups, and communities are hiring social workers for their work. Here they provide conditional institutional and non-institutional services to the specified category. It is a very challenging task to measure and weigh the social dynamics intensively and to upgrade their skills and techniques accordingly. Maintaining equality amidst social dichotomies, because in today's time when globalization, privatization, industrialization, and culturalization are taking place, our workplaces are seeking innovations.

3. Roles and responsibilities of professional social workers analyzed

Social workers bring about differences in the lives of people from individuals, families, and communities. They help them to live their lives more useful and successfully. They work with them in support, cooperation, and partnership to find suitable solutions to the problems that exist in the lives of the people. Those who have a degree in social work at the postgraduate level are eligible for various positions in the social work profession. Apart from these, there are diploma and degree courses in social work. However, postgraduate social work develops holistic knowledge, values, theories, methods, and techniques. Fieldwork, research, block placement, and internship are part of the social work education system. In most of the developed countries, social workers need a license to pursue their profession by entering the social work profession along with their graduation. Social workers have significant roles to play. In most countries, they play multiple roles according to the problems and situations of their particular client. Here clients may be considered as individuals, groups, families, and communities. The roles and responsibilities of social workers vary according to the problems and situations of their clients. Which role has to play? It is decided by the problem and situation. Through roles and responsibilities, social workers will try to give justice to their clients. Roles are very important for social workers. Through roles, they are able to enjoy the duties assigned in social work. Roles indicate the particular functions/duties to be performed. The responsibilities of social workers are to uphold the dignity and status of the social work profession.

Table 1 provides a comprehensive understanding of the roles and responsibilities of social workers in general and specific settings. Group A indicates the general roles of social workers, Group B indicates the specific areas of social work, and Group C indicates the specific roles related to specific settings/areas.

4. Meaning and concept of intervention in social work

The term mediation or intervention is a very popular term commonly used by people in social life. It is the belief of all of us, the masses, that many obstacles, difficulties, or problems can be resolved through mediation, or the atmosphere of crisis can be defused, or a temporary solution can be desired. However the mediation of social work with a different perspective has gained its importance among social workers. Generally, professional social workers adopt, apply, or use the knowledge, understanding, art, skills, and professional values they have acquired. As we all know, social situations and problems are not so simple. They are always complex in nature. As a result, they have a negative impact on them and the family and social situation around them. According to a dictionary, it is the act or fact of coming or occurring between two people or times. According to the Collins dictionary, intervention is the act of intervening in a situation. The synonymous words for intervention are mediation and involvement. The word

(A) General roles	(B) Specific settings/areas	(C) Specific roles/responsibilities
Facilitator	Community development rural/urban/tribal	Community organizer/facilitator/educator/broker/enabler/community counseling/project coordinator/training officer/recourse mobilization/M&E officer/lobbyist/cluster manager/catalyst/peacemaker
Broker	School social work	School social worker/school counselor/caseworker/group worker
Counselor	Health/mental health/public health	Medical social worker/clinical social worker/case manager/therapist/psychological counseling
Educator	Health/mental health/public health	Psychiatric social worker/psychologist/case manager/clinical social worker/therapist/psychological counseling
Manager	Health/mental health/disaster management/disability social work	Rehabilitation officer/social worker/psychological counseling/grief counseling
Coordinator	De-addiction and substance abuse	Addiction counselor/teacher/social worker/case manager/group worker/psychological counseling
Case management/ assessment	Geriatric social work	Counselor/coordinator/teacher/rehabilitation services/case worker
Mediator	Correctional setting/criminal justice	Probation officer/parole officer/counselor/adviser/legal advice/case manager/social worker/psychological counseling/ rehabilitation services
Supervisor	Social development/ developmental social work	Coordinator/training officer/project officer/project management/M&E officer
Enabler	Sustainable development	Developing alternative socio-economic models/application of ecological social work
Developmentalist	Immigration social work/migrant population refugee	Access to education, accommodation, and health care services/employee assistance/advocate/career development programs/legal assistance/mental health
Researcher	Child welfare/child care	Project officer/child welfare officer/coordinator/counselor/teacher/CDPO/case manager/social worker
Advocate	Feminist social work practice/ women development/domestic violence	Women centered approaches/welfare officer/counselor/supervisor/group worker/case worker
Guide	Youth welfare/youth development	Youth welfare officer/counselor/youth development officer/facilitator/guider/organizer/educator/peacemaker
Negotiator	Family social work	Family counseling/HIV/marriage counselor

(A) General roles	(B) Specific settings/areas	(C) Specific roles/responsibilities
Planner	Military social work	Army social worker/counselor/crisis intervention
Organizer	Radical social work	Education and advocacy/anti oppressiveness/empathy/democracy
Catalyst	Occupational social work	Counselor/supervisor/organizer/facilitator/advocate/mediator/monitoring and evaluator/teacher
Lobbyist	Modern social work/advanced social work	Consultant/case management/community organization/psychological counseling/application of research and technologies
Promoter	Cultural social work	Multiculturalism/acceptance and promotion of culture/culture sensitivity/respect for cultural diversity
Guider	Human rights	Advocacy/protection and promotion of human rights/prevent discrimination/educator/formulating policy/addressing inequality and injustice
Analyzer	Disaster management	Risk management/assessment/prevention & mitigation/emergency planning/rehabilitation/preparedness/policy development/crisis intervention/psychological counseling
Recourse mobilizer	Gender-based social work	Promote gender equality/educator/protection of rights/enabler/training and capacity building/gender sensitivity
Change agent	Critical social work/social justice	To address social injustices, racism, and social exclusion/social democracy/crisis intervention
Caseworker	Disability social work	Disability social worker/facilitator/career guidance and support/rehabilitation/psychological counseling
Group worker	Green social work/ecological social work	Environment justice/developing alternative models/building awareness/environment-friendly policy making/protection and promotion of environment/people centric approaches/organizer/educator/recourse mobilization/negotiator/advocate/conflict management/evidence-based practices
Para-social worker	Clinical social work	Clinical social worker/case manager/therapist/psychological counseling/assessment and evaluation/diagnosis
Consultant	Public relation/corporate social work/CSR activities	Public relation officer/corporate social worker/fund riser
Administrator	Policy planning and development	Policymaker/researcher/adviser/monitoring and evaluation/executing the programs/social impact/analyzer
Collaborator	International social work (ISW)	Addressing international issues/assisting refugees/combating hunger/gender discrimination/organizing and advising
Leader/team leader	Industrial setting	General manager/HR manager/labor welfare officer/facilitator/counselor/arbitrator/conflict management/grievances officer/conciliation officer
Volunteer	Financial social work	Financial well-being and stability/micro level and macro level of practices/asset building/income generation activities/financial security
Expert	Perinatal social work	Perinatal social worker/research

Table 1.
General roles, specific areas, and specific roles.

'intervention' is derived from the Latin word "intervenire" which means "come between" or "interrupt". Intervention in social work refers to purposeful and pre-planned systematic actions. These measures can focus on our clients, i.e. individuals, families, and communities with the desired changes. These are subject to the direction of professional social workers. As we all know, the problems and needs of our clients in social work are different, and the fulfillment of these is paramount in social work. Social work interventions are ways in which the individual, family, community, and society have found ways to solve problems and shape change. These are aimed at making the lives of individual family communities better and simpler than ever. Problems are common in social relationships. According to H.H. Perlmans' social work perspective, "Problems are Unmet Needs." So, when our needs are not met, they remain the same and those needs grow as problems [4]. Problems arise when a person fails to meet the arising needs and necessities or when there is a delay in meeting them in a timely manner. Social workers should always consider these according to the problems and needs of the clients and their own abilities when following social work interventions.

Assessment is an important stage in social work. Assessing means preparing a plan of help for the clients based on their collected information, and measuring comprehensive information about him or her. This will help clients to successfully tackle their problems, build a self-reliant life, and live in their environment with confidence. One of the later stages of the process is to provide treatment in accordance with the problems of the client, in which the interventions that can be applied and the steps that can be taken are combined and the prerequisite results can emerge as already mentioned.

5. Why are intervention strategies needed?

One way is for people to adjust to the environment or situation in solving their problems, while the other is to bring about a change in attitudes. The client makes their own life decisions or choices and becomes the charioteers of their own lives. Self-determination gives strength to their lives. The social worker can achieve this by encouraging the participation of the client throughout the process. Mediation strategies in this regard provide continuous encouragement and support in many ways to the client.

6. Basic elements

Writer *Angy* indicates these eight elements of social work intervention in his article "Ultimate social work intervention strategies".

1. Measuring the needs and capabilities of clients.

2. Creating appropriate interventions.

3. Adoption of strategies.

4. Supporting our clients in critical times.

5. Monitoring progress.

6. Evaluation of outcomes.

7. Collaborating with professionals.

8. Upholding ethical standards.

7. Goal

Social workers try to solve problems in the lives of clients [individuals, groups, families, and communities] by applying mediating methods, techniques, and skills and bringing about changes in the environment in which they live. They are willing to get them out of the problematic situation and help them for their strong growth. In the intervention of social work, one of the best ways in which social workers have found it is to engage with the systems of their clients (problematic). It is necessary to prepare suitable plans for the positive development of the client through the mediation of social work interventions. The goal is to make the client's life better by utilizing effective methods and techniques related to intervention, and finding effective intervention channels.

8. Methods

The writer and researcher Jeremy Sutton, suggests five important methods for social work intervention in his article "Social work methods and intervention for helping others".

1. Care management.

2. Strength-based and solution-focused approaches.

3. Narrative social work.

4. Group work.

5. Task-centered approaches.

Writer Angy refers to the *eight* best social work interventions.

1. Counseling.

2. Crisis intervention.

3. Case management.

4. Community organization.

5. Advocacy.

6. Life-story work.

7. Active listening.

8. Miracle questions.

9. Levels

Social work covers a wide range of areas of work. Just as it is not possible to hold the whole water of the sea in the palm of your hand... Similarly, it is impossible to explain the fields of social work. However, new areas of work are being discovered. New areas are seeking relief, welfare, and development work from social work. As the fields of work expand, the roles of social workers are also changing accordingly. Social workers work at different levels to achieve their goals in social work. These are divided based on the scale of the problems according to the clients. Social workers are committed to doing justice to their clients in order to discharge their responsibilities to the fullest. These practices are used to provide different services to different people using systems.

1. Micro level [it indicates smaller in size]

2. Mezzo level [it indicates medium in size]

3. Macro level [it often refers to that larger in size]

10. Significance

Social work interventions have been formulated to address the needs of the socially marginalized and disadvantaged sections of society. These are designed to bring about change and power in individuals, groups, and communities. As a result, they will be able to bring about a positive change in the lives of clients. Sometimes it is very important to adjust to their environment. Through interventional methods, social workers can bring positive changes to clients as well as their environment.

11. Practices, processes, and approaches

Globally, employed professional social workers have the theories, approaches, and understanding of intervention of social work and are working on applying them in their field. The goal of social workers is the welfare and development of human society. These developed social work profession theories, principles, values, and path visions and interventions are the fruits of the tireless hard work, demonstration, and experience of social work educators, social work scientists, scholars, and working professional social workers globally, as well as social work people with vast work experience and knowledge of expertise in the field. Theoretical ideas and classical theories form the foundation of the profession of social work. These have demand-driven programs that serve people or individuals according to their needs, for the satisfaction of needs. A theory is an organized set of assumptions, beliefs, or ideas about particular phenomena in the world. The theory is synonymous with hypothesis, presumption, speculation, belief, idea, and philosophy and is used to help explain or predict situations, actions, and consequences [2]. Basically, social work intervention is at three levels: micro level, mezzo level macro level. The macro level aims to provide social services to the socially marginalized and in demand, to the community, through intervention, and to bring about change and development in the environment in which they live. Professional social workers must develop different understandings of interfering with the environment in which people

live. One must have an awareness of the concepts, theories, ethics, and values of these different systems and the ingenuity to operate in the midst of these complexities. Social work intervention is most valuable when social work intervention comes together as part of an alliance between social workers and service users, such as counseling and therapy.

Social workers must maintain openness and transparency throughout the process, being able to provide supportive bases for appropriate decisions taken by social workers. A deeper understanding of the theories and the knowledge underlying or contained in the selected models is required. This will enable them to explain to their clients why these paths are appropriate and effective.

1. The effectiveness and success of interventions depend on the knowledge and understanding of working social workers.

2. Opting for appropriate methods and strategies.

3. Openness and lack of proper knowledge.

4. Consent interventions vs. asymmetric interventions.

The evaluation is first carried out by the social worker in order to formulate an intervention plan. There are specific ways of helping the client in society. Social workers need to formulate effective intervention plans and have a proper understanding and knowledge about them and strategies that can be used. Trying to understand the client from a different perspective and providing them with different services, e.g. social and mental.

12. Conclusion

Today, hundreds of interventions are in use in social work as a result of numerous research and experiments. But there is a difference in their effectiveness. Although the number of controlled trials on social work interventions is increasing, only a few interventions, based on research, have a high degree of certainty. It is difficult to know how and in what way these interventions will support the desired person for help [5]. Only specific interventions based on quality research and theories support the person in help. In the practice of social work, incomplete knowledge and unscientific practices of ideology can have an adverse effect on our cliental system i.e., individuals, groups, communities, and society. In this direction, professional social workers should emphasize the learning of research-based and practice-based formulated theories when working in their field of work, and attention should be paid to the positive and negative consequences that come from them.

13. Critical analysis based on the present chapter

1. Social work is applied knowledge formed by law, political science, economics, sociology, psychology, philosophy, education, and other social sciences. So its perspectives, ideologies, and principles help shape people's lives at different levels. The learning of social workers in social work is continuous, and it helps in innovation and application in practice.

2. As social workers understand their clients from different perspectives and formulate interventions, the complexity of clients' problems in social work and the difficulty and impact of inappropriate situations motivate social workers to learn scientific, innovative, and transformational theories. The reproduction of suitable parameters is also important here so that social workers can provide appropriate justice and solutions for their people.

3. The fact is, social workers should abandon their personal beliefs, assumptions, and vision-based practices in the profession.

14. Opportunities for future research

1. In today's context of globalization, privatization, industrialization, modernization, and culturalization, various crises are emerging on a large scale in relationships and society. One of the needs and imperatives of the future is to delineate the conditions for their mitigation, designing modern, supported, evidence-based, multifaceted interventions.

2. The field of social work is expanding quickly in the coming years. Due to the issues and challenges that are surfacing in several spheres of society, there is a great need for social work intervention.

15. Possible future work and recommendations for the next chapter

1. In the present chapter, the research writer reviews what methods, practices, and roles should be used to apply to current situations faced by consumers in social work. In the next chapter, it is appropriate for researchers to study new theories and policies and formulate new approaches, keeping in mind those situations, problems, and people that are changing.

2. Interventions should not have a neutral stance in any case; they should always be dynamic and more flexible.

3. The goal of social work intervention is to focus on individuals concerned with collective intervention leading to social intervention.

4. To formulate ethical practices, guidelines, and attitudes that are most appropriate for the profession, social workers, and their clients.

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Section 2

Health and Wellbeing
(Post COVID-19)

Chapter 4

Building Healthy Life Models Centered on Human and Democratic Values in a Changing Society

Jorge Manuel Ferreira

Abstract

This chapter presents an essay based on social research, professional and personal experience on the major issues facing contemporary society, ranging from quality of life, healthy living, the family, and the harmonization of social and human relations from a collective perspective. The structuring points I mention are human and democratic values from the humanist perspective of life in society; some concerns about healthy models: opportunities, challenges, and uncertainties. We end with some questions for reflection on a new balance in the social model of life in society. We are reinforcing the deepening of collective participation and the co-creation of societal models that promote greater social inclusion, quality of life and social well-being.

Keywords: democracy, healthy models, changing society, social work, values

1. Introduction

In this chapter we reflect on democratic values from the perspective of contemporary society and their impact on healthy living models. We begin with an analysis of democracy and citizenship centered on opportunities that promote social equality and inequality, establishing relationships between traditional and emerging social groups in this globalized society.

We analyze family policy and its relationship with social citizenship, as a societal model centered on people rather than capital. We reflect on the contradictions and paradoxes that bias the practical impacts on the lives of citizens and families motivated by financial interests and not based on social welfare. We reflect on processes of social inclusion and insertion through the most vulnerable groups with an evolving trend in global society.

We develop a dialectical reflection between the social protection system and the welfare state, rescuing inclusion policies at local and decentralized level and reinforcing the Botton Up model, giving voice to the silent groups in society who live precarious lives. We reinforce social and economic intervention as well as territorialized

politics, accepting the diversity of territories and resident populations with mutual respect for cultures of origin.

We end with a proposal for social work as an area of knowledge in the social sciences, based on human rights and essentially on the democratic principles and values of a society in which no one is left behind.

The chapter draws conclusions but leaves the reader with an invitation to reflect on democracy and social and human development.

2. Democracy and citizenship

The economic crisis, the deficit, unemployment, the poverty rate, competitiveness, and unequal access to opportunities produce social inequalities in a population group characterized by fewer resources (known as vulnerable communities or territories that generate insecurity) [1], promoting unemployment, social exclusion, and conditioning democratic construction in some contemporary societies. Examples: TROIKA's intervention in Portugal from 2008 to 2014; the Covid-19 pandemic; the Ukraine-Russia war; natural disasters (Lebanon's situation; Morocco's earthquake) and climate change around the world.

The definition of uncertainty is associated with crises, events, changes, in turn created by political, economic, cultural, and social dimensions and is used as "an expression of threat, danger and as an element that jeopardizes the effort and the permanent search for security and balance of citizens and social groups" ([2], p. 27). Promoting employment, improving living conditions and adequate social protection are the means to achieve the common goal of the European Union and the Member States to combat poverty, social exclusion, and situations of greater vulnerability in the daily lives of individuals and families. We are living in a period of history that appeals to us and challenges us daily to strengthen human rights, democratic values and principles and individual and collective social and human development. People, young people, must be enabled/empowered and supported in the different life cycles as free, competent, and supportive citizens [3].

In this sense, the Open Method of Coordination (OMC) also adopted by Portugal for the social protection system seeks to analyze, in a social dimension, indicators that make it possible to assess situations of poverty, social exclusion and social vulnerability, proposing social integration through the promotion of employment and the adequacy of incomes adjusted to the cost of living. We are referring to the Europe 2020 objectives of smart, sustainable, and inclusive growth, which through guidelines to its Member States have sought greater social investment and monitoring of phenomena that require greater attention to visualize the risks of macroeconomic imbalances [4]. We highlight citizenship education aimed at co-building "awareness of political structures, processes and content and, above all, helping people to recognize their own individual role in the political system and to reflect on their own political socialization" ([3], p. 2). Educational methods need to be further developed to raise general political awareness for an open society among all citizens.

According to the national report (Portugal) on the implementation of the 2030 Agenda for Sustainable Development (July 2017/UN), that is, "the new UN 2030 Agenda is a plan of action centered on people, planet, prosperity, peace and partnerships (5Ps), with the ultimate goal of poverty eradication and sustainable development, in which all states and other stakeholders assume their own responsibilities regarding its implementation and emphasizing that no one should be left behind" (p. 2).

This analytical reflection on the construction of democracy in a contemporary society allows us to identify some elements that block or condition this democratic construction in a way that is equitable and accessible to any citizen. These elements have an endogenous (local) identity in the specific community, but they also have an exogenous (global) identity. By placing equal opportunities for participation, citizenship, and collective solidarity at the forefront of democratic thinking, it puts pressure on people, organizations and professional teams, which has a counterproductive effect [3]. We are currently witnessing very significant developments that threaten democracy and in which both authoritarian politicians or parties and anti-democratic extremist groups are professionalizing themselves to misuse and recruit young people for their own.

While at a global level we have identified macroeconomic elements more related to the market economy, at a local level these elements are related to political power, the orientation of public policies, diverse cultural matrices, the dominant religious matrix within a diverse religious thought and, currently, the imbalance of demographic rates in some of the countries where Portugal is integrated is of great importance. These factors condition or limit the true construction of the rule of law and the understanding of new governance structures in social protection, multi-level governance networks and inter-institutional and community collaboration [5–9].

This process requires a relationship of collaboration and cooperation between the state, civil society and the private business sector, adopting the principle defined by the EU: Peace, Security and Good Governance. The set of principles defined aims to combat inequalities, in particular the promotion of gender equality. They represent a commitment to maximizing the synergies of the different social actors. The issue of decentralization from central to local power requires a change in the way public and social policies are thought out, which makes it difficult to build consensus at a political, economic, social and professional level, but highlights the positive effects of the local, as specific strategies that contribute to involving and making citizens and local institutions co-responsible in a permanent process of participatory democracy: an opportunity or an uncertainty?

Even today, democracy is a concept susceptible to different interpretations and readings according to the political, social, cultural, and religious system of each community. If for some it is interpreted as the law of the market and capitalist domination [10], for others it means the conquest of human rights and representative society. According to the latter interpretation, the institutions of local power are changing their paradigm from hierarchical (top-down) governance to horizontal governance, enforcing the principle of representative and participatory democracy. Currently in Portugal we are seeing an effort being made in this participatory citizen process, namely: participatory budgets in town halls, participatory budgets in secondary schools managed and participated in by students (the Ministry of Education allocates one euro per student to each school and the total amount is applied to actions defined and approved by the students).

Democracy, or rather the co-construction of democracy in contemporary society, must be based on the dimension of the person, not the individual, as an autonomous subject capable of participating or being empowered, in a participatory dimension, and not just as the beneficiary of public and social policies or the charitable actions of civil society.

Another value of democracy is based on the humanist current, which seeks to respond to the cultural uniqueness of each citizen and, consequently, to the emancipation of each culture in a context of cultural and ethnic diversity, albeit very much conditioned by the democratic model implemented in each community/country. The

diversity of social, local, residential and cultural contexts in people's lives challenges social inclusion based on citizenship values as a way of affirming humanitarian values in real contexts [11]. "The promotion of citizenship in contexts of diversity is now a reality of contemporary society, which places culture, customs, art and the individual and collective thinking of kinship groups or community relations at the Centre of the social question." ([12], p. 4).

If we reflect on the concept of Civil Society, a privileged space for democratic action, it is important to return to Gramsci's thinking in this regard:

> *Civil society—interpreted as the set of organizations commonly called private [...] and which correspond to the hegemonic function that the dominant group exercises throughout society [13]. Gramsci states that his reflection had led him to certain characteristics of the concept of the state, which is generally understood as political society (or dictatorship or apparatus of coercion) [...] and not as a balance between political society and civil society (or the hegemony of a social group over the whole of national society), exercised through organisms that we usually consider private, such as the Church, trade unions, schools, etc. Let's try today to make a dialectical reflection between the author's thinking and today's social, political, economic, and cultural reality.*

In reference to another author of history, Portelli [14], considers in Civil Society: three complementary dimensions: ideology of the ruling class, encompassing all branches of ideology, from art to science, through economics, law, etc. .a conception of the world disseminated among all social groups, to which the elite class adapts to all groups; hence its different qualitative degrees: philosophy, religion, common sense, folklore, and the ideological direction of society, articulated on three essential levels: ideology itself, the ideological "structure", the organizations that create and disseminate ideology, the material ", the technical instruments for disseminating ideology (school system, media, libraries, etc.).

More recently, we can mention the contributions of Ipea [15], on Civil Society, stating that the most influential interpretations of civil society carry the ink of the normative stylization of a virtuous civil society that produces democratizing effects on a political, cultural, and economic level. Civil society is far more heterogeneous than the theoretical formulations of the "euphoria" period would lead us to believe, and for this reason—rather than being unified by common commitments and values—it is permeated by divergences and conflicts and has characteristics that can generate positive or negative effects. Civil society or the group of actors qualified to be part of it in each context has taken on institutionally recognized roles—by national governments and multilateral institutions—in designing, monitoring, and implementing public policies and aid programmers, as well as representing diverse audiences and diffuse interests.

Simionatto [16], also reflects on civil society, organizing it into three concepts:

The first liberal-democratic conception of civil society (based above all on Cohen and Arato), which replaces categories and concepts related to structure and superstructure with subjective arguments related to the dynamics of the "world of life", which to a large extent exhausted the understanding of civil society as a space for political struggle beyond the conquests of citizenship rights. This perspective is close to liberal formulations in which civil society is situated as an autonomous instance, a space for the articulation of individualities, crossed by class neutrality (with tendencies derived from M. Walzer, C. Taylor, A. Wolfe, J. Keane, and E. Gellner, among others). Participation is recognized as a methodological innovation to give greater commitment

and legitimacy to the actions of a wide range of social actors, including NGOs, local, national, and international governments, community organizations and informal social networks [17], the private sector, trade unions and various organized groups.

The third concept he distinguishes is the Gramscian one, in which the concept of civil society is a design tool. This movement implies the creation of strategic alliances between the labor movement and social movements, with a view to broadening the emancipatory horizon, raising the point of view of the subaltern groups to the maximum of universality, the synthesis of which is the "national-popular collective will".

The concept of Civil Society is seen as a good one, as it promotes values of solidarity, non-violence, conflict resolution and is based on the principles of freedom, equality, and tolerance. However, today we have societies that are: insecure, violent, precarious, vulnerable, terrorist, or what we might call Uncivil Societies, since they produce contrary principles and values.

We can illustrate this reflection through the mostly "authoritarian" process of public policies, both national and European, aimed at the poorest classes in society without allowing them to participate in the same process, which allows us to question how the democratic consultation of the person as a citizen in society and in their singularity has been carried out? "The genesis of democracy is not always democratic" ([18], p. 62).

Today, in democracies that are so universally recognized, we see differences in the relationship of belonging to the community in which we live and to society in general, in which cultural values take precedence over moral values and in a more individualistic matrix in which we can say that the predominant cultural identity has nothing to do with moral integrity, founded on human rights. This includes immigrants, refugees, victims of war, natural disasters, minorities, and ethnic groups. This leads us to a question: how can we develop democratic humanist values when confronted with dominant cultural consciousnesses that transform the feeling of vulnerability into expressions of power and social intimacy? [19].

For Beji, "human beings find themselves enslaved by a democracy that suffocates them through the speed and power of its organs of dissemination and is silent in the face of the intensity of cultural archaisms, experienced as resistance by people who keep their humanity alive and testify to a faith in themselves that has lost its democraticity" ([20], p. 73).

Democracy cannot only be implemented by and with the People, it must also be implemented by and with the State, and by Civil Society, as a framework for the security and protection of citizens in the world. Sometimes there is some ambiguity in the intermediate institutions and professional practices in response to the social needs of the population, confusing democracy with mechanisms for alternating power and democracy as a political culture based on the principles and values of citizenship as a fundamental element in guaranteeing equality and respect for individual freedoms and minorities. The degree to which democracy is realized in society depends very much on the human and social conditions of society that are offered to citizens today. This is why we consider it pertinent to include the UN's Sustainable Development Goals in the critical thinking of Social Work.

3. Family policy & social citizenship

Family policies are now a matter of social, economic, and political debate in contemporary society, and are permeable to changes in society and ways of life, as Wall

et al. [21] pointed out. The diversity of families and household forms has changed, but so have the expectations created by people in their relationships with others (for example, easy access to luxury goods and consequently new debts). Policies to protect against (or "maintain") poverty are not enough; we need policies that strengthen people's and families' skills and value them as ordinary people and citizens of any society. The family structure has changed a lot, we have new marital identities (fewer marriages), a late departure from the parental home for a life of our own; we postpone parenthood and compete daily for a well-paid job. We also have more divorces, more out-of-wedlock births and, above all, fewer children (reduced birth rate), which also contributes to the decline in family households and productive adult actors.

Families have different configurations, ranging from the most classic, which reproduce the traditional model (mother, father, children), to the most complex levels in defining the configuration of today's family group [22]. The composition of the family today goes far beyond biological and legal factors, making aspects of subjectivity important in family configuration and demanding greater legitimacy and acceptance by society and the legal-normative instruments of the national state and the European Union in a more comprehensive and equitable way.

Progressively, the family is being valued as a producer of well-being and as a recipient of welfare policies and measures. In the twenty-first century, the issue of distributive and redistributive social justice is gaining importance, and not just as a problem of gender equality in family tasks and responsibilities. "(…). The solutions must be to seek the development of a new welfare society in synergy with an institutional welfare state that offers a safety net in which individuals and families can be citizens/subjects of a network of assistance and care services. Social policy interventions must be centered on the family (Malta Conference)".

The promotion of citizenship builds a balance between people's individual needs and the needs of social justice, with the aim of maximizing individual well-being. According to Mozzicafredo, "the political foundation of citizenship rests primarily on the relationship between the principles of individual freedom and those of social justice" ([23], p. 194). According to Marshall et al. [24], citizenship is based on a progression of civil, political, and social rights that are fulfilled by the state through social programmers. Civil rights are necessary to guarantee the subject/citizen's freedom of public intervention in society. Social rights are a subset of rights to well-being, income for social integration, the right to participate and to live civilized lives according to the standards of an organized society. For the author, the expansion of citizenship rights develops through conflict within civil society and through an empowerment approach. The change brought about by the empowerment process can be understood in three ways: as a conflict between those who control the division of power and resources, those who are marginalized and deprived in this process and the role of the professional, which consists of preparing disempowered citizens to demand a fairer division of resources and to advocate for a more participatory and intervening role in society. Social citizenship is based on the principles of equality, participation, social responsibility, and social diversity [25]. Social citizenship requires that the citizen/subject, as well as being a person who lives in a family, in a community, also has a social notion of themselves (relationship of belonging), to assume their shared social co-responsibility with the forces that live in the same community, i.e., the need for the person to participate in exposing their needs anywhere in the world.

The change and imbalance in demographic indices that has taken place over the last few decades, with a tendency towards greater complexity, has produced new social issues in the context of active groups and an increase in inactive, dependent,

and independent groups. The process of globalization, technological changes, and the urgent need to adapt human resources with a view to greater social inclusion, social justice and the reduction or eradication of poverty rates, migration, and immigration to a single European area The need for a minimum income, as a human right, considered and recognized as fundamental for social integration and for greater participation in citizenship as an expression of the human dignity of the individual.

4. Social protection system vs. social welfare

Today, when we reflect on the social protection system in a democratic society, we must do so based on an eco-social and social welfare approach to the social protection system that promotes citizenship. We must reflect on a model of territorial intervention, of a participatory and collaborative nature, in other words, its influence on top-down and bottom-up policies, to support our understanding of the process of centralisation and decentralization.

The ideal model for the implementation of social and public policies by the social protection system, with the aim of promoting the well-being of society and citizens, is undoubtedly the bottom-up model, which is the one that most closely relates to the intervention of citizens and local communities in promoting active social citizenship. But this is not the model favored by the state, since it always places the management of public policies in the public sphere, leaving the social and community partners with a supplementary and complementary participation, which weakens the participation and decision-making of the social agents (individual and institutional) of civil society, let us reflect on housing policies.

It is important to reflect on family policy in the context of human rights. Influenced by positive discrimination programmers such as the Bolsa Familia, the social insertion income, the basic food basket, for example, the constitution of the welfare state is underpinned by an ideological discourse, putting human rights at risk. In essence, the result of the discourse does not promote public policies or social policies, less human rights, but rather social responses operationalized by social action control measures and recognized (control) errors as guarantees of equality, well-being, and improved redistribution of social benefits [26].

In Portugal, social policies are mostly based on a corporatist welfare regime in which there is a concern with differentiating between social classes and preserving status, with policies shaped by religion and family tradition ([27], p. 27). For the author "fighting social exclusion requires not only acting on the effects, but also influencing them, and especially on the preventive causes that prevent the realisation of social citizenship" ([28], pp. 237–238). Social and public policies are increasingly responding to social problems on an emergency basis, a palliative and superficial response to social problems without resolving macro-structural inequality. Measures of strong social control are adopted, the effectiveness of which is questionable.

Potentialities can be identified in the professional action of social work, namely: networking; social diagnosis and helping to build a life project (short, medium, or long term). According to Rodrigues [29], until the mid-1990s, the social protection system centered on work as a means of social integration. However, the inability of the labor market to meet people's employment needs meant that alternative mechanisms had to be created through a new social contract, which includes the responsibility of the state, the market, and local communities: the "solidarity economy" or social economy and regenerative economy.

In turn, this typology should not absolve the state of its responsibility as an instrument of social protection, but should modify it, centering responses to social problems on valuing the person as a person. A new challenge is the inclusion of citizens in the process of formulating and evaluating policies, since participation democratic "public management" and shifts the priorities of administrations towards policies that are not just aimed at emergency issues.

4.1 The territorialised intervention dimension

Territorialised policies are administered in a decentralized way, but they do not change their logic or their design depending on where they start to act; they follow the general rules already known in their management, transferring the centralized model to a more local level; the participation of the actors and the integration of action remain the same as the traditional forms of policy management, not signifying a change in their design matrix, orientation and action strategy; the action is enacted outside the territory and this is only the field of application of a national policy [30].

In other words, they are those in which the place makes the difference, and from the interrelationship between politics and territory new forms of management emerge, capable of developing new ways of managing the social bond [31]; here the territory emerges as the political space, constituting the place for exercising representative democracy and collective representations of "living together" and as a relevant space for mobilizing collective action [32].

The report of the research project called "Territories of well-being. Asymmetries in Portuguese municipalities[1]". This study shows that "the safety and environmental quality of the place where we live, the possibilities for managing family life and work, access to housing and to education, health and transport services, along with involvement in communities, are some of the factors that most influence people's perception and experience of well-being (…)". "Civic participation, as a dimension of well-being, is influenced by territorial differentiations that manifest divergent levels of apathy between local politics and national and European politics." (p. 107). It's up to all of us to cultivate a new culture, a new language and to innovate conservative management and development models that are too centered on structure and less on the well-being of citizens. I'm referring to the implementation of new practices, now known as collaborative, integrated, empowering, and essentially based on positive, co-building partnerships for a better social environment with a strong impact on territorial development.

"For a characterisation of Low-Density Territories, whose designation has been consolidated in public policies, we propose analysing it from the dual perspective of social inequalities and the dynamics of producing well-being. Depopulation, ageing, a lack of job opportunities which means that young people and adults are constantly leaving, impoverishment with a strong presence of an inactive population, predominantly with basic schooling or no schooling at all, economic strangulation, and the inability to retain human resources that generate employment and stable life projects present significant challenges to these territories which should be considered from a social cohesion perspective. Naturally, well-being is influenced by these structural constraints, but local development agendas and the various intersectoral public policies can count on the social, organisational and institutional capital that is necessary

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[1] Coordinated by researcher Professor Maria Rosário Mauriti, Francisco Manuel dos Santos Foundation and professor at Iscte (June 2022).

to counteract the current depressive structural trends. Local political actors, associative and social support networks and the presence of the welfare state, based on bonds of identity, mutual aid and solidarity, may be able to mobilize participation and endogenous and supralocal local resources that are catalysts for the improved well-being that these territories offer" (pp. 108–109).

Local organizations in the form of associations, IPSSs[2] or NGOs[3] promote proximity contacts, social relations and develop activities for self-esteem and personal enrichment and break the flow of social isolation and loneliness by promoting outdoor activities and leisure/ social spaces. Entities that work above all in small communities as "(…) hubs for socialising and stimulating different forms of solidarity, nurturing social cohesion and a sense of belonging to a collective and thus contributing to a feeling of general and individual well-being. In villages from the north to the south of the country, summer festivals, processions on days of religious festivity and, more broadly, participation in church activities, lunches to celebrate significant dates or events, activities promoted by recreational groups such as walks or recreational trips, sporting events are some examples of promoting people's well-being and quality of life." (p. 173).

The political dimension of Social Work emerges from professional action in different areas of knowledge to achieve the objective of public and social policies in their mission to solve problems. The identification of a social or public problem involves the process of systematizing the social and economic needs resulting from the systematization of professional practices, needs as the social rights of people in society. This systematization leads to the recognition of the problem as a collective and not an individual social construction. "The social inclusion of any person or group primarily involves access to citizenship and economic, political and social rights, as well as access to possibilities and opportunities for effective participation in the political sphere" ([33], p. 276). Local social intervention makes it possible to find out about social needs and make an analysis that promotes programmers and services to respond to these identified needs, as challenges to local politics and as a challenge to the knowledge of social interveners in the field of planning, which Cardoso says "is the permanent updating of social diagnoses and the planning of actions to be implemented, requiring the participation of the different actors involved" ([34], p. 186).

Subirats [33] considers that the centralized and standardized design of major social policies is inadequate to respond to the new realities, and points to the residual or merely executive role that has been assigned to local governments as evidence of this, forcing the implementation of flexible and bureaucratized forms of management because "social actors involved in highly bureaucratized institutional contexts (filling in forms) only carry out casuistic action devoid of personal and social appreciation and enrichment" [35].

In this social change, we must consider the constructivist paradigm, centered on the citizen's skills and abilities. This is Partnership, guided by the logic of action in Network intervention; Social Citizenship, recognizing all citizens as subjects of rights and essentially their Human Dignity (human rights approach). Professional intervention also needs to be reconfigured, based on a practice of "Partnership", which is not a concept, since it does not establish a new theoretical field, but a reference for public action. Associated with this set of guidelines is the construction of Networks, as a

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[2] Private Social Solidarity Institutions.

[3] Non-governmental organizations.

new model for professional intervention. Networks have an effective potential for promoting participation and autonomy [25].

Social and public policies must be geared towards sustainable development, based on valuing local services and natural resources, strengthening the relationship between state and society. This requires greater attention to the local development model in the global context of each Member State, the European Union, and the globalization process.

In order to be able to talk about human and social development in contemporary society, we have to understand sustainable development as a process of satisfying current needs without jeopardizing the needs of future generations, implying three requirements: intergenerational solidarity, the integration of natural resource management into development strategies and the durability of the production and consumption processes inherent to development, implying a logic of sustainable rhythm of balance between the input of inputs and the output of outputs in the interaction between the economic and ecological subsystems (Report, 1987).[4]

Social welfare policies today must be guided by the principle of sustainability, developing values and guarantees for social, human, and economic development. According to Sen [36], sustainable development is centered on dynamic and inter-related levels: the person, the process, the context, and time. Bronfenbrenner's theory of human development ecology [37] defines human development as a set of processes through which people and the environment interact, bringing about constancy and change in the person's characteristics throughout their life [32].

The problem of Urban Sustainability is due to the increase in urban population density, which causes an enormous need for space. Cities continue to be centers of development, referenced today by the term Smart-cities: there are consequences and impacts in all dimensions and contexts, in the Economic Sector, Employment, Education, Health, Culture, Technology, Social Change and Political Power. The issues of housing and urban regeneration, beyond the economic and financial dimensions, establish interdependencies with all dimensions related to people's well-being and daily lives. And here we find a segment of intervention for Social Work, which is related to human well-being.

5. Social work: a field of opportunities

Social work, as a social science that aims to improve the quality of life and well-being of all citizens in society, develops an intervention centered on promoting people's social competences and skills with the aim of guiding them towards gains in autonomy and effective participation in changing their socio-economic situation and as a subject of rights in their community.

From this perspective, social work takes three possible directions in its intervention:

- A mere executor of public and social policies.

- A technocrat at the service of the institutional bureaucracy.

- A specialist who intervenes with the person to strengthen their self-esteem, empowerment, the acquisition of new independent living skills, the

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[4] Published by the W.C.E.B.

establishment of co-operation networks to solve the problem and the association of formal resources (public and social policy measures) and informal resources (neighborhood network and family);

- A mediator who establishes links, co-operations and relationships between public authorities, society and citizens at world, international, European, and national level in the macro, micro and meso dimensions.

Each of these interventions will produce a different result, i.e., it can promote intergenerational transmission, the accommodation of the person in their situation of poverty, or it can promote new opportunities and new life horizons that lead to a change in the social and economic situation, creating better living conditions in society.

Social work takes on a preventive role that includes its political dimension of pro-activity and social change, intervening on the one hand in the person's skills gains but also in the environmental and ecological development of local communities, strengthening their economic and industrial activities, and making the most of local natural resources, making proposals for entrepreneurship and creative initiatives, as Pereirinha points out, "there is an aspect that stems from the previous ones and that puts the poverty eradication strategy on another level: prevention." ([38], p. 132). According to the author, there are two objectives at stake here: social policy, the reduction of poverty through social transfers and the provision of social services, and preventive action against the new factors of impoverishment and vulnerability in society.

Social work is responsible for diagnosing the causes of problems—not just the symptoms—and developing effective social responses that promote the social inclusion of the group of people who do not have the necessary resources to make it on their own. This intervention requires the mobilization of scientific theories from the social sciences.

The theoretical current most identified with situations of poverty and social vulnerability is called Structural Social Work. Mullaly [39], is associated with critical theory by developing an intervention in holistic contexts, with the aim of reforming or promoting changes in society, not only focused on guaranteeing social rights, but also, and above all, on promoting human rights that facilitate the expression of opinion, autonomy, and participation in public debate.

We conclude that the Structural model deals with strategies and plans for public administration and social services; it creates spaces for inclusion, participation and social solidarity. It works with social justice and equality, as well as social responsibility and the development of public social protection services.

In the twenty-first century, Social Work is part of an economic, political, social, and cultural context of great change, marked by a neoliberal context in terms of economic policy, associated with the paradigm of partnership and networks, with profound consequences for the lives of citizens, labor and employment relations and the social management of everyday life. We are facing a new challenge in terms of the construction of the object of intervention, which needs to be rethought in terms of social and human development in a sustained and integrated way.

Ecological theory, based on the perspective of interaction between man and the social environment, defines a continuous adaptive exchange in the life cycle and is essentially characterized by environmental problems, developing co-responsibility in individuals and communities for improving the social and daily environment. This intervention is gaining relevance in contemporary society as an alternative

model in the practice of the social worker in response to the problems and needs of populations, within a framework of globalization and social development sustainable.

The eco-social and digital transition can also mean a change in the understanding of professions and institutions. Cities in transition are particularly developing economic structures, strong mobility, and deepening resilience.

Also, for Social Work, the way in which transition processes are expected is central: they will be inclusive, participatory, and multigenerational from the bottom up and will respect social diversity within the framework of the normative and ethical codes of a democratic society.

6. Conclusion

New social issues are emerging in the twenty-first century that deserve attention, reflection, policy measures and new knowledge more suited to the new social reality:

- Changes in the modus vivendi of families (new family forms, increased migration, "precarious" labor relations, mobility, new forms of violence—an increase in vicarious violence);

- Increased insecurity, greater exposure to situations of social vulnerability (use of weapons, trafficking in people and illicit substances);

- Cultural changes, the emergence of new ethnic groups, cultural super-diversity, changes in habits and customs, more plural relationships in society;

- Religious diversity, the search for ideals and public social identities of reference, new values and beliefs;

- Changing social and family paradigms, more individual and less collective life projects, social participation based more on competitiveness than solidarity;

- The ambivalence of professional fields, the search [again] for versatility and the devaluation of professional competence for action.

The participation of young people today in the construction of a democratic society, based on principles of social citizenship, takes on different forms, including social networks and the use of email, mobilizing groups of young people on certain causes, including climate change, feminism, and anti-racism, which are considered global and intersectional issues. "Democracy requires political participation on the part of citizens, which is expected to be active and free, in public debate, in the election of political representatives, in membership of political parties, civil organisations or social movements." ([40], p. 76).

Young people expect society and political decision-makers to pay more attention to their opinions and needs [41–43]. "This is a challenge we are facing today (...), and one that may have the capacity to transform and democratize democracy at a time when it is trying to recover from the COVID-19 pandemic and control the political risks it has made evident." ([40], p. 77).

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Chapter 5

Social Work: The Contrast Interventions for COVID-19 Pandemic

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Abstract

Social work practice, as a service profession, involves applying skills and theories related to human behavior and social systems when addressing social problems. One significant challenge faced by social workers worldwide is the Coronavirus Disease (COVID-19) pandemic, which has affected millions, causing numerous deaths globally. This situation presents an enormous challenge for social workers on a global scale. This paper explores the roles of social workers in interventions, support, and advocacy for social inclusion, aiming to positively impact the lives of vulnerable populations and society during the pandemic. This context introduces variables such as responsibilities, support packages, compassion, creative responses, and social justice. The paper is a review that utilizes Atlas ti.8 for analysis and presentation. It highlights interventions of these variables in selected countries, considering both developed and developing nations and assessing weaknesses and strengths. Less developed countries, such as India and Nigeria, tend to face disadvantages in interventions related to support, compassion, and social justice. Hence, there is a need to integrate social workers efficiently for intervention care, particularly in less developed countries.

Keywords: social-work, ethical-challenge, contrast, interventions, COVID-19 pandemic

1. Introduction

COVID-19 infection is highly heterogeneous, from asymptomatic infection to mild, moderate, or severe. In addition, the infection can evolve through different stages and progress [1]. The COVID-19 pandemic has brought about numerous difficulties for a healthcare system that was not adequately ready. Medical professionals are encountering unparalleled levels of stress at work, which is further exacerbated by an already high level of physician exhaustion. It is important to recognize that these challenges could intensify and evolve as the pandemic progresses [2]. Factors like the changing patterns of transmission over various time periods have contributed to the escalation of the health crisis caused by the COVID-19 spread. This has significantly impacted the mental and physical well-being of the general population,

as well as healthcare workers [3]. It also encompasses demographic and occupational factors, like gender and age, which were associated with stress and feelings of depression. The expression of emotions includes denial, anger, and fear, all of which are related to the pandemic [4]. It has further caused extensive burdens to individuals, families, countries, and the world. Effective care for COVID-19 patients is necessarily needed.

Patients diagnosed with COVID-19 who reside in regions characterized by significant socioeconomic disadvantage demonstrated a heightened occurrence of requiring critical care admission and an increased level of deprivation when adjusted for other factors [5]. As a result, individuals employed in frontline roles find themselves within a higher-risk category and necessitate vigilant monitoring. The substantial increase in workload, stemming from the elevated total patient count and extended weekly working hours that encompass both day and night shifts, combined with limited logistical and peer/supervisory support as well as diminished feelings of professional competence during COVID-19-related duties, contributes to a more pronounced emotional impact on physicians situated on the pandemic's front lines [6]. The COVID-19 pandemic is projected to exceed the healthcare system's capacity, underscoring the importance of incorporating palliative care into pandemic planning. This highlights the urgent requirement for healthcare practitioners to understand palliative care principles and how to prioritize patients when resources are scarce. Consequently, exploring alternative avenues for delivering palliative care, including telemedicine, tele-counseling, and online bereavement support groups, becomes imperative [7]. In this context, professionals must not only respond to the pandemic but also play a pivotal role in championing effective actions. It is evident that the value of social justice, a cornerstone of social work, is jeopardized by the pandemic's detrimental effects on marginalized groups, posing a significant challenge [8].

Enhanced collaboration is essential for effectively addressing global health threats [9]. The pandemic response has revealed the discomfort felt by nurses due to the imbalance between their workload and the available human resources, as well as the lack of communication with mid-level managers [10]. Consequently, the involvement of social workers is crucial to facilitate effective coordination and improve pandemic management. Social workers have significant roles to fulfill in the response to the COVID-19 pandemic, demanding a heightened sense of awareness within the social work profession. This presents a valuable opportunity for the social work field to take a prominent role, enabling it to tackle emerging issues and make a lasting impact on the lives of individuals affected by emergencies and pandemics like COVID-19 [11]. Central to this is the unique approach that social workers bring to interventions, highlighting the importance of further developing these strategies.

The chapter gives an overview of the study. The contrast intervention in COVID-19 should be an agenda for nations worldwide because of the need disparity, especially for nations such as developing countries with uncontrolled growing populations and economic challenges. Therefore, the equal right to dispensing COVID-19 interventions as a basic need cannot be overstressed [12]. This is one of the reasons social work interventions encompass fulfilling fundamental needs like safety, a sense of belonging, active listening, and emotional support. Thus achieving the intervention objectives of ensuring safety, restoring a sense of calmness, addressing acute reactions in a normalized manner, fostering self-efficacy, nurturing a feeling of belonging, and sustaining mental openness [13]. The approach to studying such a global concern is fundamental. As such, the qualitative method was adopted by reviewing some of the interventions in selected countries, both developed and developing. The findings

indicated a high disparity in supporting packages for victims, resource strength hindering effective support, and synergy ineffective in part of the organizations supporting the social workers. Therefore, it suffices to say that inequality and the effectiveness of various interventions have significant implications for health shaping public policies for efficiently integrating social workers for intervention care, as less developed countries are of disadvantaged.

2. Concept of social worker

A social worker (SW) is a professional dedicated to enhancing the overall welfare of the general populace, aiding in fulfilling both basic and intricate requirements of individuals and communities, with a special focus on those who are marginalized, oppressed, or experiencing poverty. Their substantial contributions encompass caring, providing support, upholding rights, and empowering vulnerable groups [14]. During times of public health crises, social workers position themselves to educate communities and navigate through intricate and evolving situations. Historically, social workers have been pivotal in responding to significant events such as the HIV outbreak, Hurricane Katrina, and the 9/11 terrorist attacks. Moreover, social workers have played a crucial role in addressing systemic challenges including healthcare disparities, racism, insufficient mental health services, and economic inequalities [12].

Social work interventions encompass fulfilling fundamental needs like safety, a sense of belonging, active listening, and emotional support. Further elaboration of these interventions aligns with the following objectives: Ensuring safety, restoring a sense of calmness, addressing acute reactions in a normalized manner, fostering self-efficacy, nurturing a feeling of belonging, and sustaining mental openness [13]. Yeshiva University [12] typically spelled out the role of SW to include:

1. Navigating an Evolving Situation: During a situation of crisis, a social worker's major responsibility is to help their clients find the resources and support they need.

2. Critical to ensuring clients get accurate information to help them navigate an extremely complex healthcare system and understand doctors.

3. Stopping the spread: community safety guidelines are an important part of a social worker's responsibility; it is also essential in educating the community at large.

4. Prioritizing self-care, which is where social workers play another essential role. Serve as a neutral sounding board, working with clients to develop coping strategies to manage anxiety and provide non-sensationalized information.

3. Social worker and COVID-19

As custodians of professional knowledge, skills, attitudes, and values, social workers are entrusted with the responsibility to take action and contribute to several crucial areas of research and practice. These encompass:

1. Client Protection during the COVID-19 Pandemic: Social workers are obligated to engage in research activities aimed at safeguarding their client systems and service users from the impacts of the COVID-19 pandemic.

2. Coping Strategies for Vulnerable Service Users: Social workers should explore coping strategies employed by service users, particularly vulnerable groups like older adults, women, and resource-deprived households, who are grappling with limited access to medical care in many developing regions worldwide.

3. Interventions for Grieving Families: Social workers play a pivotal role in researching and developing interventions to support families enduring loss brought about by the pandemic. This loss could be related to the passing of loved ones, parents, or relatives or could involve socioeconomic or material setbacks stemming from the pandemic [8].

As previously stated, the duties of social workers extend beyond combating the transmission of COVID-19. They encompass ensuring that the most vulnerable are incorporated into planning and response efforts, mobilizing communities to secure essential resources such as food and clean water, and advocating for the integration of marginalized individuals into the social service system [14].

4. Methodology

This article examines the roles of social workers in interventions, support, and advocacy for social inclusion with the aim of positively influencing the lives of vulnerable populations and society amid the COVID-19 pandemic. It functions as a review paper, utilizing Atlas ti.8 to analyze related articles and quantify the results for presentation. The research focuses on the qualitative phase, which is crucial for articulating and addressing the pertinent issues. Within this study, various articles reference specific aspects related to weaknesses and strengths, regional disparities, and their correlation with the policies and practices governing the program. These aspects encompass resources, social justice, responsibilities, compassion, and other relevant variables.

4.1 Sampling design

Qualitative sampling is drawn from information factors rather than the number of participants. Elements involved in qualitative sampling are defining aspects of the subject under investigation within the limit of time and resources, thus considering responsibility, collaboration and synergy, creative responses, resource strength, compassion, social justice, and support pages. Purposive sampling was used for this qualitative study targeted at some selected countries developed and developing: India, the United Kingdom, Nigeria, and Italy.

4.2 Data collection

The data were derived from relevant articles and elaborated within the realm of social work practices, along with the goals and approaches implemented by their organizations in the public participation process. While the articles were in English, the themes of the information remained largely consistent regarding social workers

and their operational roles, specifically in the context of providing care during the COVID-19 pandemic. This uniformity is attributed to the fact that all extracted information adhered to the issues predetermined by the researchers, as indicated and explained in the sampling design.

4.3 Data analysis

The data analysis employed a systematic process comprising five stages, which include identifying a thematic framework, indexing/coding, grouping, and networking.

5. Ethical challenges

Amidst the COVID-19 pandemic, social workers encountered ethical dilemmas that encompassed the following aspects.

1. Building and maintaining relationships based on trust, honesty, and empathy, either through remote means with respect to privacy or in person with protective gear.

2. Giving precedence to the distinctive and amplified needs and requests of service users during the pandemic despite limited resources and challenges in conducting comprehensive assessments.

3. Striking a balance between the rights, needs, and risks of service users and the personal risks faced by social workers and others, while striving to deliver services as effectively as possible.

4. Navigating the choice between adhering to national and organizational policies, procedures, or guidance (established or new) and employing professional discretion when these policies seem inadequate or unclear.

5. Recognizing and managing emotions, fatigue, and the imperative for self-care when operating in demanding and unsafe conditions.

6. Using the pandemic as an opportunity to reconsider the future of social work.

Social workers have exhibited both resilience and ingenuity in meeting needs within precarious and unpredictable circumstances, while respecting individuals' rights to privacy and participation in consequential decisions about their lives. These experiences have contributed to formulating ethical principles that underpin the guidance for their work.

- Social workers should possess the capacity to exercise professional judgment while engaging in social work within multidisciplinary or multi-agency teams throughout the COVID-19 pandemic.

- If a suitable remote option and/or infection risk mitigation measures are available, social workers should not be obligated to conduct face-to-face interactions.

- Health and other partners should facilitate social work visits/activities in diverse settings when the social worker deems them necessary.

- Social workers should not be prevented from conducting home visits/activities if there is a clear legal or practice-based justification to do so.

- Guide and inform your practice.

- Seek suitable support and guidance from employers and other partners.

- Raise professional concerns and queries regarding local practice or guidance [15].

5.1 Global experiences

India: India is the nation from which the world's most ancient healthcare system originated, making it the focus of close observation by the global community to see how it manages the crisis utilizing its internal resources. The international community is currently monitoring India to witness the display of its traditional healthcare strength [16].

United Kingdom: According to the 2021 Annual Survey conducted by the British Association of Social Workers (BASW), ongoing challenges related to "insufficient funding and heightened workloads" have been exacerbated by the additional impact of the COVID-19 pandemic on funding, services, and overall well-being. The vacancy rate for adult social workers has seen its first increase in 6 years, rising from 7.5% to 9.5%. With an inadequately staffed and resourced workforce, there is a potential risk that social workers might struggle to fulfill their responsibilities as individuals, and teams could find themselves stretched beyond capacity [17].

Insufficient focus has been directed toward the capacity of the post-acute healthcare system to handle a substantial number of patients who have recovered from COVID-19. This phase occurs when patients transition from hospitals to long-term care facilities or return to their homes. The selection of a screening method, which encompasses options like telemedicine and other electronic health applications, hinges on the resources at hand, the state of the local healthcare infrastructure, and the accessibility of additional rehabilitative interventions [18]. The requirement to augment critical care capacity in England persists, involving strategies such as establishing field hospitals, leveraging private medical facilities, and mobilizing both former and recently graduated medical personnel. This enables the potential resumption of elective surgeries, either in part or in whole. Given the unpredictable trajectory of demand for COVID-19 care, it becomes imperative to frequently reevaluate the planning of elective procedures. This ongoing assessment and the vigilant monitoring of capacity are essential to ensure the timely provision of urgently required care [19].

Nigeria: Experiencing reduced motivation due to their expertise not being acknowledged through legal means, social workers are currently found in both secondary and tertiary healthcare levels in Nigeria; however, their roles remain suboptimal. There is a need to involve social workers in the COVID-19 response while acknowledging their significance and ensuring their active participation. The utilization of individuals who lack a social work background for social work tasks has been viewed as an exploitation of the profession, impeding its advancement within the healthcare system. There should be a prioritization of funding for social work units within healthcare. Despite this, social workers are minimally engaged in Nigeria. To

effectively integrate social workers into the pandemic response, the inclusion of social work trainees as volunteers should also be considered [20].

Italy: Italy's count of healthcare personnel per 1000 residents is comparatively lower than that of other European nations. Moreover, the ratio of nurses to doctors and the actual number of nurses falls below the average seen in the Organization for Economic Cooperation and Development (OECD). To sum up, as Italy endeavors to return to normalcy through social and economic strategies, it is imperative for the country to simultaneously establish favorable conditions to strengthen its defense against the repercussions of the COVID-19 outbreak. This approach is crucial for maintaining the viability of both Public Health and National Health Service [21]. Consequently, the requirement for social work intervention emerges as a means to mitigate the challenges that arise in the aftermath of the COVID-19 pandemic.

6. Social work challenges

Family grief: Experiencing remorse stemming from the incapacity to alleviate their family member's anguish, enduring the strain of ongoing caregiving responsibilities, being unaware of accessible support services, and lacking the assurance to seek assistance from others, all while managing the emotional turmoil caused by the impending loss of a loved one [22].

Change work place: Amidst the pandemic, social workers encountered hurdles in adapting their work methods. The primary transformation underscored was the transition from in-person interactions to virtual platforms. Nonetheless, it was also noted that this shift could lead to the oversight of issues that might have been noticed if they were physically present in the same location [17].

Digital technology: An additional issue associated with a greater reliance on digital modes of work pertained to individuals from low-income households, senior citizens, and those with learning impairments who might lack access to digital technology [17].

Palliative care bias: However, the substantial frequency of changed goals of care (GOC) post-intervention indicates a noteworthy observation [23].

Interventions: Ensuring that disparities are not worsened or prolonged requires essential elements like transparency and inclusiveness during the formulation of allocation protocols [24]. The availability of sufficient material and human resources stands as fundamental pillars in managing this epidemic [25]. The swift implementation of mind-body services provided remotely to individuals has shown the substantial capacity of remote delivery in enhancing patient access to services with a high level of utilization and contentment [26].

Social workers have a responsibility to not only identify but also champion communities that persistently face the digital divide, a duty that extends beyond the pandemic. Additionally, advocating for both organizational and governmental measures to guarantee access to information and communication technologies (ICTs) for all clients is crucial. This situation presents a chance to establish service delivery models that are centered around clients, offering them a broader range of access alternatives [27].

6.1 Strengths and limitations

The incorporation of digital technology has yielded favorable outcomes for certain individuals. However, additional training is needed to enhance interaction and utilization with service users [28].

To safeguard the less privileged and enhance the management of available resources within the social framework, there is a requirement for enduring legislation. This would also involve scrutinizing societal reactions for improvement [29].

The provision of mental health and psychosocial support heavily relies on licensed social workers, forming the essential foundation [30].

Amid the COVID-19 crisis, social workers are grappling with unprecedented circumstances, requiring them to swiftly and extensively adapt to the multifaceted dimensions of the health, social, and economic aspects of the crisis. In the United Kingdom, the local level has primarily shaped the social work response, involving local authorities, health and social care trusts, and other entities responsible for employment and leadership, alongside some central government guidance. Throughout, social workers have been designated as essential workers. The UK's experience with COVID-19 has brought to light gaps in national preparedness for pandemics as well as in comprehending the role and necessities of social workers in such emergency situations.

Fundamentally, social work is anchored in a human rights-based approach. The ethical foundation and purpose of social workers revolve around upholding human rights, a principle that remains unwavering even in times of crisis. In fact, during intricate and uncertain periods, adherence to universal human rights becomes even more crucial. The pandemic is exposing stark disparities in the impact of the crisis and the safeguarding of human rights across the United Kingdom. The stressors stemming from the pandemic and the challenges in addressing them carry the risk of eroding entitlements, diminishing rights, and eliminating protective measures. However, each individual within a community plays a significant part in assisting others and adhering to safety measures [12].

7. Contrast interventions

Scanning through selected literature, the contrast interventions by social workers are then expressed considering thematic analysis with reference to **Figures 1** and **2**.

The analysis is reviewed in literature as captured in **Figures 1** and **2**.

7.1 Responsibility

In the United Kingdom, individuals working in private practice are handling fewer clients due to their own personal caregiving responsibilities. Despite the numerous challenges posed by the pandemic in terms of service delivery, social workers have persisted in delivering vital services to individuals, families, and communities [31].

In Australia, social workers in hospitals primarily handle situations involving matters of life and death and are highly conscious of the consequences that complex grief can have. Their work has predominantly focused on those directly affected. Grief is a shared experience, as bereavement remains a universal phenomenon. Likewise, the innovative approach of social workers in response to these challenges is also universal [32].

In Nigeria, the involvement of social work during the COVID-19 pandemic is of great significance. Nigerian social workers have essential roles to fulfill in the battle against COVID-19. These responsibilities encompass raising public awareness about preventive measures, educating communities, identifying and assisting the most vulnerable individuals during the pandemic, and aiding in the distribution of relief supplies to those in need. It is worth noting that the absence of social workers'

Figure 1.
Contrast interventions.

Figure 2.
Interventions assessment.

involvement in the distribution of relief supplies was a primary reason for these resources not reaching the intended recipients [33].

However, it should be acknowledged that some social workers may not be fully aware of the expectations placed on them during the pandemic. Additionally, some have observed that their training might have certain deficiencies, underscoring the importance of introducing new courses and enhancing practical field experience in the future training of social workers [34].

7.2 Collaboration/synergy

In Australia, it is crucial to prioritize the strengthening of international collaborations and initiatives aimed at fostering collective efforts among social workers when it comes to upholding values in times of uncertainty. While taking swift action and establishing partnerships may have been challenging during the crisis, it remains imperative for progress. Consequently, the core of social work endeavors in addressing uncertainty and aiding the most vulnerable individuals lies in collective actions and international advocacy [35].

In the United States, recognizing the importance of innovative solutions, compassionate practice, and taking pride in being part of a profession dedicated to compassion, fairness, resourcefulness, and driving societal change is crucial. Social work is not an individual endeavor; it requires unity and cooperation among various agencies to aid in decision-making [14]. Social workers have an increasing need to establish networks and collaborate with healthcare, social services, and both government and private organizations. For instance, the immediate requirement for additional shelter facilities prompted negotiations with the city government, clients' families and friends, private-sector entities, healthcare organizations, and local art students. As the crisis persisted, further collaborative efforts were anticipated with software developers to locate and secure resources, develop effective health education applications, and monitor housing and service availability. Ultimately, the value of advocacy will continue to serve as a guiding principle in the social work response to issues of oppression and discrimination linked to the pandemic [36].

In Canada, social workers bear numerous burdens, including stress, fatigue, and burnout, as a consequence of their caring roles. Consequently, it is strongly recommended that we prioritize the cultivation of collaborative professional communities, especially at this juncture, to safeguard the well-being of social workers both during the pandemic and in the future [31].

In Nigeria, there is a recommendation to call upon international organizations like the UN Food and Agriculture Organization (FAO) to expand and enhance their emergency food assistance and social protection programs. This expansion is essential to assist impoverished individuals in complying with stay-at-home regulations, particularly since their daily income barely covers their basic survival needs [37]. Furthermore, there is an emphasis on the need to professionalize the social work field, especially considering the substantial progress made in the developed world, which Nigeria has leaned on and adopted as a model [33].

In the United Kingdom, social workers' responses to the crisis have transformed this pandemic into occasions to expand their range of practices, adapt and learn from one another, draw inspiration from international experiences, and harness their reflective, critical, and innovative skills to gain insights, devise novel solutions, and foster global solidarity [38]. In the United Kingdom, there is also an examination of young people transitioning from Out-of-Home Care, a practice that draws from the extended care programs found in the United States and England, and which has been adopted by Australian social work [39].

7.3 Creative responses

In the United Kingdom, amidst accounts of exhaustion, anxiety, and fear, there were also narratives of innovative responses, compassionate practice, and a sense of pride in belonging to a profession whose members are dedicated to being empathetic,

just, resourceful, and catalysts for societal change. This can be described as heart-warming [14]. Social workers exhibited resilience in action, swiftly adapting to new practices, but at the same time, they expressed concerns about short-term efficiencies taking precedence over the individual needs of service users [28]. The demands placed on social workers often led to them making sacrifices in their work and personal social lives [39].

During the peak of the pandemic in the United Kingdom, increased support and adjustments to working practices, including the reordering of priorities and other initiatives, played a crucial role in improving the mental well-being and overall quality of working life for social workers. This is while acknowledging the well-documented pressures faced by social workers in the United Kingdom [28].

In Australia, the challenges introduced by COVID-19 to the role of social workers in bereavement care have compelled the exploration of innovative alternatives. Starting from early March 2020, healthcare professionals in Australia had to display remarkable adaptability in response to the evolving circumstances posed by the COVID-19 pandemic. Social workers continued their work in acute hospital settings, often with an increased number of recruits or reassignments to COVID-19 wards. This transition resulted in a new daily routine within the hospital, complete with the implementation of safety protocols. These changes were dynamic and required a high degree of flexibility to adapt to them. Since the onset of the pandemic, social workers have had to adjust their bereavement practices to align with public health restrictions and the limitations on visitation [32].

7.4 Resources and strength

In the United Kingdom, social workers have had to tap into hidden reservoirs of resources and strengths they may not have been aware of. They are required to discover fresh approaches for supporting and fostering these strengths within themselves and among the people they serve [39].

In Australia, this perspective contributes significantly to the social work response during the COVID-19 pandemic and in the future. It emphasizes that the effectiveness of social work relies heavily on social work educators, researchers, and practitioners recognizing the current challenges as opportunities and responding in ways that advance the theoretical models and practice framework of the social work profession. The country's strengths-based approach serves as a basis for venturing into uncharted territories alongside the individuals they are assisting. This approach aims to help communities and societies transform their concerns into lasting solutions [40].

In the United States, the adoption of work stoppages in numerous states resulted in the loss of jobs, reduced income, and financial difficulties. There is a pressing need for renewed advocacy in the post-pandemic period to address gaps in health insurance coverage and the termination of insurance tied to employment status. Additionally, some individuals within the social work profession now find themselves unemployed and no longer eligible for benefits they once helped their clients access [36].

In Nigeria, the effectiveness of social workers in responding to the COVID-19 pandemic was significantly hampered due to a lack of recognition and professionalization. This limitation had a detrimental impact on their ability to function at their best. Consequently, there is an urgent need for the swift professionalization of social work in Nigeria, given its critical role in the well-being of the population. However, the absence of recognition and institutionalization of the profession undermined the

efforts of Nigerian social workers to leverage their potential and secure assistance as a source of strength. The lack of involvement of social workers in the distribution of relief supplies was one of the primary reasons why these aids did not reach the intended recipients [33]. Moreover, corruption and a lack of accountability negatively impacted the effectiveness of social workers' responses to the pandemic [41].

7.5 Compassion

In the United Kingdom, it is heartwarming to witness the compassionate practice and the sense of pride among professionals who are dedicated to being empathetic, just, resourceful, and advocates for societal change within their profession [14]. Social workers are currently facing the challenge of discovering innovative methods to cultivate and sustain these virtues in themselves and others. Additionally, it is with deep sadness that they also have to cope with the loss of friends and colleagues. Despite this, they continue to extend their humanity to social work students, colleagues, service users, and community members [39].

In Australia, social workers working in hospitals routinely encounter the realities of death and dying, and they employ a range of intervention strategies as part of their daily practice. Among these, social workers specializing in bereavement support primarily utilize a technique known as "companioning." This approach involves being a supportive presence, witnessing and fully engaging with the intense grief experienced by individuals, creating a space for their emotions, and affirming the validity of their grief responses [32].

In Nigeria, the country's significant diversity calls for a multifaceted approach that includes both food and cash assistance. Thus, during the pandemic, social workers can contribute by conducting research into the specific needs and experiences of vulnerable populations. This research helps ensure the distribution of food aid and cash transfers as viable means of sustenance for these groups. Additionally, social workers play a crucial role in collaborating with the government to develop culturally sensitive responses that effectively support people, including those in hard-to-reach communities [37].

7.6 Social justice

In the United Kingdom, it is essential to actively contemplate social justice endeavors aimed at recognizing the increasing discrepancies in healthcare that have become prominent during the pandemic. This entails adopting broader perspectives at the macro-level to tackle societal and health inequalities that hinder the daily responsibilities of all healthcare professionals [42].

Health systems need to show investment in safety and well-being and consider how to incorporate social justice initiatives into workplace culture.

In the United States, the fundamental principle of social justice is closely linked to the skills and duties of advocacy and policy reform. Social workers actively raise their voices against inequalities and injustices they encounter in the world. The Coronavirus and the COVID-19 pandemic have brought to the forefront several social justice and advocacy issues significant for social work professionals. One pressing concern is the "digital divide," which restricts access to online counseling, support groups, and other services to those who can afford personal computers and internet access at home [36]. There is a compelling need to expand and implement broader, sustainable solutions to establish a new foundation of evidence for the profession.

This is essential for practicing in alignment with the profession's Code of Ethics and promoting social justice and human rights for all in the United States [40].

In Australia, the values of social justice and social change are deeply ingrained in social work education, particularly in critical social work [43]. There is an ongoing need to advocate further for those who are already marginalized and disempowered, especially during times of global crisis. Advocating for social justice becomes especially critical in periods of uncertainty when ethical principles are seriously challenged and disregarded [35].

In Nigeria, the significance of social workers has been largely overlooked, and instances of pilfering of relief supplies by those responsible for distribution have occurred. The psychosocial well-being of affected individuals has been left largely unaddressed in Nigeria [37]. Additionally, Agwu et al. [41] also highlight these issues:

Effectively mainstreaming social care and justice services into Nigeria's healthcare led by well-trained social workers will improve the health sector via anticorruption.

The absence of social care and justice services within healthcare institutions in Nigeria exacerbated the adverse consequences [33].

7.7 Support packages

In Australia, they provided both tangible and emotional support by establishing a food bank and implementing a case management model to address various needs [44].

In the United Kingdom, social workers continue their efforts to enhance the quality of daily life within an evolving environment [31].

In Nigeria, the significance of social workers was completely overlooked, and the available resources were pilfered by those responsible for distribution. Meanwhile, the emotional and psychological well-being of affected individuals was largely neglected. Both food and cash assistance were required due to the significant diversity in the country (**Table 1**) [37].

The contrast table depicts the results from the analyzed literature considering the variables indicated, thematized, and quantized in **Figure 1**.

Variables	Countries						
	United Kingdom	**United States**	**Canada**	**Australia**	**Italy**	**India**	**Nigeria**
Responsibility	Strong			Strong		Weak	Weak
Collaboration/ synergy	Strong	Strong	Strong	Strong			Weak
Creative responses	Strong			Strong			
Resources and strength	Strong	Strong		Strong			Weak
Compassion	Strong			Strong			Strong
Social justice	Strong	Strong		Strong			Weak
Support pages	Strong			Strong			Weak

Table 1.
The contrast.

8. Conclusion

This chapter has made a modest contribution by providing a research perspective to gain qualitative insights into the ethical dimensions of professional practice with regards to interventions. Assessing the effectiveness of various interventions has significant implications for shaping public health policies. To efficiently integrate social workers for intervention care, involves social work support in less developed countries.

Mental health practitioners must cultivate a high level of self-awareness and authenticity to effectively support their patients, recognizing how the pandemic has uniquely impacted each person [13]. In areas where there is resistance to adapting to the demands of the COVID-19 pandemic response, a reconsideration of policies may be necessary. Consequently, enhancing social work curricula, fieldwork practices, and social welfare policies holds great promise in addressing the enduring consequences of the pandemic [45].

Effective interventions by social workers should be founded on a comprehensive assessment of factors contributing to resource support, social justice, responsibility, and collaboration internationally. It is crucial to emphasize the need for expansion and action on a broader and long-lasting solution to establish a new evidence base for the social work profession in developing countries. This effort aligns with the profession's Code of Ethics, promoting social justice and human rights for all.

Conflict of interest

The authors declare no conflict of interest.

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Kids and COVID-19: How Did Children and Adolescents Fare during the Pandemic?

Lue Turner

Abstract

Children and adolescents experienced the COVID-19 pandemic in profound ways. There were sudden and drastic changes to routines regarding school, social connections, and life at home. These changes lead to feelings of worry and uncertainty, isolation, and higher levels of depression and anxiety among children and adolescents. Family dynamics and functioning influenced child well-being as all family members, especially caregivers, were experiencing COVID-19 related stressors of financial insecurity and social isolation. Stressors such as family violence, increased screen time, and experiencing school from home also impacted the well-being of children and adolescents. This chapter offers a summary of pertinent research conducted during the COVID-19 pandemic on lockdown and pandemic-related effects for children and adolescents. Major themes are highlighted and explored. Discussion is offered regarding the important role of social workers in empowering this vulnerable population during the aftermath of the COVID-19 pandemic.

Keywords: children, adolescents, pandemic, COVID-19, child mental health, adolescent mental health, childhood trauma, resilience

1. Introduction

In early 2020 SARS-CoV-2, also known as the COVID-19 virus, made itself known in households and communities across the world. It spread with intrusiveness amongst the world's population quickly and seemingly effortlessly with destruction that can be counted in numbers of lives lost, destroyed, or changed forever. Disturbances also occurred in areas of life that are harder to tally. Changes that related to everyday life and way of being, such as how people interacted with each other and with society, drastically changed with stay-at-home orders, social distancing practices, and school and business closures [1]. A new vocabulary suddenly sprung up consisting of words such as PPE (personal protective equipment), mask mandate, contact tracing, social distancing, essential worker, and shelter-in-place. New attention was being paid to hospitals, dangers to healthcare workers, and a shortage of PPE. Family relationships were also changed as interactions and family patterns were interrupted by quarantine, community curfews, shelter-in-place orders, travel restrictions, isolation, mask mandates, and a general sense of fear and anxiety. Public

gatherings were restricted including sporting events and places of worship. In public all were to keep a six-foot distance from anyone else. Schools and colleges were closed and businesses also closed; or if an essential business, workers needed to be a marked six foot distance from each other. By March 2020, 45 states had a shelter-in-place or stay at home order issued for the whole state or part of the state [2]. On March 11, 2020 the World Health Organization assessed COVID-19 a pandemic [3].

Life changed dramatically, seemingly overnight. While none were left untouched by an aspect of the COVID-19 virus, it had an especial impact on the youngest and most vulnerable members of society. Children deeply felt and experienced the pandemic in profound ways: at a family systems level and at broader social levels. The experiences of children throughout the pandemic are unique in that compared to adults, children have very little, if any, power over their world. With the onset of the pandemic, their world, and any sense of control over it diminished even more. The onset and spread of COVID and the ensuing lockdown in 2020, left children with unanswered questions, worry, confusion, and even anger.

2. Child and adolescent mental health

Lockdown and the pandemic had a profound effect on the mental health of children and adolescents. Not only were family lives disrupted, but the social world of children and adolescents was interrupted as well. Children are not adults on a developmental scale; hence, they are still in crucial phases of brain and social development and are more susceptible to negative impacts to mental health from the COVID-19 virus [4]. From a developmental standpoint children also do not comprehend and view the world through an adult lens and they may have a limited understanding of the pandemic [5]. Reviews of several research articles point to the impact of COVID-19 on child and adolescent mental health to be in an increase of both anxiety and depression [4, 6, 7]. Also reported were feelings of fear, unhappiness, and worry [5], which indicates a lowered level of emotional well-being for children. Specific fears or worry ranged from fear of loved ones or oneself contracting the virus, to worry about economic repercussions of the pandemic [4, 6]. Children from lower income homes, those who had a disability or neurodiverse needs, or a pre-existing mental illness had even higher levels of depression and anxiety when compared to pre-pandemic levels [4, 5]. Also noted were reports of studies that indicated female adolescents showing higher depression and anxiety levels when compared to male adolescents during COVID-19 [4, 6–8].

For children and adolescents, the pandemic interrupted rules, rituals, and routines that created stability and security. When looking more closely at how the pandemic and lockdown contributes to a higher prevalence of anxiety and depression amongst children during the pandemic, factors inside the family, as well as outside the family, need to be examined.

2.1 Influence of the family system

The most substantial impact on the well-being of children and adolescents during the COVID-19 pandemic was seen through the family system. The family is an interconnected unit where individual members have influence on each other through the system of relationships within the family. It then follows that stressors which influenced the functioning of one family member during the pandemic then lead to

changes in the functioning of all family members [9]. It is this interconnected system of influence which aids understanding of child adjustment through the COVID-19 pandemic.

Individuals in the family are impacted by contexts outside of the family. Context that is salient during the COVID-19 pandemic were the changed nature of personal interactions, job loss, social distancing, and the transition of work, school, and child-care activities into the home [1]. Negative economic changes, such as loss of income and reliance on assistance programs, affected the number of difficulties faced by parents and caregivers. These difficulties were then associated with children's emotional distress; which included expressions of anxiety, fear, and acting-out behaviors [1].

2.1.1 Caregiver stress

Caregiver stress was a significant factor in child and adolescent mental health, as the stress for adults was often revealed through parenting behaviors [9–11]. Pandemic related distresses such as financial insecurity, job loss, social isolation, disruptions to school and child care, and confinement related stresses, created interpersonal stressors and pressures for families [9, 12, 13]. Caregivers were at greater risk for psychological distress due to the pandemic stressors, which then lead to problematic parenting behaviors [9]. There was a "coercive cycle" [13] within families where increased parent/child conflict resulted from worried and stressed out parents being more reactive to their unhappy and frustrated children. The parent reactivity would then be met by even more boundary pushing from children, which in turn could lead to increased provocation from parents. This escalating recursive circular pattern of behaviors between parents and children could continue and possibly lead to risk of child maltreatment [13, 14].

2.1.2 Family erosion or cohesion

Increases in depression and anxiety for caregivers translated to emotional distress for children. Specifically, increases in parent depression were linked to large increases in children internalizing (self-blame) for problems [12]. Overall, pandemic related stressors (financial insecurity, job loss, social isolation, disruptions to school and childcare, and confinement) and the increased needs of children during the pandemic, had a negative effect on family mental health. However, the effect could be buffered and improved for children if a cooperating coparenting relationship was in play [12]. Family relationships were strained during the pandemic, but the overall effect of stressors was softened if parents were able to problem solve and be supportive of each other.

The increased family conflict also affected the cohesion level in a family. Increases in family conflict and increases in harsh discipline of children contributed to child maladjustment [10, 14]. For some families the stress of the pandemic eroded the social support for family networks by increasing the amount of conflict in the family [14]. This loss of support was linked to an increased risk of anxiety for all family members, including children.

There is variability in how families were impacted by COVID-19 based on pre-existing factors to the pandemic. Some families who were already experiencing low income, mental health needs, and experiences of racism or marginalization continued to be vulnerable during the pandemic [9]. Families that did not have these risk factors pre-pandemic may have experienced resilience or even a posttraumatic growth [9].

However, the relationship is not a simple cause and effect. It is suggested that *disruptions* in family functioning lead to increases in child maladjustment, not just *pre-existing* family vulnerability [10].

2.2 Effect of school closures on children's emotions

2.2.1 Isolation

Measures of isolation that were taken to control the pandemic affected children in a direct physical way. For children and adolescents, this isolation was due to lockdown, closure of schools, and physical distancing, all of which contributed to increased feelings of loneliness. These feelings of loneliness may then have contributed to an increase in anxiety and depression [4]. Children whose parents were front-line healthcare workers and who were being taken care of by other family members during isolation and quarantine, were also subjected to separation anxiety and increased worrying about parent safety [11]. In addition, children and adolescents who lost parents or caregivers to the pandemic may also have experienced levels of PTSD related to loss, grief, loneliness, and location trauma, such as moving to a foster home [11].

The closure of schools and other venues also affected children and adolescents socially by cutting off or abruptly altering friendships and other relationships. Children were missing milestone moments in life such as graduations, prom, dances, athletic events, and tournaments. Associations with friends and teachers were abruptly cut off. Children and adolescents felt they were missing out on usual activities, which lead to increased anger, grief, and helplessness [4]. Adolescents in particular were concerned about peer relationships, as would be expected given their developmental stage [8, 15]. School routines are often a consistent influence in children's lives and without school, there was a lack of access to resources that students obtained through schools such as peer support groups, counseling, and access to nutritious foods [6, 15].

2.2.2 Increase in family violence

An indirect effect of closing schools was the noted increase in family violence [16, 17]. For some of the youngest and most vulnerable in society, home was the least safe place to be [5, 14, 17]. The declaration to isolate and quarantine was meant to protect, but for the most vulnerable, the mandate did not show a regard for the needs of children and adolescents [16]. In addition, the shelter-in-place orders allowed for a lack of, or significant decrease in, family contact with and access to professionals such as doctors, health visitors, social workers or other support [11, 16]. The disruptions of isolation, financial stress, and changes in routine experienced by caregivers, may have translated to increased risk of family violence via increased family conflict, harsh parenting style, or child maltreatment [17]. Caregiver stress may have led to amplified adult behaviors, which may then be directed toward children. More time together during lockdown also exposed more children to parental substance use disorders and allowed children to witness adult family members experience impacts of economic stress and their own adult mental health issues [4]. Regardless of why a caregiver may be stressed and exhibiting heightened behaviors, children tended to internalize and blame themselves. A qualitative study captured some children's perspectives of this [17]:

> *"They say I'm a disappointment ...I'm the problem why they don't have enough money every week"* Age 13

> *"My mom doesn't wanna talk to me. My dad's sick. It's like everything is going down on me"* Age 15

> *"There are times when they call me worthless and I am nothing...and it stays with me...they always hit me and curse out at me"* Age 13

3. Blurring the boundaries of home and school

3.1 Living space as school space

In 2020 children were channeled into remote instruction due to public school closures. Young people experienced a sudden change in a routine that was a major part of their daily lives: school attendance. With school closures and the transition to school at home, children were now experiencing learning in a different location and context; the school was replaced by the home and teachers were now supplanted with caregivers [18]. These caregivers were also expected to serve in multiple roles (working remotely for jobs, provide academic support for their children, and parent responsibilities) [18]. Home learning etched a different type of caregiver/child relationship to emerge since "homeschool" was not an active choice that either parent or child had made [19]. Instead, it was a situation forced upon all parties by the pandemic. What loosely had been called "homeschool", now became "school from home"—a nebulous endeavor complicated by blurred boundaries. Boundaries were fuzzy not only about the place where school was happening (home vs school building), but ambiguity also surrounded the role caregivers were being asked to now take upon themselves (teacher/supervisor vs parent). Before the pandemic schools were typically seen as a distinct and separate place from the home where certain rules, routines, and activities took place [20]. The closing of schools during the pandemic forced these things that happened in the public school space to now happen in the private space of the home. This movement from a public to private sphere fostered disruptions for children on several fronts including a disruption in space, social interaction, and parent/teacher figures.

Space where children learn was disrupted. Not only was the location of learning changed from school to home, but at times the home could not provide an adequate space or materials needed for the learning. This could be demonstrated by frustrations of shared space between children/siblings now schooling from home, caregivers also working from home in the same space, or lack of materials to support children learning from home [20]. In addition, if caregivers were already trying to work their own jobs (from home or away as an essential worker) they reported a lack of time to supervise learning [20]. Caregivers working from home found it difficult to balance their own work and family responsibilities with their children constantly near them in their physical space [18]. There were also issues related to technology, hardware, and learning systems. For some families not all children had an electronic learning device, or else had to share with other siblings. Issues of internet, connectivity, and bandwidth also lead to confusion and frustration in conducting school from home [19]. Concerns about children missing out on learning surfaced [21].

Daily routines and social interactions were disrupted for children and adolescents with school closures. Children develop by having regular interactions with teachers and peers, and this immediate environment was not available for students during the pandemic [18]. Interactions were much more limited, which had the possibility of affecting social-emotional development [21]. Children also reported missing their schools, friends, teachers, and activities [18]. Adolescents specifically worried that closing schools would lead to their learning lagging behind, or not progressing in school [8].

3.2 Challenge to established roles

Shifting school from public space to the home space also challenged the established roles of teacher and parent. With the closing of schools, caregivers were expected to take on a much greater responsibility for their children's learning, or take on the teacher role [18, 20]. Many parents felt very inadequate in this role shift and did not see themselves as having skills to support children's learning at home, especially for children who were identified as having special needs [19, 20]. There also seemed to be disconnect between what the children recognized from learning in school pre-pandemic and what they were now being asked to learn from home. At times parents felt they were expected to fill gaps in curriculum that somehow got lost between what teachers were asking students to do remotely, and what could actually be carried out in the home in a realistic fashion [19].

In addition to content learning, caregivers were also expected to supervise their children's learning, and if needed, motivate them as well. Teachers have a large *physical* presence in the classroom and this was noticeably missing in the change to school at home [21]. Not all children and adolescents are motivated, self-directed learners and children expressed that seemingly, they did not want to "learn classroom stuff from parents" [20]. This meant that children and adolescents struggled with suddenly trying to negotiate a new identity of their caregiver as their teacher too [20]. Some parents were also uncomfortable with what felt like sabotaging their parenting relationship with their child in order to establish a formal teaching relationship [20].

3.3 Impact of increased screen time

The pandemic significantly increased the number of hours children and adolescents spent online and with social media [8]. This was a fallout brought on by the COVID-19 isolation and the closure of schools. Increase in screen time is most notably linked to a decrease in sleep quality and even insomnia and for both children and adolescents [22, 23]. Screen time may be related to other salient factors, which in turn contribute to sleep disturbance. Other than the increase in blue light that can suppress natural melatonin production [24], an increase in screen time is also related to less physical activity; which in turn can worsen sleep quality [22, 23]. During the pandemic many venues for athletics, gyms, tracks, and recreational spaces were closed which contributed to less physical activity for children and adolescents. For school-age children the change in routine of not commuting to school and having to adapt to virtual classrooms, may have impacted a usual bedtime, allowing children to stay up later, or sleep in later; all of which can disrupt sleep [22]. Adolescents specifically had a lack of pressure to wake early to go to school and also experienced decreased school motivation [22]. Both of these variables are connected to worse sleep quality in adolescents.

While screen time did increase due to learning and school at home activities, there was also an increase in general media consumption, which included news about the pandemic and social media. COVID-19 related worries were also associated with children's insomnia and sleep troubles [23]. For adolescents, who developmentally gravitate more toward peer groups, social media was used even more to try and maintain social status or reputation, connections with friends, or feelings of peer belonging [8]. However, virtual settings may have amplified existing interpersonal struggles and caused excessive focus on negative feelings with peers, both of which are related to adolescent depression [8]. Social media and screens are a double-edged sword—an increase in screen time was necessary to gain needed information about the pandemic, participate in school, and to maintain social connections. However, excessive media use tended to lead to excessive worries or depression, which then affected sleep quality.

Sleep quality and sleep duration for children and adolescents were also affected during the pandemic by systemic family factors. During pandemic lockdown caregivers were increasingly worried about pandemic related stressors (financial, health, school closings, childcare) and these worries affected parent sleep quality [23, 25]. This poor parental sleep quality was then associated with decreased sleep quality for children [23]. Parents and children mutually influence each other's behavior within the family system [9], so it is possible that child and adolescent sleep habits are affected by parental behaviors, whether that is by children mimicking what they see their own caregivers do in terms of sleep hygiene, digital habits, and physical activity, or if caregivers are directly communicating pandemic worries and concerns to their children [23]. Regardless of the exact mechanism, both parent and child sleep quality were affected during the pandemic and parent COVID-19 related worries and sleep disruptions are associated with children's sleep insomnia and disruptions [23].

4. Hope and resilience

While many aspects of the pandemic and lockdown affected children in a manner that could be viewed as detrimental to their emotional growth and intellectual development, this is not the story for every child. Some families and children experienced resilience or post-traumatic growth during the pandemic [9]. This resilience is much more than merely "looking on the bright side" or having a positive attitude. It refers to the capacity of a family to withstand damaging effects, or to rebound from adversity [26]. The pandemic allowed some families to feel that they were able to get to know each other better, redefine what is important, and strengthen family bonds. Some children and adolescents identify the pandemic and lockdown as something that ultimately brought growth and solidarity or instilled a feeling of victory. It is suggested that close relationships within the family system helped offset the many disruptions caused by the pandemic [9]. Also, children who adopted a family belief system and frame work consistent with "making sense" of the pandemic, seeing greater good from the disaster, and having a view of themselves as being "in it together" with their families, tended to cultivate resilience [26].

There is also evidence that family resilience can buffer the effect of parental stress on children in two ways [27]. Not only does family resilience and well-being impact how parents perceive any challenging or problematic behavior in their children, but family well-being can also mitigate the reactive "coercive cycle" [13] that can occur between stressed children and their stressed caregivers.

5. Implications for social workers

Family systems theory posits that individuals do not exist in a vacuum but are influenced by those they interact with, while simultaneously influencing others in the system. What this means for social workers is that while working with a child, social workers are in essence working with the entire family. Often social workers come into children's lives at times of crisis. Reports from adult caregivers usually center around the problematic behavior of the child and it may be hoped that the social worker can "fix" the child. The awareness of how caregiver psychological health impacts child mental health needs to be paramount during post-pandemic times. Are social workers who work with children also asking about and assessing caregiver stress levels? The pandemic brought on immediate concerns for caregivers related to financial insecurity, job loss, stresses related to childcare, and closure of schools. The psychological stress a caregiver experiences often manifests in problematic parenting behaviors. The problematic parenting may invite children to act out more or push boundaries. These behaviors from children can then elicit even more heighted reactions from parents. During this cycle of reactivity, the social worker can be called in to deal with problematic child behaviors, or the worker can even become involved at the point where actual child maltreatment or abuse has occurred. It is tempting to *only* focus on the child. However, in the pandemic wake, social workers also need to assess what is contributing to the parent stress. How can parent stress be remedied as well? Addressing parent stress due to the pandemic will ultimately result in better outcomes for children and adolescents.

Some parent stress can stem from a lack of social support. During the pandemic social and family support networks were severely disrupted. Support for the family pre-pandemic could include daycare or extended family who cared for the children. Social support was also gained from friends and family and church groups. Other support came from school programs that provided meals. Social workers need to be even more vigilant now in assessing how the social support for caregivers has changed since the pandemic. For example, if an extended family member was providing after school care before the pandemic, and this adult died from COVID-19 during the pandemic, the seemingly "positive" change of children attending school again could still be a major stress for a caregiver whose social support will never be back to what it was pre-pandemic. Social workers need to be in tune with these social support stresses on caregivers, as challenges to a caregiver's mental health, also affect anxiety and depression levels in the children they care for.

During the pandemic and lockdown there was an increase in family violence and child maltreatment. Some children were already not experiencing safety in their homes and the lockdown essentially made that situation worse. To adapt to social distancing, many medical and social services went to some form of telehealth out of necessity. If able, social workers were connecting with those they served on the phone, through face-time, or even through zoom or other digital means. The lack of in-home visits or in-person meetings meant that there was some child abuse or family violence that went "under the radar". Not all physical signs of abuse can be seen via video or can be safely revealed in a telehealth visit due to the lack of privacy on the end of the child or client. After time, in-person or in-home visits were authorized as COVID-19 regulations lifted, however, many institutions continue telehealth type visits out of ease, convenience, concern for health safety, or lowered cost. With virtual meetings or sessions being more accepted for assessment or follow-up in cases, social workers need to be keenly aware of what might be missed. How can child abuse

or family violence be accurately assessed through a screen? If the meeting with a child was in-person instead of through the screen, what else may be noticed? What other questions should be asked if meeting virtually and not in-person? If a social worker cannot see the children or adults they work with in-person, what are ways this challenge can be met? How do assessment and intervention for child abuse adjust when working with the family at a (social) distance?

When schools closed, there was a big shift to bring the public-school realm into the privacy of the home. Roles for caregivers were changed as many were now expected to be an educator, a tech specialist, and homework enforcer. This change in roles was a significant stress on caregivers as well as children. When schools moved to meet in-person again it may not have been an easy "back to normal" for many children. Social workers working in schools and with children cannot assume that back to school means back to the way things were pre-pandemic. Children are now faced with navigating social relationships again, as well as facing possible stresses of being behind academically. How can social workers be more sensitive to the needs of those children who are not coming back to school in the same academic situation in which they left? For those children who are at a vulnerable window for acquiring reading and language skills, the return to school can be especially sensitive, as up to two years of instruction at a peak learning time were lost. For those children who speak another language in their family-of-origin as the primary language, the return to school was even more fraught with stress for the child, as perhaps they had not been regularly speaking and learning the dominant language used in the school setting. The return to school post-pandemic is a setting in which social workers can especially be sensitive and supportive to those students who now struggle, but perhaps did not before the onset of the pandemic.

One thing learned from the many studies done during the pandemic and lockdown is that most of the research done on outcomes of children during the pandemic is based on reports or data collected from adults: not from the children themselves. It would also be very powerful for social workers that work with children and adolescents to obtain information from the children and adolescents firsthand. While reports on child behaviors and progress through adult eyes has its place, it is also of value to know from the children themselves their own perspectives on the problem, challenges, or progress they are engaging in. It would be very meaningful to have children and adolescents contribute more consistently to the information we have on how the pandemic affected them. What would children define as important things for adults, including social workers and researchers, to know about their perspective of the pandemic? What was their unfiltered experience of so many changes? What was it about their families that perhaps helped create safety and security for them during the pandemic? Which rituals, dynamics, or world views were already in place in the family prior to the pandemic that allowed some children and adolescents to persist and endure, while others of their peers may have struggled? How can we creatively invite children and adolescents to share their stories, viewpoints, and experiences, not just to gain information for case files, but to help children feel empowered and share their voice? What difference would it make to the children in post-pandemic times if social workers were empowering them to help with assessment, case management, and any interventions enacted? Empowerment can take many forms for children. For example, social workers utilizing child play and child art can obtain additional perspective on stressors affecting the child and their family, as well as coping mechanisms and progress.

6. Conclusion

Disasters and uncontrollable elements experienced locally and worldwide will not change. Everyone will be called upon to intersect with hard times and life and death situations. There is a responsibility for adults. If much of child and adolescent wellbeing is influenced by the wellbeing of the adults in their lives, how are social workers encouraging caregiver self-care? How does self-care that social workers do for themselves impact their work with children and adolescents? What internal resources do we adults need in order to provide sensitive care to children in the face of any "pandemic proportion" disaster [27]? What do we adults (caregivers and social workers) need to change about our own physical and emotional preparation, coping, or outlook, knowing how greatly our own physical and mental health affects the children we interact with or live with? How can we better foster resilience in our children to enable them to succeed and thrive no matter the global challenge that may be occurring?

There are varying public responses to what turn out to be historic events. COVID-19 is an event that will be marked in time with other pandemics, and referred to by name as wars or hurricanes are. The pandemic is a marker in time, and just like other challenging times, the pandemic will not last forever. Resilient families make resilient communities, and the feeling of hope can connect people to each other around the world. Resiliency in children is dependent on resiliency in adults and in the families over which we have stewardship. When children move forward in life with a hopeful and growth centered mindset it is a self-expression of freedom from the grasp of COVID-19. Social workers can take a large role in assisting this forward movement.

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The South African Social Policy and the Role of Green Social Work: COVID-19 and beyond

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Abstract

The main aim of this chapter is to assess the South African social policy and the role of Green Social Work during COVID-19 and beyond, considering social help programs and structural inequality. The Social policy of South Africa is governed by the Bill of Rights enshrined in the Constitution of the Republic of South Africa. The Constitution guaranteed the rights of human beings. However, COVID-19 has violated human rights considering the South African economic growth, which was sluggish with a high rate of unemployment even before the pandemic. It has aggravated the structural inequalities that characterize the country's economy. However, South Africa's 'powerful social protection programs' played a vital role to vulnerable people in meeting their basic needs, particularly during COVID-19, even though some communities experienced limited fiscal resources. The paper will use secondary sources to assess social policy adjustments and innovations that can be used for improvement.

Keywords: social policy, green social work, structural inequality, unemployment, human rights

1. Introduction

The main aim of this chapter is to assess the South African social policy and the role of Green Social Work during COVID-19 and beyond, considering social help programs and structural inequality [1]. The Social policy of South Africa is governed by the Bill of Rights enshrined in the Constitution of the Republic of South Africa [1]. The Constitution guarantees the rights of a human being to have access to education, health care, housing, social help programs, and important others. However, COVID-19 has violated human rights considering the South African economic growth, which was sluggish with a high rate of unemployment even before the pandemic. The pandemic has wreaked substantial damage to people's lives and the South African economy. It has aggravated the structural inequalities that characterize the country's economy. Losing jobs and income leads to a reduced ability to access health care and a proper diet. The closure of companies, shops, border gates, government offices, universities, and schools during COVID-19 has impacted the economy of the country. It has transmitted some multisectoral variables, which has impacted the economy, psychosocial well-being of citizens, and the environment through food security, unemployment, trade, and

industry. The pandemic has exacerbated social ills. Vulnerable rural communities were the hardest hit by the pandemic because of a lack of necessities, such as access to clean water, availability of food, and proper shelter. However, South Africa's 'powerful social protection programs' played a vital role to vulnerable people in meeting their basic needs, particularly during COVID-19, even though some communities experienced limited fiscal resources. The paper will use secondary sources to assess social policy adjustments and innovations that can be used for improvement.

2. Background

South African social policy is regarded as a state intervention tool that incorporates social relations and social development. The social policy serves as a central pivot in terms of distribution, production, reproduction, and protection which operate in line with the economic policy to pursue natural, social, and economic goals. South Africa's post-Apartheid policy is governed by a reconstructive development program [2].

The occurrence of COVID-19 in South Africa on the 5th of March 2020, as identified by South Africa's National Institute for Communicable Diseases [2, 3], resulted in national lockdowns being implemented with the imposed restrictions on interaction and social mobility to the COVID-19 pandemic. Such a policy gave a lot of countries the latitude to establish the infrastructure and minimize the virus from spreading. New social policy measures were put in place to minimize poverty, inequality, unemployment, and several social, special problem areas in the post-Apartheid era. In South Africa, the government augmented the rooted policy to deal with the societal needs of citizens [2]. Arguably, the pandemic escalated into the extreme circle of poverty, which also cut across the globe, particularly in developing countries like South Africa, Mozambique, Zimbabwe, and many developing countries in Africa. The situation was worsened by the previous Apartheid policies which had a negative impact to African communities in South Africa.

About 200 territories or countries had just over 1000 planned, adapted, or introduced social-protective measures in 45 countries in March 2020 [4]. Such an elevation of social assistance was incorporated in the government of South Africa package relief mitigating measures on extensive and intensive margins. Approximately 18 million grant beneficiaries and about 12 million additional recipients might have benefited [5]. COVID 19 has violated human rights as stipulated in the Constitution of the Republic of South Africa [1]. As stipulated in the Constitution, every human being is entitled to the core human rights essential to the fulfillment of human beings. The United Nations High Commissioner for Human Rights Office regards health as a basic right and our understanding of our lives in dignity. Human rights are viewed as fundamental rights for justice, mutual respect, human dignity, and tolerance. Parallel to this notion, we have basic rights to social security and rights to education. These rights are essential for practice to promote mental health and physical health. The late ex-President of the Republic of South Africa , Rolihlahla Nelson Mandela has indicated that if human beings are challenged, their humanity is also challenged.

The Universal Declaration of Human Rights (UDHR) affirms the worth and dignity of every individual and their rights and freedoms are laid out in 30 articles [6]: Which cover the right to security, life, nationality, movement, freedom of speech, religion, expression, freedom from slavery, discrimination, torture, assembly, and arbitrary arrest. We usually refer to such rights as political and civil rights. Human beings have a right to social, economic, and cultural rights to honor their dignity and developmental

personality freedom [6, 7]. Collective rights refer to development, peace, and natural resources, particularly water [8, 9]. However, these rights cease to exist because of the COVID pandemic globally.

3. Theoretical framework

Constructivism forms the foundation of this chapter. Constructivism is regarded as a learning theory [10, 11]. Constructivism is regarded as a theory of meaning. As individuals react daily, they create their own understandings based on what they already believe, see, and know. Construction is regarded as a model of knowing rather than a theory of learning. However, the view of constructivism as a learning theory has given direction to most constructivist developmental pedagogy. Constructivism is based on the significance of culture, and it values cognitive development. As individuals focus on shared practices, they construct the cognitive tools that are essential for growth. Learning becomes an enculturation process in a practical community. Interventions and social influences generate the ability to share meaning and meaning is transferred to each individual group member [11–13]. Individuals know what is happening around them through fake and real stories. The story is always about human beings. It is because of the story that development is taking place. The narrative of the COVID-19 pandemic united countries through the sharing of ideas to reach amicable solutions. Therefore, multiculturalism has played a significant role in channeling most countries to think beyond the box.

Globally, citizens believe that they have the fundamental right to protect themselves and their communities from environmental space, considering the notion of climate change. They also have a right to clean land, clean air, good health, water, and transportation, among other amenities. I regard social workers as advocates for change and every aspect of social justice, which includes environmental concerns in which communities and groups exist. Wronka, in Lucas-Derby [14], writes that to live in an environment that is healthy is to be healthy, particularly when considering human dignity and nondiscrimination in a world of social justice. Based on these arguments, a question arises: how can constructive measures be put in place for society to develop resilience to global warming? From the social developmental perspective, issues of the environment cross mezzo, macro, and micro levels of the practice of social work, and they warrant increased attention.

Based on this question, one can deduce the necessity for a call from different academics, professionals, practitioners, business sectors, government sectors, and nongovernment sectors to adopt a holistic consideration of people in the environment which can be practiced locally, nationally, and globally. Such a call will operate parallel with the profession of Social Work which adopts a holistic approach to dealing with clients' systems, group systems, and community systems in the social environment.

4. The role of social assistance programs

Since democracy, social help specifically has elevated significantly with approximately 18 million beneficiaries in South Africa, with effect from 2019 to 2020, costing 3% of the Gross Domestic Product (GDP). The poor are the best-targeted group benefiting in South Africa [15]. The study conducted (The National Income Dynamics Study-Coronavirus Rapid Mobile Survey (NIDS-CRAM)) shows 6.4 million grant recipients [15], and the studies further [15] show the poorer of the poorest (20%

households) benefit from the grant more than others. The system is very effective in addressing inequality and poverty as it targets the most vulnerable, giving a helping hand to the poorest segments of the population. The system is characterized by effective delivery systems that show beneficiaries, including payment registrations and measures, which can be escalated instantly during crises such as the COVID pandemic. Arguably, beneficiaries can be engaged in capacity training to craft the journey for entrepreneurship in assisting communities to be self-reliant.

Given 15.4% of government expenditure, the South African Social Assistance system is very high as compared to other upper-middle-income countries (UMICs).

The social pension expenditure is rated as higher than its peer's counterparts (51%). Thirty-eight percent (38%) of expenditure is allocated for child support grants and foster child support grants. Social grants in South Africa are aimed at responding to diverse basic needs. About 11.5% of individuals benefited from the grant in June 2020. In a new report (World Bank) ascertaining South African government systems and social assistance programs, it is evident that social assistance programs play a significant role in mitigating poverty. The report also outlines policy considerations that are beneficial in moving the social transfer system of South Africa to productive investments toward human sustainability. The South African government extended its social assistance program by elevating all social grants that are in existence (250−/350) for a period of six months. The system has now captured millions of needy people due to COVID-19 grants. The extent of the coverage is low, leading to repressiveness. The pandemic induced changes to social assistance in South Africa. That said, capacity training for beneficiaries will not only benefit them but will, in turn, boost the economy of the country based on entrepreneurs' skills. The notion of entrepreneurs' skills can also be infused into children's curricula to breed an innovative cohort that will break down the intergenerational circle.

The current President of South Africa, Matamela Cyril Ramaphosa, announced the government's package of relief measures: a stimulus amounting to over R500 billion (approximately 10% of GDP), of which 50 billion was initially allocated to social assistance. However, there were concerns that social assistance should be expanded to support low-income households. Now, a question arises as to how these low-income households can be engaged in innovative measures to navigate self-reliance. For instance, the government spent a lot of money on child support grants mainly because of teenage pregnancies. Parents, teachers, academics, children, and teenagers, and nongovernment and government structures like Social Development, Department of Health, and Department of Education, can engage in preventative programs at the earliest age for these teenagers to mitigate the rate of teenage pregnancies which impact the economy of the country. The creation of a lot of factories/firms can also reduce the notion of the intergenerational cycle of poverty if this low-income group and teenage mothers are skilled to unlock their talents for absorbability in the labor market. The South African social policy system, particularly on child support grants for teenage mothers, needs review to come up with innovative entrepreneurship programs for these teenagers and the other beneficiaries to promote independence rather than degenerate into a vicious circle of poverty.

Social transfers appear to lack a full integration with other support services to assist beneficiaries to exit poverty, while the grants are helpful; They breed a cohort of the intergenerational cycle of poverty.

What matters here is for these grants to be infused with other innovative supportive measures that can assist these beneficiaries in catching a fish rather than continuously relying on the grants.

5. Structural inequality and COVID-19

5.1 Unpacking the concept of structural inequality

Structural inequality simply refers to an institutional economic privilege system that favors a certain group at the expense of the other group. The institutions cover business, law practices, and governmental policies. It also affects the education, health sector, race, gender, and multicultural diversity. I regard inequality as structural considering how other groups of people are deprived of accessing resources as designated by policies [16]. Colonialism's legacy [17, 18] played a significant role in strengthening structural inequality in South Africa. COVID-19 hit South Africans during a time when the vulnerability of the economy is worsened by a long period of depressed investment, high-risk public debt, and subdued growth.

COVID-19 has exacerbated the structural inequalities as stated in **Table 1** per South African provinces, focusing on the population at risk of falling below the upper bound of the poverty threshold by the provinces.

The table on COVID-19 needs assessment indicates, Gauteng taking the lead, followed by Kwa-Zulu Natal, Limpopo, Eastern Cape, Mpumalanga, and Western Cape as the provinces falling below the poverty threshold. The provinces warrant attention due to their high vulnerability level before Covid and the negative consequences from the pandemic especially regarding loss of income. Northwest, Free State, and Northern Cape have fewer numbers of people falling below the poverty crack as compared to others. There is a need for communities in different provinces to be engaged in valuable workshops and training to gain resilience, unlock their potential and deal with the misconceptions that they are poor.

6. The components of structural inequality and the effects of COVID-19

6.1 Education

South Africa became a democratic country in 1994. However, structural imbalances are still heavily influenced by Apartheid policies. Educational policies validate

Name of province	Total number	Poverty measurement
Gauteng	203.069	above 200.000
KwaZulu Natal	118.134	above 100.000
Limpopo	102.154	above 100.000
Mpumalanga	76.711	above 50.000
Western Cape	72.910	above 50.000
Northwest	34.889	below 50 000
Free State	33.838	below 50.000
Northern Cape	10.250	below 50.000
Eastern Cape	87.763	below 100.000

Table 1.
Adapted from COVID-19 rapid needs assessment/South Africa 2020.

such malpractices [19]. South Africa has approximately 13 million learners: 12.4 million in 23 of 6 public schools (407,000 teachers) and 632,000 learners' in independent schools. Half of the public schools operate without a digital mode of learning and one-quarter are without running water, whereas over 10% have no electricity and no perimeter fence. Some schools could resort to online education during the pandemic but lack of study space at home and lack of accessibility to data presented challenges to learners. Some universities that were not utilizing blended learning had challenges, as students were not familiar with the digital way of learning when COVID-19 knocked at the door. Arguably, low-income communities usually have students who receive inferior education than wealthier communities. Research findings show that incompatibility accounts for 37% of math students underperforming. This problem of structural inequality is clearly demarcated by services in public schools as opposed to those in private schools [16]. Existing strained social conditions, elevated high unemployment, inequality, and poverty worsened further, the educational system suffered and job losses disproportionately affected women, the youth as well as the poor [20]. The problem of structural inequality in South Africa operates against Section 28 of the Constitution of the Republic of South Africa which stipulates that every human being is privileged to basic education. On the contrary, the legacy of Apartheid has played a negative role in all South Africans receiving an unequal education. Arguably, proper education is the foundation for employability. All schools should have equal distribution of human and material resources, regardless of urban, rural, private, or public schools.

The White Paper [21] also affirms that when considering education as the most significant factor to determine employment followed by income. That said, failure to receive a proper education paves the way to the intergenerational circle of poverty. Parallel to this employability notion is Green Social Work that cherishes the right to life, which goes hand in glove with education, dignity, and protection.

6.2 Health

COVID-19 arrived in South Africa on the 5th of March 2020. Its arrival in South Africa had health implications as the mortality rate rose. This resulted in a significant increase in the mortality rate (crude death rate (CDR)) from 8.7 per 1000 people in 2020 to 11.6 death per 1000 people in 2021, which shows a drop in life expectancy for South Africa. Life expectancy for males declined from 62.4 in 2020 to 59.3 in 2021 and that for females from 68.4 to 64.6. People who are suffering from circulatory, respiratory, cancer diseases, and HIV/AIDS (human immunodeficiency virus/acquired immunodeficiency syndrome) are also at risk of mortality [22].

The State of the National Disaster on the 15th of March 2020 contained various regulations that were issued and amended by the Minister of Cooperative Governance & Traditional Affairs (GOGETA). Accessing health care in rural areas became a challenge, most particularly focusing on women, children, and older persons with disabilities. Children make up a vulnerable group in South Africa. COVID-19 marginalized them in terms of household income loss and malnutrition, and displaced children and migrants were at heightened risk. Elderly people also fall within the category of the at-risk group. The Old Age grant has increased by R250 monthly, but safe access and implementation remain a challenge. The disability grant has increased by R250, even though safe access and implementation are still a challenge.

Woolard et al. [23] posit that little improvement is achieved with social insurance. South African social insurance is primarily assisting formal sector employees [24].

The system does not protect the employees who are absorbed by the informal sector, as it incapacitates them moneywise. Underdeveloped wages resulted from underfunding. The effects of diseases like HIV/AIDS, tuberculosis (TB), and important others aggravated human resource and skill shortages [25]. Arguably, pandemics like the Coronavirus derailed the country's health status. The country has three basic social insurance measures.

The unemployment insurance fund (UIF), Road Accident Fund (RAF), and the Compensation Fund. Thus, the social security system encapsulates three main pillars: statutory funds, social help, and voluntary funds. Social help incorporates three sets of government interventions: Social grants from the Department of Social Development administered by SASSA, public works the expanded public work programme (EPWP) facilitated by the Public Works department and the community work community work programme (CWP), and other programs such as the national school nutrition programme (NSNP) within the Department of Basic Education. The statutory funds include the unemployment insurance fund and the compensations funds which fall under the Department of Employment and Labour and the Road Accident Fund which falls under Transport and finally the voluntary funds from medical schemes and retirement. Social insurance has a voluntary, regulated component that covers retirement and medical scheme.

There are loopholes in the net with low provisions for unemployed working-age groups [26]. South African social protection program is of benefit to older persons, children, and people living with a disability. Social help programs in South Africa are inclusive and comprehensive. These beneficial programs are augmented with the relief package, including a COVID-19 relief grant of R350.00 monthly and temporary additions to Old Age Pension, Care Dependency, Foster Child Grant, Disability Grant, and Child Support Grant. Undocumented foreigners are of worrying concern in all the grant categories as well as 2 million poor children who are South African Citizens without birth certificates (COVID-19 Rapid Needs Assessment, S.A 2020, [27]). COVID-19 marginalized a lot of communities as they were under pressure to abandon their cultural way of life, particularly focusing on issues like running funerals, social distancing, and regular washing of hands in the absence of water in certain communities. Arguably, the Constitution should be implemented effectively to protect South African citizens and documented foreigners in terms of the grant administration. Illegal foreigners should be deported to their home countries for proper maintenance of the country and to alleviate a risky life situation.

6.3 Housing

The Constitution of the Republic of South Africa [1] allows everyone to have access to proper housing. The Department of Housing Settlements (DHS)'s mandate is to fast-track and establish sustainable developmental housing in collaboration with municipalities, as stipulated in Section 3 of the Housing Act, 1997. Statistics South Africa (STAT SA) shows that general households occupied informal dwellings in 2019. About 12.7% of households still occupied informal dwellings. The population and household growth were regarded as measuring contributory factors for these existing backlogs in relation to new demands.

Limpopo showed 95% of formal households, followed by Mpumalanga with 89.6%, Gauteng and Western Cape, both 8.7%, Northwest having 18.4%, Eastern Cape with (23.0%), and Kwa-Zulu Natal were the only provinces with a lot of traditional dwellings. About 81.9% lived in formal dwellings, while 16.8% lived in informal

dwellings. The White Paper [28] defines reconstruction development programs based on coherent, integrated socioeconomic progress. The problem of segregation (Group Areas Act, 1950) in health, education, transport, housing, and employment manifested itself in the shape of deep scars of structural inequality and economic deficiency. Such scars were aggravated by COVID-19, which resulted in most people losing their jobs, being retrenched, being unable to practice social distancing in small dwellings that are packed to capacity, lack of adequate digital resources for pupils and students in schools, high mortality deriving from the intergenerational circle of poverty, and lack of resources in public healthcare facilities. There is a need for an extra budget on an annual basis for the development of extra Reconstruction and Development Programme (RDP) housing for communities that are still struggling, particularly those that occupy informal dwellings.

6.4 Gender and race

The intersection of gender and race has significant real global consequences. The system of race and gender discrimination is separated into four categories: ideological, internalized, interpersonal, and institutional levels [29]. Arguably traditionally, men were regarded as breadwinners of the family, while it relegated women to domestic spheres. Leadership roles were assigned to men, and men would believe that they are inherently the best because of societal ideological biases and such beliefs would be escalated to organizational and institutional structures. Given the South African situation, some women face multiple challenges. Even before COVID-19, they were subjected to hunger, poverty, gender-based violence, internal jobs, low income, and incompatibility in gender, particularly in the workplace.

The rate of gender-based violence appeared to have been engineered by the national lockdown during COVID-19, considering estimated scenarios that always take place unreported. Such unreported scenarios warrant educational programs and proper implementation of the regulations to protect vulnerable communities. The Constitution of the Republic of South Africa [1] affirms that every human being has the right to human dignity. The right holders should leave no stone unturned to report elements of discrimination for justice to take its toll. Arguably, a human being's right can never be compromised. In other words, compromising human beings' rights equals polluting the environment. Perpetrators should face the mighty law and the law should always be user-friendly to victims.

The narrative COVID-19 pandemic became a global health disease since its conception in Wuhan, the city of China. The pandemic cuts across all sexes most importantly older persons with multiple comorbidities like diabetes, hypertension, and chronic diseases. The psychological and socioeconomic differences impact of COVID-19 affecting females and males was important in preparing for and mitigating the pandemic. Ethnic groups usually have higher levels of medical comorbidities and lower socioeconomic status, which eased the journey of the virus contracted. School closure, on the other hand, pressurized a lot of women having families to take a lead in the provision of formal care for their surrounding families, which curtailed opportunities for women to advance economically [30]. Such a practice was witnessed during the Apartheid era in South Africa where women were subjected to household chores based on their femininity. Taking the gender issue into cognizance during COVID 19 is very critical as most South African women, like in other parts of the country, were already not represented in the labor market [31, 32], particularly considering the gender disparity gap in the workplace. Men and women witness negative effects of health and economic

crises unevenly, as they have various roles at home and in the labor market. The early evidence from rapid assessment in countries, such as the UK, the USA, and Israel, suggests that women were more likely to lose their jobs, work fewer hours, or quit during lockdown [31]. The legacy of Apartheid in South Africa disrupted families during the racial segregation system, which led men to migrate to urban areas in search of greener pastures, of which some ended in family disorganization. The situation is gradually changing, as women are now entitled to occupy managerial positions in terms of decision-making, even though they are still in the minority. The patriarchal mentality that women cannot occupy higher positions still exists in some communities and some institutions of higher learning. Such practices warrant women to intervene through registered affiliate bodies and unions to challenge such malpractices.

Colonialism and racism are inseparable. The reformation of social policies is reflected in the abandonment of institutional racism and social rights based on nonracial categories [25]. However, the socioeconomic landscape still needs a lot of restructuring as compared to the political space in South African democracy.

Studies [33] indicate the first cases of COVID-19 among males dominating with 73% and females at 27%, possibly due to an increased prevalence of smoking and cardiopulmonary disease. However, a recent study on COVID-19 [34] in China shows that both mortality and severity rates were worse among both males and females. Studies further show that racial disparity is in existence depending on the population of interest. Arguably, cultural differences cannot perpetuate discrimination and inequality, considering the fact that all human beings are entitled to equal treatment without being discriminated against. South Africa has adopted a rainbow nation strategy since the dawn of democracy in terms of race, even though the problem of race persists. The Social Work profession cherishes this principle through respect by treating the client and the community system without judging them as clients and communities are unique with inherent dignity.

Given that a lot of minorities have a higher population with low socioeconomic status, this may be a contributory factor to the high prevalence of COVID-19 infections. Most South African women, on the other hand, suffered a lot of gender-based violence during COVID-19, with stress, anxiety, and depression leading to mental health problems. Research indicates that there are still structural gender biases in communities and in the workplace [16]. Such malpractices warrant strategic measures to be in place in the workspace environment for the promotion of productivity and a healthy environment.

6.5 Cultural diversity

Cultural diversity refers to different cultural groups within the societal space. It is inclusive of various beliefs, morals, knowledge, religions, customs, genders, ethnicities, races, nationalities, sexual orientations, and important others. I refer to cultural diversity as "multiculturalism" [35, 36]. What matters here is for these various groups to share ideas for promoting productivity and innovation while their *status quo* is maintained and respected.

People should be accepted the way they are, disregarding their cultural orientation. The notion of diversity encapsulates respect and acceptance. The notion of invisibility comes into the arena, which refers to human rights whether political, civil, social, economic, or cultural services as a critical point to human beings' dignity. These rights possess equal status and therefore cannot be hierarchically ranked. Unfortunately, the legacy of Apartheid has bred an intergenerational circle of poverty

by ranking human beings based on culture. Social work principles and human rights are interconnected particularly when the focus is on the realization that rights are intertwined. The inalienability and universality of rights, referring to all human beings that they are entitled to human rights which could be neither taken away nor given, should be cherished for the betterment of communities. Therefore, human rights principles [6, 7, 37] should be respected and implemented. Parallel to these rights is the principle of acceptance in social work, which emphasizes that clients should be accepted, disregarding their individual and environmental backgrounds. Thus, every client should be accorded the right to be accepted as a human being regardless of her personality, along with the dimensions of race, sexual orientation, religion, beliefs, physical disabilities, ethnicity, gender, and socioeconomic background.

South Africa contains approximately 3.9 million migrants (70% from South African Development Community (SADC)) and around 266,000 asylum seekers and refugees. It is very difficult to estimate undocumented migrants and the group can be at risk of being exploited in the labor market.

The situation is currently becoming tense with this new Operation Dudula Movement which appears to have intersected the role of the Police and the Department of Home Affairs to assist the government in dealing with undocumented foreigners. Such a move may perpetuate unhealthy relationships among South African citizens, undocumented foreigners, and asylum seekers if the procedure is executed without the legislative framework.

7. Employment, economy, and livelihoods

I rate South Africa among the upper-middle-income countries with a population of 59 million, of whom 5.3 million are 60 or older.

High inequality means that about 55% of the population lives below the upper-bound poverty datum line. The economic growth slowed for two consecutive quarters at 0.2%, in later 2019. The country's sovereign credit rating was downgraded to junk status in March 2020, which amalgamates with its weakness since COVID-19 commenced [38]. Nutrition and security were compromised for the population, considering the vulnerable populations due to people's inaccessibility of food. About 8.2 million South Africans were hard hit by the pandemic due to already living below the poverty food threshold. Such a situation also affected the role of Green Social Work, as COVID violated the rights of human beings.

Social work is regarded as a human rights profession and has an etiological history based on human rights. Social work ethics urge social workers to render advocacy for the promotion of human rights. Social work's mission is based on meeting human beings' basic needs and enhancing their well-being with a special focus on the vulnerable ones and those who live below the poverty threshold [39]. Parallel to this argument is the Constitution of South Africa (1996), which guarantees that every citizen has equal treatment as protected by the law and it aims at improving the lives of all citizens in a quality system. However, the Coronavirus led to a loss of income which is estimated at between R41 million for 9.5 million affected employees in the formal sector, and 2.5 million workers and owners of small, medium, and microenterprises (SMMEs) affected (93% of the total informal sector).

School feeding came to a standstill during the lockdown, as was the case in education, invigorating future economic productivity, and competitiveness of the "adult

future notion." On the contrary, SASSA played an effective role in offering Relief to Distress. South Africa has a robust agricultural system and is also nationally secured in terms of food nation. However, in 2010, approximately 13.4 million experienced inadequate access to food while 1.6 million tasted hunger. COVID-19 has aggravated the entire food system at different points and levels. Communities that are unable to access clean water suffered a lot during COVID-19. Factoring the notion of human rights, there is still a great deal of separation on basic needs, such as food, water, housing, and shelter, which is against the Constitution of the Republic of South Africa as human rights are intertwined and inseparable. Maslow's [40] hierarchy of needs also affirms the argument. As Maslow argued, a human being should be entitled to physiological (food and clothing), safety (job security), love and belonging needs (friendship), esteem, and navigation for excellence, which is self-actualization. Human beings are motivated by Hierarchical needs.

Once there is a deficiency in meeting these needs, imbalances occur. Arguably, the imbalance can arise in the form of anxiety, stress, and depression, which might be triggered by hunger, lack of water, and shelter as well as loneliness. Proper administrative measures should always be effected to monitor corruptive activities that may impact negatively on the allocation of resources to communities. However, COVID-19 has pressurized people to maintain social distancing which led to isolation, particularly among those patients who were infected, and a lot of people could not give their families decent funerals due to cultural taboos which were violated by COVID-19 protocol.

The White Paper [28] defines reconstruction development programs based on coherent, integrated socioeconomic progress. The Paper regards a well-operating labor market as needed for generational employability and growth. Based on this matter, a holistic approach is needed to reform the economy of South Africa.

7.1 Structural inequality and the influence of green social work

Green Social Work is an integrated practice, supported by eco-social work approach. This approach considers the significant role of social workers in relation to environmental justice and the development of sustainable communities and societies [41]. The eco-social work approach refers to crucial issues connected to social work, such as human rights, promotion of equality, and social solidarity [42]. Developmental Green Social workers deal with a lack of provision for the well-being of the client system and the community system as well as a lack of health. They strive to foster interdependency between people and among people as well as the geo/ecosystem. The focus is more on resources, resilient structures, and the community. Green Social work promotes environmental justice for sustainable communities [43–45]. Assessment of needs is emphasized particularly in supporting communities and individuals to rebuild their lives and develop resilience as well as capacitating them to reduce future risks.

Green Social workers took the frontline space during COVID-19 to offer counseling for the community system to regain resilience. COVID-19 has challenged social workers to engage with health pandemics and provide essential services in conditions of uncertainty and high risk. They have safeguarded children, older adults, and diverse adults in "at risk" groups under tough conditions mediated by digital technologies, adhering to government injunctions, maintaining social and physical distancing under lockdowns, and working from home remotely.

Social workers have risen to the challenges, providing services with inadequate personal protective equipment and limited supervision and support [43]. Thus, for

several months, social workers have been on the frontline offering promotional, preventative, and treatment services during COVID 19 for ensuring the health and well-being of people. Social workers are increasingly being called upon to engage in global response to address environmental injustices as these problems affect the clients and communities they already serve [46]. Green Social Work regards ecology and social issues as inseparable. Humans are influenced and molded by their social and psychological bio conditions. The current economic growth system, as well as the markets that are free, contributes to a state of poverty, and the people are marginalized. On the other hand, the declining welfare state is gradually losing momentum to care for the poor in society due to a lack of resources caused by global warming. I directed special attention to the environmental crises' consequences and their impact on migration and poverty, as Dominelli shows [43].

Based on these issues, there is a need to develop new societal approaches in line with the principles of sustainability and justice. The situation can be tackled by recognizing and discovering indigenous views globally and reflecting on the post-colony's continuous settings. There is a need for a change in forms of distribution, consumption, and production. In her attempt to accomplish this aim, Dominelli [47] formulates a level approach that is multifaceted to integrate issues of reflexivity, resources, agency, and power. She followed emancipation aims as well as motivating the people to practice a good way of life for sustainability and justice reasons. That said, issues such as COVID-19 and social assistance programs show that social and ecological problems are regarded as global problems that can only be understood and solved through multilevel approaches rather than local and national approaches. The problem of COVID-19 cuts across the globe and in this regard, countries should forge links and hands in strategizing to deal with climate change.

With the marginalized clients, the poor, and the population that is disposed of. World Bank [48] regards inequality as a relationship governed by the privilege of one party to hold power over the other. It is a biosystem where privileges are given to other parties.

Taking South African social policy and structural inequality in this regard, one can deduce that other groups are still struggling with imbalances in terms of their original background, as the government is effectively distributing resources to the poor, even though there are limited fiscal resources. Social workers are forced to act against structural inequality starting from the poor to stigmatized people from diverse cultures for human rights promotion, as indicated in the international definition of Social Work and professional practice code of ethics [49]. To affirm social justice currently includes addressing environmental justice. Nobody can avoid environmental climate change impact. However, communities are capacitated to utilize natural resources for employability as well as developing resistance during this post pandemic era.

Green Social Work tackles structural inequalities that cover the unequal distribution of resources and power. It promotes global interconnectedness, social egalitarian relations, and solidarity.

It strives for the utilization of natural resources such as land, water, air, minerals, energy, and sources for benefiting all, disregarding the privileged. It also aims at protecting the earth's fauna and flora. Green Social Work aims at reforming socioeconomic-political forces that have a negative impact on the quality of life of the marginalized. It aims at securing policy changes and social transformation suitable for enhancing people's well-being and today's planet, as well as the privilege of being recognized and receiving care from others [43].

Therefore, it is the duty of Green Social workers to address: human rights violations; lack of provision for the health and well-being of people; lack of recognition of the interdependency among peoples and between people and the geo/ecosystem; lack of resilient structures; resources and community; assessing needs; assisting families to meet their obligations; supply individuals, communities in rebuilding their lives, developing resilience, and building capacity to minimize future risks; advocating lobbying and mobilizing for changes that aim to prevent the continuation of structural inequalities and develop sustainable alternative models for socioeconomic development. Based on that the governmental structures should also maximize resources for Green Social workers to assist communities to be innovative in terms of entrepreneurship concept.

8. Conclusion

There is a need for the South African government to continue providing social assistance programs to the needy. However, capacity-building workshops should be organized for these beneficiaries to venture into small businesses to promote the notion of entrepreneurship. Such capacity-building workshops will reduce the intergenerational cycle of poverty, particularly in rural areas.

The problem of structural inequality in South Africa can be reduced through equal distribution of resources and capacity training in rural and urban areas, particularly focusing on education, health, gender, cultural diversity, and housing matters. That said, Green Social workers face a major challenge in terms of challenging structural inequalities in different communities for the promotion of sustainability and justice.

Parallel to structural inequality, we feel the effects of the pandemic which have also affected the economy of the country. This calls for different role players to forge links and speak one voice in addressing the social ills of communities. Therefore, continuing in engagement with communities at the grassroots level with the aid of Green Social workers, locally, nationally, and internationally as well as in other countries, will assist in terms of coming up with innovative strategic measures to mitigate the social ills of the country. Behind every teamwork, there is a success.

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Section 3

Technology and Social Work

Child Protection Services and Information Communication Technology (ICT) in Zimbabwe: A Social Work Perspective

Taruvinga Muzingili

Abstract

This paper analyses the status of digital enhanced child protection within the context of social work practice in Zimbabwe. It critically reflects how digital child protection services have impacted social work practice. The paper presents key digital child protection services that are provided to children, such as telephone counselling, online counselling and digital case management, focusing mainly on child protection cases such as birth registration, abuse and access to justice. In providing these services, digitalisation in social work child protection services is affected by the absence of national framework on digital guidelines, difficulty in implementing core social work ethics, connectivity and digital gargets ownership. Finally, the paper shows that the current state of digitalisation has implications on social work ethics, social welfare policy and social work education and training.

Keywords: information communication technology, child protection services, client interaction, social work ethics, social work practice

1. Introduction

This paper argues that the acknowledgement of digital and technologies in social work has fashioned new changes on child protection services. Paying a particular reference to child protection, this paper critically analyses how the emergency of virtual social work which has emerged in Zimbabwe has changed the perspectives in child protection services. So often, child protection social work services have involved face-to-face practices in helping children from diverse background. However, social workers' feelings of trust or anxiety in the emergence of digital services are worthy evaluation within the context of enhancing child protection services in developing countries. From its origin, the social work profession has been at the forefront in responding to dynamic societal challenges. Digital technologies have 'crept in to' social work practice [1] and brought new opportunities and challenges [2]. Recent scholarly and professional investigations have yielded significant empirical contributions and policy implications pertaining to various digital platforms, including but

not limited to social media and social work [3, 4]. These studies have explored the application of e-social work, encompassing activities such as online research, patient treatment (including individual therapy, group dynamics and community engagement), training and education of social workers and the monitoring of social service programmes [5]. Additionally, research has examined the utilisation of digital technology to standardise social work practices and restrict practitioner discretion [6], as well as the technology usage patterns of young individuals in care and involved with social services [7]. Furthermore, attention has been given to the digital literacy of social work students and practitioners [8, 9], the potential future prospects of digital therapeutics, monitoring and communication in gerontological social work [10], the integration of digital technology in office reconfiguration and mobile, flexible work arrangements [11, 12] and the experiences of social workers engaging in 'virtual social work' during the Covid-19 pandemic [13]. Using author's institutional experience, this paper analyses the digital child protection services in Zimbabwe. In doing so, the paper also discusses the challenge facing developing countries like Zimbabwe in fully implementing digital technologies in a quest to improve child protection services.

2. Digitalisation, social work and child protection

Many scholars have called for more attention to be paid towards information communication technology (ICT) in social work training and practice [14–16]. There is a contention that the advancement of information and communication technologies (ICTs) has provided even the most geographically isolated regions of the globe with the potential to access resources of the utmost calibre [17]. Even if ICTs and the growth of the Internet are not without troubles [18, 19], the influence of digitalisation inevitably changes how social work profession in the context of child protection is judged. Various fields within the realm of human services have acknowledged the significance of information and communication technology (ICT) and have incorporated it as a fundamental component of their professional advancements. According to the National Business Education Association (NBEA), the acquisition of technological skills is deemed obligatory rather than discretionary in order to augment academic, business and personal efficacy [9]. In incorporating ICT, many scholars [20, 21] believe that resources are available that speak to the role of technology in the social work curriculum and in research and practice. The National Association of Social Workers (NASW) and Association of Social Work Boards have made significant progress in promoting the acknowledgement of information and communication technology (ICT) . They have achieved this through the publication of a comprehensive set of ten standards that pertain to the integration of technology into social work practice. These standards serve as a valuable resource for the social work profession, providing guidance on how to effectively incorporate technology. Within these established criteria, technology and its application in the field of social work are delineated as including any form of electronically facilitated engagement employed in the execution of proficient and morally sound social work practice. In order to demonstrate the synthetic relationship between social work and influence of technology, the standards include the following among others; ethics and values; cultural competencies and vulnerable peoples; technical competencies; privacy, confidentiality, documentation and security; and regulatory competencies. This reminds social workers at both global and local stages that technology is omnipresent in modern-day life.

The development of ICT and its packages has a bearing on social work ethics and values [22]. Social workers need to recognise the central importance of human relationships in their ethical background. ICTs are playing a major role in child protection human relationships, including contributing to the relevance of social work practice, in a social welfare organisation. In contemporary times, a growing number of youngsters are actively involved in digital interactions facilitated by various forms of information and communication technology (ICT). These include electronic communication channels such as email, short message service (SMS), social networking platforms such as Facebook, and even telephone-based counselling services. According to the observation made by the author [19], law enforcement agencies have the ability to access private social media posts by means of search warrants. The scientific literature has yet to address the matter of social media being utilised as an officially sanctioned assessment instrument within the context of child welfare [23]. According to prior academic research, it has been suggested that social workers should possess a comprehensive comprehension of the potential impact of information and communication technologies (ICTs) on the lives of their clients [15]. This necessitates a comprehension of the distinctions between communication processes in online interactions compared to in-person encounters, specifically through the analysis and interpretation of non-verbal cues. However, the major challenge in Zimbabwe is that the role of technology in social work profession is not well articulated in both academic and practice. With the current manifestation of cyber-ethics in several professional terrains, social workers also need to understand that many relationships develop and may occur exclusively online.

ICTs are critical in improving the lives of disadvantaged and disenfranchised persons in the society [15]. Available literature notes that some child welfare workers have been unenthusiastic to adopt ICT into their professional practice [24]. The ironic explanations for non-use of ICT in social welfare are many folds and these include; the belief that ICT will de-professionalise and personalise social work [24] and non-awareness of NASW ICT standards [15]. In nations such as Zimbabwe, an examination of the curricula of social work programmes reveals a lack of widespread integration of information and communication technologies (ICTs) beyond basic email communication within the classroom setting. Additional considerations in the field of literature propose that the introduction of information and communication technology (ICT) in child welfare work practise has led to a phenomenon known as 'digital Taylorization' of work [25]. This statement suggests that the field of social work is experiencing a growing influence from academics, policy officials and e-technicians who are often disconnected from the direct interactions between practitioners and service users [14]. However, the Council on Social Work Education (CSWE) calls for the incorporation of technology into social work education to empower learners about ICT and its effect on the socio-economic fabric. Consequently, this denotes that social workers are not being sufficiently trained in the use of ICTs during their social work education, which is integral in professional practice.

The proliferation of the internet has brought forth novel dimensions to the issue of child sexual abuse, as seen by the deliberate creation, uploading, and dissemination of child sexual abuse imagery on online platforms [11]. In recent years, there has been an increasing recognition of the potential of information and communication technologies (ICTs) in safeguarding children against many types of abuse. The matter concerning the mistreatment of children holds paramount significance. Although the complete extent and magnitude of child abuse may not be readily apparent, there is a prevailing consensus that a substantial number of children experience

the cumulative effects of physical, mental and emotional violence annually, across many global regions. Additionally, there exists a significant population of children who are at risk of experiencing such abuse. This assertion is supported by numerous sources [12]. Various methods are currently being employed to safeguard children, utilising mobile and digital technology. These methods encompass the digitisation of pre-existing child protection systems, the establishment of helplines, the utilisation of citizen reporting and crowd mapping, the implementation of mobile research and survey tools, the analysis of big data and the utilisation of technology-driven campaigns and information sharing. While challenging to accurately monitor, acts of violence perpetrated against children are prevalent in nearly all conceivable environments. This encompasses several locations and environments in which children ought to experience a sense of security, namely their local communities, educational institutions and familial dwellings. The aforementioned factors encompass corporal punishment, bullying and damaging cultural practices such as early and forced marriages, female genital mutilation and so-called honour crimes, sexual abuse, torture and other forms of cruel, inhuman, or humiliating punishment and treatment [13]. According to a comprehensive global survey conducted by the United Nations, it has been determined that the majority of incidents involving violence against children take place within the confines of their own homes. Furthermore, it has been observed that a significant proportion of these instances remain undisclosed or unreported. This finding is supported by reference [13].

A significant body of scholarly work exists regarding the ethical considerations pertaining to the implementation of field research involving children and violence [26]. The guidelines are primarily grounded in the principles of safeguarding, informed consent and confidentiality. Safeguarding aims to prevent any harm to both children and adults resulting from the research. Informed consent ensures that all participants comprehend the purpose of the research and willingly agree to participate. Confidentiality guarantees that researchers and individuals handling research data maintain the privacy of the information. Professionals in the field consistently advocate for the active involvement of children in research endeavours and decision-making processes that directly impact their lives. Regrettably, the current recommendations lack sufficient coverage of the particular ethical challenges posed by information and communication technologies (ICTs) developed for the purpose of preventing child abuse. These concerns have only lately emerged as a topic of discussion among experts [7]. Maintaining confidentiality is of utmost significance in the context of interactions involving kids, since the unauthorised disclosure of sensitive information may potentially exacerbate the suffering experienced by children. Advancements in technology have facilitated the seamless identification of data origins, particularly when accompanied by the inclusion of photographs or videos alongside GPS coordinates. Despite efforts to maintain anonymity in publishing, there remains a potential for data points to be connected to individual personal information. In addition, it is worth noting that youngsters may lack the necessary level of maturity or experiential knowledge to fully comprehend the potential risks associated with disclosing personal information through online platforms or telephonic communication. The primary concern lies in the extent to which individuals, particularly youngsters who are vulnerable and experiencing distress, possess a genuine understanding of the information provided to them and the potential consequences associated with granting consent [27].

The research conducted by [26] examines the portrayal of 'hidden youth as self-isolated' among Scottish and Hong Kong youth. The study aims to shed attention on

the positive aspects of digital media in facilitating relationships among disadvantaged young individuals. By utilising empirical data on the use of Facebook by social workers for the purpose of investigating families, often without obtaining their consent, this study demonstrates the potential infringement of individuals' human rights to privacy while engaging with digital platforms. Additionally, it sheds light on the inherent hazards posed to children in such contexts [3]. The use of auto-ethnographic research demonstrates the influence of standardised digital tools and technology on professional judgement and practises [6]. The increasing understanding of the integration of digital and social media technologies in the professional practice of social workers and their impact on young individuals receiving child protection services has led to the development of a significant focus on acknowledging the potential of digital platforms in these specific settings. This objective aligns with a wide range of ethnographic and qualitative research on social media, while it does not actively engage with it to a significant extent and digital technologies [22] in adult and family everyday life, in young people's and children's lives online [28] and about teenagers' hidden digital technology and media skills and practices [29].

3. ICT-based child protection services

Regardless of slow uptake of digital child protection in Zimbabwe, there are several child protection services that are provided by both government and Non-Governmental Organisations.

3.1 Case management

In Zimbabwe, there is ongoing implementation of a digital case management system. Through the Ministry of Public Service, Labour and Social Development, the country has rolled management information system (MIS) which provides comprehensive data capture for all child protection. The information captures includes the child's circumstances, assessment reports and demographic information. This also provides records for tracing and follow-ups on child protection. The use of MIS system also enables social development officers in Zimbabwe to have access to child's information without geographical boundaries. However, the observation is that the entire casement is done offline. ICT-enhanced casement is still missing in handling the entire child protection, such as case conferencing, home visits, referrals and among others.

3.2 Online counselling and guidance

Zimbabwe has witnessed an increase in the use of social media platforms in attending to child protection cases. Various organisations have adopted social media platforms, such as Facebook, Twitter, Instagram and blogs, to enable interactions with children and their families. Online counselling continues to rise in child protection practice where social development officers are assigned to attend to all online cases or complaints. Cases of counselling are reported children get help on various issues abuses or challenges. Online counselling further enables social development officers provide referrals and recommendations on reported child protection cases. In large organisations, such as Childline Zimbabwe, online counselling and guidance are provided 24 hours. While some children in remote areas of Zimbabwe may not have access to

these services due to connectivity or network coverage, online counselling provide convenience, real-time updates and enhanced accessibility to child protection services.

3.3 Telephone counselling

Related to online counselling, some human service organisations in Zimbabwe have implemented telephone counselling through toll free helplines. For example, Childline Zimbabwe has 24-hour helpline services where children are provided telephone counselling and guidance on reported cases. Apart from counselling, children are referred to the nearest social development agency depending on the nature of reported cases.

3.4 Access to education

In the Zimbabwean setting, the integration of digital technology has greatly enhanced educational opportunities for pupils across many stages of learning, encompassing the early childhood education phase up to the advanced secondary school level. Amidst the Covid-19 outbreak, social media platforms were employed as a medium for facilitating remote educational instruction. In spite of the profound effects of the Covid-19 pandemic, numerous educational institutions continue to employ a variety of social media platforms as a means to enhance educational opportunities for students. In addition to traditional pedagogical approaches, educators have the opportunity to optimise online learning as a powerful educational tool by incorporating technology into existing curricula, rather than solely depending on it as a reactive solution for emergency situations. Despite encountering obstacles in the implementation of digital-based learning policies, Zimbabwe has recognised the potential of integrating technology in education to effectively tackle a range of issues. These include addressing educational disparities experienced by learners with disabilities, out-of-school youth and overcoming geographical barriers that impede access to education for rural learners. As per educational professionals, digital resources possess the capacity to aid teachers in implementing ongoing formative assessment, hence enabling the delivery of personalised instruction, regardless of whether the instructional setting is in-person or virtual. Research has demonstrated that the integration of digital learning tools inside educational environments has the potential to augment student engagement, empower teachers to enhance their teaching methodologies and facilitate personalised learning encounters. Moreover, it facilitates the cultivation of essential skills imperative for achieving success in the contemporary day. The incorporation of virtual classrooms, video, augmented reality (AR), robots and other technical tools requires the support of governmental entities and stakeholders. Furthermore, these technologies possess the capacity to foster inclusive learning environments that foster collaboration and curiosity, while also enabling educators to gather student performance data.

3.5 Child psychosocial development

The rapid expansion of technological advancements has had a significant role in the progress of child development, namely in the areas of cognitive, social and emotional growth within the familial setting. Additional research is necessary in order to establish a conclusive association between the use of various technologies and

the development of children in Zimbabwe. However, it is important to acknowledge that a significant number of parents in Zimbabwe utilise diverse technologies in order to enhance their children's abilities. The incorporation of technological tools in both residential and educational environments has been found to enhance the cognitive capacities of children, particularly in domains such as problem-solving, critical thinking and creativity. By engaging in active involvement with interactive and educational resources, children are afforded the opportunity to improve their language, reading and numeracy skills. For example, educational software and gaming platforms possess the capacity to provide children with engaging and interactive learning experiences that promote the growth of their cognitive skills and facilitate the acquisition of knowledge. Digital technologies have the potential to support the development of cognitive abilities, such as spatial thinking and problem-solving. This is achieved by employing visually engaging and interactive methods to convey complex ideas. The excessive amount of time spent on screens and the unmonitored use of digital gadgets have been identified as factors that negatively impact the cognitive development of youngsters. Nevertheless, it is crucial for social workers specialising in family dynamics to provide support to families in properly utilising crucial technologies to optimise the cognitive and emotional growth of children. Social workers play a pivotal role in offering guidance to parents regarding the utilisation of technology to augment diverse facets of their children's development, encompassing motor skills, letter, number, shape and colour recognition, eye-hand coordination, reading, writing, planning and problem-solving proficiencies.

4. Challenges faced in the implementation of ICT-based child protection services

The implementation of digital child protection service is fraught with many challenges. These problems are related to professional ethics, the absence of national and social work guidelines, lack of ICT infrastructure, among others.

4.1 Absence of national child protection framework on online services

Zimbabwe has a raft of child protection policies, legal instruments and programmes aimed at enhancing child protection, care and safeguarding. For example, children's rights are enshrined in the Constitution (Section 81 of amendment 2013). This is supported by Children's Act (5.06) and other Acts such as Education Act (25.04), Domestic Violence Act (5.16) and Criminal and Codification Reform Act (9.07). These acts have been translated into many programmes, such National Action Plan for Orphans and Vulnerable Children, Harmonised Cash Transfer, Basic Assistance Education Module (BEAM) and others. More so, Zimbabwe provides online child protection service partner organisations such as Childline who have various digital services for children. While these programmes exist, the country has no national framework to provide guidelines on the implementation of digital child protection services. Mostly, child protection services are provided through implementing organisation's policies without a consolidated national framework. This also has implication on how social workers who are the custodian protection should work within digital-based child protection services. The situation is different in some countries that embraced the importance of ICTs-based child protection services in social work practice. For example, [30] offers extensive guidance and [31] suggests that

social workers must only conduct digital-based services using approved guidelines. In contrast the, [32] and New Zealand professional bodies make no explicit mention at all of service user surveillance [33, 34]. Where there was an absence of codes and/ or policies, researchers suggested that these be developed [27, 35, 36]. This shows the importance of national guidelines in ensuring that digital-based child protection services are implemented.

4.2 Dilemma in implementing social work ethics and values

In Zimbabwe, social work practice is regulated as guided by Social Workers Act (27:21). In this context, the implementation of social worth ethical principles is mandatory as guided by the statutes. As espoused by Ref. [37], social workers globally should champion the implementation of ethical principles such as service, social justice, dignity and worth of the person, importance of human relationships, integrity and competence. In Zimbabwe, social workers express worry in terms of how Internet has changed social work ethics. The footprints of ICT on social fabric are immense that the social work profession can redefine its ethical principles. In Zimbabwe, the challenge is that social workers who work in child protection find it difficult to connect the profession to software and hardware management. It is acknowledged that social media apps offer social workers powerful aids to their practices, but with new ethical dilemmas as well. Social work professionals encounter challenges in upholding ethical values within the realm of child protection services while utilising social media platforms such as Facebook, LinkedIn, Twitter and Web-based blogs. These challenges arise from the need to ensure that their utilisation of these platforms aligns with the established ethical guidelines of their respective professional domains, particularly in relation to human relationships, including the establishment of rapport and trust. In Zimbabwe, social workers do not agree on how to deal with new online human relationships. Arguably, this is caused by the absence of digital ethical guidelines in social work practice including child protection processes. This brings scepticism among social workers on how to fulfil ethical responsibilities. While digital child protection services enhance accessibility, visibility and convenience, social workers in Zimbabwe still have challenges in fulfilling certain ethical guidelines. In literature, [38] emphasise the threat that social distancing restrictions pose to the 'relationship-based skills' of traditional social work. In England, the BASW Social Media Policy [39] highlights the need for practitioners to respect appropriate personal and professional boundaries. The 2014 Code of Ethics of the Bachelor of Arts in Social Work (BASW) specifically articulates that social work practitioners are required to utilise these guidelines in order to discern the professional practice ramifications of utilising social media, taking into account the specific circumstances at hand. In the United States, the Association of Social Work Boards (ASWB) suggests the utilisation of informed consent when monitoring service users in the implementation of technology-enhanced child protection programmes [40].

4.3 Difficulties in conducting comprehensive assessment and diagnosis

Globally, effective and efficient implementation of child protection services is based on a comprehensive assessment and diagnosis of social, economic, political, cultural and technological challenges. As indicated earlier, digital child protection services include telephone counselling, digital case management and online referrals, among others. Due to the absence of digital guidelines and remoteness of

some vulnerable children in Zimbabwe, social workers find it difficult to diagnose and carry out a comprehensive assessment of reported child protection cases. The observation in Zimbabwe is that some section of vulnerable children comes from remote areas where digital connectivity is a challenge. Feedback from social workers in Zimbabwe is that follow-up to cases is not possible due to remoteness. This observation in this paper is that, in some parts of Zimbabwe, people walk some distance to access network. Another observation is that, in Zimbabwe, social workers in child protection find it difficult to refer children or those seeking services with other service providers. So often, there are high cases of child protection that are only recorded but without a comprehensive assessment and diagnosis.

4.4 Unstable network coverage

In Zimbabwe, vulnerability and marginalisation are closely related to geographical location than any other demographic factors. Connectivity is important in the implementation of digital child protection and it requires network coverage. Postal & Telecommunications Regulatory Authority of Zimbabwe (POTRAZ) shows that network penetration in the country is around 81% in 2022. Unfortunately, the areas without network access are likely to have high cases of child protection. This undermines Zimbabwean social workers from the concept of social justice. Apart from the basic network coverage, Zimbabwe continue to experience unstable Internet connectivity. More so, mostly vulnerable children and their families rarely afford to buy internet to report emerging child protection concerns. Further observations are that network service providers have paid more attention to business profitability rather social services.

4.5 Skewed digital gargets ownership

Related to the above, another observation in Zimbabwe is that the most vulnerable children and families have limited ownership of digital gargets. This affects the affected in reporting child protection case. Statistics on garget ownership show that 89.6% of households have cell phones in Zimbabwe [41]. Nevertheless, the findings of ZimStat presented an additional aspect. Among the surveyed households, it was found that 89.6% possessed a mobile phone, whereas only 58.8% indicated ownership of a smartphone. Above statistics have implications on enhancing child protection, especially for those children and families in both remote areas and vulnerable families.

5. Implication on social work practice

The current state of digital child protection has implications on social work practice in Zimbabwe. As indicated in this paper, the absence of national framework on digital child protection requires social workers to facilitate the development of such frameworks. This includes the refocusing of social work practice in digital space as current ICT-enhanced services are more accessible to urban than to rural areas. Digital child protection services challenge the current application of social work core ethical principles such as social justice, services and recognition of diversity. Social workers in Zimbabwe are required to ensure that those without access to digital connectivity and coverage are included in accessing services. Another suggestion for

this paper is that social work curriculum need to digitalise the classroom. Social work education and training standards in Zimbabwe should incorporate the inclusion of digitalisation enhancing social work graduates with ICT-enhanced skills.

6. Conclusion

The fundamental essence of dedicated social workers lies in their innovative utilisation of digital platforms, hence enhancing intervention mechanisms by establishing strong connections with other technological systems. Like many other regions throughout the world, the utilisation of information and communication technology (ICT) media has been increasingly prevalent in Zimbabwe, serving as a popular method of communication, particularly among the younger population. This inclination is primarily manifested through the utilisation of social media platforms and other developing technology. In order to ensure that social work practice aligns with the established norms and ideals of social work ethics, it is crucial for social workers to possess proficiency and literacy in information and communication technologies (ICTs). This would empower social workers to effectively participate at diverse levels of practice with the objective of offering support to disadvantaged and underprivileged children, hence improving their access to protective measures, educational opportunities and other vital resources. Despite the relatively disappointing performance of specific information and communication technologies (ICTs) in achieving their expected potential, the ongoing and swift proliferation of ICTs has established a framework that necessitates social workers in Zimbabwe to adopt technology and understand its importance in the domain of child protection services.

It is crucial for social workers to prioritise advocating for the establishment of digital child safety policies and guidelines that effectively control information and communication technology (ICT) enhanced services. This policy has the potential to establish ethical and professional parameters in the delivery of digital child protection services. The elucidation of the risks and advantages in the digital age can be achieved by the formulation and implementation of a digital kid protection policy. From a political standpoint, it is imperative to cultivate a strong political resolve in order to effectively advocate for the advantages of information and communication technology (ICT) in the realm of safeguarding children. There is a need to enhance the provision of digital-based child protection services in underprivileged areas. Hence, it is imperative to allocate resources towards the advancement of technology in marginalised and remote communities in order to uphold the principles of social justice. The significance of this cannot be overstated in addressing the issue of marginalisation faced by the most vulnerable segments of society. In conclusion, it is imperative for the political system to establish comprehensive ICT policies or programmes targeting children residing in rural regions, in order to guarantee their access to and utilisation of digital services. The improvement of child protection outcomes necessitates a comprehensive understanding among various entities, including governments, civil society organisations, education and child protection stakeholders, the private sector and international organisations. These entities must recognise the potential of these systems in enhancing child protection outcomes through heightened awareness, collaborative partnerships based on shared values, and cross-sectoral cooperation at all levels.

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Chapter 9

Perspective Chapter: Transition from the Modernisation of Information Technologies to the Digitalisation of Social Services and Social Work in Latvia

Edvarts Pāvulēns and Lolita Vilka

Abstract

This chapter presents the path to digitalisation of social services and social work in the context of the digital transformation processes in Latvia from learning about computers and acquiring basic skills to creating a unified welfare policy information system and digital services. The introduction of information technology (IT) in the organisation of social work and services has created new opportunities for service delivery and the development of means of communication. This has made it possible to overcome territorial distances and reduce inequalities in access to services in rural areas. The availability of IT and relevant skills is important for professionals and lay people alike. The availability and quality of social services depend on digital competence. However, the arrival of digitalisation in the field of social work is met with mixed reactions. The changing forms of work among social workers raise concerns about the future of the profession, that the dominance of technology could overwhelm human relationships and alienate them from the values of social work. But realistic optimists in Latvia believe that social work is one of the few professions that will survive in the long term and that automatisation, robotisation and modernisation will not completely replace it.

Keywords: digitalisation, information technologies, digital transformation, social work, social services

1. Introduction

Latvia is one of the Baltic countries, neighbouring Estonia and Lithuania, which regained their independence from the Soviet regime in the 1990s. The first social work education programmes were set up in the wake of major socio-economic

transformations, alongside the creation of social assistance institutions. This period is generally considered to be the beginning of the social work profession in the Baltic countries.

The first university in Latvia to train professional social workers was established in 1991, and a year later, the first social assistance structures were established in Latvian cities and municipalities.

Looking back over a little more than 30 years of history, it is possible to see how the welfare sector as a whole has been developing in the context of social transformation processes, and how the profession of a social worker is finding and consolidating its place therein. The emergence of a new profession was a social innovation, responding to the need to develop a system of social assistance and services staffed by professionals.

Nowadays, social work in Latvia is a recognised profession in its own right and a field of science. Social work is a wide-ranging field that involves working with different target groups, both as social service providers and as social service organisers, to help individuals, families and groups solve or alleviate social problems by promoting the development of clients' personal resources and involving support systems.

The development of information and communication technologies (ICT) is having a major impact on life today, both globally and locally. The Spanish sociologist Manuel Castells highlights the emergence of a 'new culture' as a characteristic trend of the twenty-first century, in which 'virtuality becomes an essential dimension of our reality. The constitution of a new culture based on multimodal communication and digital information processing creates a generational divide between those born before the Internet Age (1969) and those who grew up being digital' [1]. In the internet age, gradually 'inside each country', the networking architecture reproduces itself into regional and local centres, so that the whole system becomes interconnected at the global level [1].

It can be said that socio-economic transformation in Latvia was permeated by technological innovation, and to a large extent it can also be said of Latvia that 'the end of the second millennium of the common era a number of major social, technological, economic and cultural transformations came together to give rise to a new form of society [1].

Modern Latvia can be seen as a country that 'is growing up being digital'. This can be observed in everyday practical life, as well as in the consolidation of new concepts in the language space: *smart technologies*, *digital technologies*, *digitalisation*, *digital transformation*, *digital ecosystem* and others related to technological developments. There will be few people who have not heard the word digitalisation and do not know its meaning in everyday language.

Latvia has adopted a broad programme—the digital transformation guidelines 2021–2027—which ushers in a new phase in Latvia's socio-economic transformation, providing for accelerated digitalisation across all sectoral policies. *Digital transformation* can refer to anything from IT modernisation (e.g. cloud computing), to digital optimisation, to the invention of new digital business models. The term is widely used in public-sector organisations to refer to modest initiatives such as putting services online or legacy modernisation. Thus, the term is more like 'digitisation' than 'digital business transformation' [2].

The impact of digitalisation on the work of social workers in Latvia has not been studied so far.

This article seeks to trace the process of IT use in the profession from its beginnings and to show the gradual transition to digital applications in social services.

2. The development of digitalisation in Latvia in the historical, political and regulatory context

Information and technology (IT) are keywords describing modern life. It is the efficient use of data that can add value not only to manufacturing and the economy but also to public services**.** Digitalisation is also transforming the organisation and logistics of social services, including a personalised approach to providing people with services.

Digitalisation is the use of digital technologies to change a business model and provide new revenue and value-producing opportunities; it is the process of moving to a digital business [3].

The reflection of digitalisation in the field of social work can be viewed in the context of digitalisation policy in Latvia. In a strict sense, the words 'digital policy' can refer to the overarching national programmes that focus on the development and implementation of information and communication technologies (ICT), such as the digital transformation guidelines 2021–2027. However, as an EU Member State, Latvia has developed its ICT sector in line with the EU Digital Strategy and the Digital Europe 2030 agenda. But it is undeniable that the development of ICT has created the preconditions for digitalisation in today's Latvia.

2.1 The beginnings of IT development in Latvia

The beginning of digitalisation in Latvia can be considered to be the time when the first information media and the internet were created.

The article *from a giant computer to a handy laptop—60 years since the beginning of the computer era in Latvia* reads: 'punch cards—small cards with punched holes— were an essential medium for information almost until the first desktop computers appeared, of course, they were refined and improved from time to time and were made by representatives of a special profession: card punchers. The first computers printed only numbers on narrow tapes similar to the ones used for telegraph. Only the programmer knew what the first ten numbers or the second ten numbers meant. There were no letters. And then there were various machines—the punch card input device, punch tape input device' [4].

Such cards were the original way of storing and processing information on computers and greatly facilitated data processing. Although these cards were limited to numbers and included no letters, they were a first step towards digitalisation.

Historical sources tell us that the first computer in Latvia was switched on in 1960 in the computing laboratory of the Institute of Physics of the Latvian Academy of Sciences. The first digital electronic calculating machine in Latvia, the LM-3, built under the leadership of scientist J. Daube, is considered the father of the modern computer [5].

Thirty years later, the internet arrived. In August 1990, the University of Latvia Institute of Mathematics and Informatics (1959–2009) launched an e-mail service, and a year later, in 1991, individual companies (LvNet-Teleport and Versija) began to offer e-mail services. In 1992, a connection to the World Wide Web was provided. 2 October is the day of the creation of the Latvian internet. The permanent internet connection Riga–Tallinn (2400 b/s) was put into operation [6].

Since 1994, the internet has been available to everyone in our country [7].

This phase, with the use of computers and the internet, can be seen as the beginning of digitalisation, for which the more appropriate term is digitisation, which refers to the transfer of data from analogue to digital format, the process of changing from analogue to digital form, also known as digital enablement [3].

The Latvian Internet Association (LIA) was founded in 2000. The association's purpose states, inter alia: To support and promote activities aimed at developing people's digital skills and the safe and meaningful use of digital technologies [8].

2.2 Digitalisation policy: national programmes and projects

Digitalisation policy in Latvia should be seen as a process with a succession of ICT programmes and projects over many years. But this process must also be seen in the context of other important processes of socio-economic transformation in Latvia. In this respect, the period from 1997 to 2000 should be looked at separately.

Latvia had been an EU candidate country since 1997 and was still in the process of becoming a member. At the end of 1999, the Helsinki European Council, on a recommendation from the European Commission, decided to open accession negotiations with Latvia, as well as with the other candidate countries: Malta, Lithuania, Slovakia, Bulgaria and Romania. Section 31 of the provisions of the EU framework agreements also contains, among other things, sections on science and research; education and training; telecommunications and information technology. In each specific section of the negotiations, each country's readiness to join the EU was evaluated [9].

One of the first national programmes towards digitalisation was informatics. It was a complex targeted programme for the period 1999–2005, consisting of 13 sub-programmes [10].

Emphasising the development of information, computer and telecommunication technologies and the global phenomenon of information society as a new, more organised society, the main task of the programme was to include Latvia in this global development process and to build an information society in Latvia. This programme marked the first step in the process of integrating national information systems (NIS). The programme represents a strategy for the development of the entire country, not just a sector [10].

The main objective of sub-programme 4.12, development of information and telecommunication technologies, was to ensure the widespread use of electronic information services in public administration and their availability to every person in the country within the framework of the universal information service [10]. It included the following sub-objectives: building and developing an information infrastructure; transforming existing administration methods by using the latest technologies and paying particular attention to cooperation and coordination between different departments and institutions; ensuring that the informatics programme interacts with other national development programmes; ensuring extensive public awareness raising and training, etc.

The risk factors for the implementation of the programme were also described, including the ability to use computers, modern information technologies and services. One of the most important criteria emphasised was the understanding of the possibilities of technology and the individual's preparedness for life in the information society. The risk factor highlighted was that 'not enabling every member of society to actively use information services creates social inequality, information-rich and information-poor layers of society, which automatically leads to social tension' [10].

The Latvian e-Government Concept (2002–2010) defined that 'e-Government is an approach to public service delivery and public administration based on the use of IT capabilities and e-business operating principles to improve the quality and efficiency of public services and increase public participation in public administration' [11].

Future projects and programmes: information society development guidelines 2006–2013, information society development guidelines 2014–2020, digital transformation guidelines 2021–2027 describe the stages of digitalisation development in Latvia.

According to Brennen and Kreiss [12], the process of digital transformation is how many domains of social life are restructured around digital communication and media infrastructure [12].

The digital transformation guidelines 2021–2027, approved by the Cabinet of Ministers, provide for a unified digital development policy for public administration, the economy and society for the programming period until 2027, creating an open ecosystem for a digital society [13].

Digitalisation is seen as one of the ways in which the targeted use of existing and new digital technologies and the environment they create can improve the quality of life of every individual and society as a whole and increase the competitiveness of the country and the national economy [13].

2.3 Legal framework of ICT

Information and communication technologies visibly and rapidly permeated all areas of life, from people's individual daily lives to institutions and organisations in every sector of the national economy. Working in an electronic environment modifies the way 'relationships' are conducted, both in personal and business cooperation and communication, requiring the establishment of certain rules of conduct in the field of information circulation and the creation of a regulatory framework for the ICT sector: laws and regulations. In Latvia, between 1994 and 2004, the Saeima and the government adopted legislation regulating the ICT sector, including the following laws:

- Freedom of Information Law (1998): procedure for the disclosure of information held by public administration bodies and local government bodies.

- Personal Data Protection Law (2000): procedure for the storage and processing of personal data. The Council of Europe Convention for the protection of individuals with regard to automatic processing of personal data (28.01.1981). (A new law came into force in 2018: Personal Data Processing Law)

- Law on State Information Systems (2002): the aim of the law is to ensure the availability and quality of information services provided by state and local government institutions in state information systems.

- Electronic Documents Law (2002): determines the legal status of the electronic document and signature.

- Law on Information Society Services (2004).

- Electronic Communications Law (2022).

The above laws apply to state and local government institutions, including the work of social services and social service providers.

3. Social work in Latvia

In Latvia, the profession of social worker was formed over a period of about 5 years, influenced by several simultaneous processes of socio-economic

transformation and modernisation. This included the establishment of the institution of social work education, the establishment of the professional organisation of social work—the Latvian association of professional social and care workers (1994)—and culminated in the legal recognition and inclusion of the profession of social worker in the Latvian classification of occupations in 1996 [14].

In 1995, the law on social security came into force. 'This Law prescribes the principles for the structure and operation of a social security system, the main social rights and duties of a person, the basic conditions for its implementation thereof, as well as regulating the types of social services, including social and instructional assistance, and promoting social fairness and social security [15].

In Latvia, the understanding of social work is based on the international or global definition of social work: 'Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledges, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels' [16].

Today, the field of social work in Latvia is wide-ranging. The sector employs four types of social work professionals: social workers, social rehabilitators, social carers and social assistance organisers.

Social work specialists are the main human resource providing social services to people in a wide range of sectors: care and rehabilitation institutions, day centres, crisis centres, hospitals, penitentiary and probation institutions, shelters, schools and other public, municipal and non-governmental organisations. But they mainly work for local government authorities. Social work is one of the most important social services provided by municipal social service facilities (90.6%) [17].

The autonomous function and responsibility of local governments under the law is (9) to provide support to people in solving social problems, as well as the possibility to receive social assistance and social services [18]. The law also requires each municipality to have at least one social worker per 1000 inhabitants.

In 2018, 2128 social work specialists were employed and provided social services in municipal institutions (including social service facilities, their structural units, social care centres, and day centres) in Latvia [19].

4. Digitalisation in the field of social work

The digitalisation of the welfare sector in Latvia has been a journey of growth over many years: from learning about computers and acquiring basic skills to creating a unified welfare policy information system and digital services.

The use of IT in the field of social work evolved naturally from the earliest days of the profession, guided by national policies on the use of information services in public administration at all levels. The emergence of the profession of social worker, the definition of one's identity and the structuring among sectors coincided with the development of information technologies in Latvia and the introduction of the national programme informatics.

The way in which information technology (IT) achievements are reflected in the field of social work can be seen from two perspectives:

How IT is used in social services and social work practice;

How IT knowledge and skills are reflected in specialist knowledge and skills standards and social work education programmes.

They show the development and efforts to be part of the overall process of building an information society in Latvia.

Today it is difficult to say which of the applications of technology, sometimes through experimentation, can be seen as the first and decisive event, the impetus for the modernisation of the field of social work and social services.

In retrospect, three major developments that have been targeted at modernising data management and the organisation of social services in Latvia clearly stand out:

1. The welfare reform launched in 1995,

2. The first applications: CMS (case management system) and SOPA (social assistance administration system),

3. The unified welfare policy information system,

4. The following article therefore focuses on these events.

As part of the reform, a pilot project on development of a model for the administration of social service work and the administration of social services and social assistance was carried out between 1997 and 2003 with the support of the Ministry of Welfare and the World Bank.

It can be considered that this pilot project in Latvia also marks the beginning of the development of data management applications, specifically in the field of social work and social services.

The pilot project was implemented by the social service of a small municipality in the Kurzeme region (Kandava). The main objective of the project was to develop a case management system (CMS) and additional data registers, including information on social service staff, available services and social service clients in a unified electronic system. This facilitated the circulation of information in the territory overseen by the municipality and made the work of social workers much easier through practical use of the CMS computer software [20].

In 2003, the Riga Welfare Department started to implement a unified social assistance administration system (SOPA) [21], later also the electronic social care planning system (APSis) and other electronic applications in the social system.

SOPA was quickly implemented in Latvian municipalities and is still in use today. The social assistance administration programme (SOPA) was originally intended for:

• Keeping track of social service clients,

• Recording the data needed to assess the financial situation of clients,

• Preparation and recording of clients' declarations of subsistence means,

• Calculation of municipal benefits,

• Keeping track of benefits issued/denied,

- Reporting, including to the Ministry of Welfare, for the preparation of national statistical reports [22].

The introduction of SOPA marks a change in the work culture of social workers.

It has been 20 years since SOPA was introduced. During this time, it has become a basic tool for municipal social services and institutions, with a wide range of functions and diverse links to various national registers. SOPA is not a mechanical repository of fixed data. SOPA functionality gives data the ability to be integrated live into social work case practice, case management and the logistics of social service provision.

In describing the functionality of SOPA, some of the functions are mentioned here: keeping records of social service clients—families and persons, assessing the client's financial situation, creating and keeping records of agreements and social rehabilitation plans, recording and reporting on inspections, consultations and other activities carried out by the worker [23].

In 2013, a project was launched to develop a unified information system of the national social policy (SPOLIS). The assessment of the situation at the time concluded that the systems used by municipalities to collect social block information were disparate and not interconnected, resulting in a generally low quality of data in Latvia. The new unified social policy information system was built up from the already mentioned social services information systems SOPA, LIETIS and CMS, and the SPOLIS system [24].

Since 2014, the regulations of the national social policy monitoring information system (SPOLIS) have been in force. They define 'the structure of the national social policy monitoring information system; the data to be included in the information system; the rules and procedures for processing (submitting, updating, storing, requesting and issuing) the data included in the information system; the rules for cooperation between institutions' [25]. This ensures the exchange of data between local governments and the Ministry of Welfare, its subordinate public administration bodies and each local government and reduces the fragmentation of the structure and management of social assistance and social service provision by creating automated support for social service provision processes.

Innovative solutions have been found in the field of social services through the use of smart devices (e.g. a video visit using a tablet installed in the client's home ensures remote monitoring and daily communication for persons receiving home care services, with the aim of enabling them to maintain as independent a lifestyle as possible and preventing deterioration in their emotional state), smart client monitoring systems (SCMS) has been introduced in municipal social care centres (Riga), etc.

Effective exchange of information between social services and other institutions is important for the provision of social services to clients in high quality. The challenge in the coming years is to integrate data systems from other sectors (e.g. eHealth) into a unified information system.

4.1 COVID-19 challenges for social service providers

The Covid-19 pandemic, which was experienced around the world, made it feel for a moment as if the world had stopped, but at the same time—life goes on. For almost 3 years, from 2018 to 2021, social distancing was the basic condition for the organisation of all social life.

Looking for ways to respect the requirement of social distancing and at the same time how to meet needs, how to provide help, how to cope with difficulties, how to raise children and how to overcome the pain of loss, and many more 'how to?', made it necessary to think about transforming the logistics of social services. It was IC technologies that gave the answer.

The skilful use of technology and technological innovation in the work of social services were crucial to the provision and accessibility of services:

Alternative and creative ways of delivering services were developed;

Face-to-face communication was replaced by remote communication with clients;

The format of inter-institutional cooperation changed—using new IT tools and platforms. Remote communication on Zoom or Microsoft Teams soon became commonplace [26].

During the Covid-19 pandemic, we saw intensive learning in the use of technology. Regular training was organised for social service workers. The best solutions for the use of modern technologies were studied and implemented.

However, the main finding of COVID-19 was that online communication was severely limited by the availability of technology and the lack of digital skills for both social service providers and clients, especially in certain client groups such as the elderly and people with mental disabilities.

Many of the forms of remote communication and service delivery established during Covid-19 are still in use after the Covid-19 pandemic.

'Digital solutions in social work are already a part of everyday life and will only become more important in the future. It is up to each of us to choose when and how I will do it' [27], this is how A. Bērziņš, Head of the Samaritans Association of Latvia, expressed his assessment during the discussion on *digital solutions in the provision of social services*.

4.2 E-services

It can be said that during the Covid-19 pandemic, digitalisation accelerated strongly not only in the field of social services. The restrictions imposed by the Covid-19 pandemic have made it necessary to review working practices and assess how to provide services to the population in such circumstances, where face-to-face meetings are not always possible.

The new forced reality was the catalyst that accelerated the adoption of remote solutions: digitalisation is an inevitable development trend around the world in the twenty-first century, even regardless of emergencies. At the same time, experience over the past year has shown that digitalisation is a great help, but it will never replace the importance of a direct personal presence in contact with the client. Digitalisation offers many opportunities, but it also requires new knowledge and poses new challenges. The growing importance of digital and remote solutions in all spheres of life was highlighted by LALRG President Gints Kaminskis at the international seminar digital solutions in social work (29.04.2021).

For 96% of the conformity assessment bodies(CABs), digital technologies have helped cope with the challenges of the COVID-19 pandemic [28].

At the national level, there are increasingly persistent efforts to achieve the use of e-services both in mutual communication between institutions and between institutions and residents.

Since 2018, every resident of Latvia has had the opportunity to create an official e-address on the State Administration Services portal, which serves as a digital

mailbox, enabling state and local government institutions to correspond with individuals and legal entities electronically.

At the national level, there is a steady move towards making the use of e-addresses the primary means of communication between legal entities (as a mandatory requirement since 1 January 2023) and eventually also between natural persons and state and local government authorities. In addition, an application to a local government will have to be signed with a qualified electronic signature.

Plan for the improvement and development of social services 2022–2024 provides for a comprehensive set of measures along two defined lines of action:

1. A modern and accessible system of social services that, among other things, improves people's chances of living independently and living in society, and of entering education and the labour market;

2. Strengthening the governance of the field of social services.

Important components that characterise a modern and accessible social services system are:

1. Trained and competent social workers—the human resource and professional capital for ensuring social services;

2. Technologies and digital solutions that are relevant to today's realities and the field of social services—resources to ensure availability of social services and people's opportunities for independent living, including education and integration into the labour market;

3. Research and innovation in social services—research- and data-based decision-making is the basis for ensuring effective governance of the social services system.

5. Promoting the digital competence of social work specialists

Digital literacy involves the confident and critical use of a full range of digital technologies for information, communication and basic problem-solving in all aspects of life. It is underpinned by basic skills in ICT: the use of computers to retrieve, assess, store, produce, present and exchange information, and to communicate and participate in collaborative networks *via* the internet [29].

5.1 Education

The Latvian Council for Higher Education has noted that 'one of the most worrying aspects is the technology and knowledge gap, which has the greatest impact on the most vulnerable groups in society, exacerbating poverty and social exclusion. As higher education institutions develop their digital ecosystems and offer to acquire high-level digital skills in all fields of study, they must also offer solutions to reduce digital exclusion' [30].

The requirements for obtaining a professional higher education diploma in Latvia are set out in the national education standard. This also applies to social workers and specialists—social rehabilitators, social assistance organisers and social carers.

The existing national standards (in force until June 2023) for first- and second-level professional higher education required 'to ensure that programme graduates are able to choose and use information technologies responsibly and safely in their professional activities, research and lifelong learning, as well as in the acquisition, creation and sharing of digital content'.

Latvian higher education institutions have a modern, up-to-date study environment, with rich information resources: book databases, bibliographic and citation information databases of publications, and news and reference databases for study and research work. In cooperation with employers, during study placement, students have the opportunity to get acquainted with the possibilities of various databases (SOPA, APSIS, etc.) used in social services and other institutions, to participate in interprofessional team meetings, to get acquainted with certain types of municipal social services and social assistance, to participate in the preparation and implementation of an intervention plan and to get acquainted with digital tools used by institutions to work with clients, etc.

In recent years, the field of social work has experienced a significant shortage of social work specialists. There are several reasons for this: the prestige of the profession of social worker is quite low, with low and uncompetitive salaries. This is largely why young people are reluctant to choose social work studies. The inflow of young specialists into the field is slow.

Based on the 2016–2017 ex-ante study [31], more than 18% of social work specialists are aged 56+, and around 31% are aged 46–55. This reflects the rapid ageing of the specialists involved in the profession and the need to find solutions not only to attract and motivate new specialists to work in the field of social work but also to promote the further modernisation of the social services system. In this respect, future investments aim to enhance the digital competences of direct public administration and local government staff in areas such as change management, service management, data analytics, application of artificial intelligence and other modern technologies to modernise operations and services, flexible information and communication technology (ICT) project management, cyber security, use and management of modern digital infrastructures [32].

5.2 Requirements for digital skills in the SW professional standards

Technology usage skills and e-skills have been a hot topic since technology became available to the Latvian population.

Several programmes have been implemented in Latvia related to the acquisition of technology usage skills. One of the first was a computer-training classroom set up in 1995 within the EU Phare project Public Administration Reform in Latvia and lecturers trained to use computers. In the mid-1990s, computer training was one of the most sought-after programmes in adult education. It was the active working age group (19–40) that was most interested in professional development [33].

The assessment of the e-skills of the population from 2007 to 2010 concluded that Latvia has a low rate of use of services, as well as a low percentage of usability of e-services. The problem can be explained by the lack of motivation to use the internet, a lack of information on the availability of training materials and a lack of knowledge on how to apply existing e-skills and where to acquire new ones.

Several national programmes have been adopted for the acquisition of IT skills, including the electronic skills development plan 2011–2013; education development guidelines 2021–2027.

The content of social work education is determined by the requirements defined in the professional standard. In Latvia, three standards for the profession of social worker have been adopted in the last 30 years: in 2002, 2010 and 2020. The standard of senior social worker was also adopted in 2021.

Comparing the standards shows how the understanding of the need for digital technologies in social work is developing. This is also reflected in the terminology used in all the professional standards.

The professional standard of 2002 has only two requirements. The first one—comprehension-level knowledge of computer science and technology. The second one—comprehension-level knowledge of the internet as a method of building public relations (electronic media).

The professional standard of 2010 has a more specific requirement in the description of the knowledge required to perform the basic tasks of the professional activity—the use of information technologies (Microsoft Office, databases, internet browsers).

However, the requirements regarding digital knowledge, skills and competence are not elaborated in both professional standards. This is done in the professional standard of social worker adopted in 2020 and the professional standard of senior social worker in 2021.

The following requirements regarding technology usage skills have been adopted in the *professional standard of social worker* (2020).

Knowledge:

To ensure respect and confidentiality in digital communications;

To use digital technologies.

Skills and attitudes:

To use detailed information search strategies. To evaluate the validity and reliability of information using different criteria. To use different communication tools and their additional online features. To create digital content in different formats using digital content creation tools (presentation, photography, video, etc.). To use the applications required for social work or social pedagogy research and professional activity. To ensure data protection according to documents regulating data protection.

Professional knowledge at usage level:

Information search techniques and strategies. Methods of evaluation of information available online. Digital technologies are required in social work and usage thereof. Applications needed in the work of social worker, including SPSS or R. Databases and usage thereof in social work. Security of digital devices and technologies. Data protection.

Competence:

Ability to use digital technologies confidently, critically and securely in professional practice and communication to carry out social worker's duties, including for research, education and information purposes.

The *senior social worker* standard (2021) provides for the following digital literacy.

Knowledge:

To promote the integration of digital technologies with the aim of improving the organisation and availability of social services.

Skills and attitudes:

To use information and communication technology programmes and tools. To use social media and forms of remote work.

Professional knowledge:

At comprehension level: Ethical aspects of technology use.

At usage level: Personal data protection requirements. Digital literacy and media literacy. General principles of database usage and creation.

Competence:

Ability to use and evaluate the latest information communication technologies in the social work and social welfare sector according to clients' needs. Ability to analyse and interpret information responsibly.

6. Issues and challenges in the context of digitalisation

Equal access to high-quality social services for people living in Latvia's rural areas is one of the most pressing issues. Resource constraints, and in particular distance constraints for people with limited resources, maintain existing inequalities in access to services. Remoteness has a marginalising effect. Remoteness, interacting with the lack of other resources, reinforces the marginalisation of certain groups with limited resources, including resources to overcome distances [34].

According to the Central Statistical Bureau (CSB), Latvia had a total population of 1,875,757 at the beginning of 2021. Of these, 1,274,586 live in urban areas [35] and 601,171 in rural areas (31.8%) [36]. Over the past 30 years, the population of rural Latvia has declined by more than 202,000. (By comparison, in 1990, there were 820,507 people living in rural areas.)

What is considered a rural area in Latvia?

A rural area is usually contrasted with an urban area (city). Areas beyond the city limits are considered to be rural [37]. However, the term 'rural area' has many meanings and can be applied to different places outside the city.

The generic term 'rural area' is often used synonymously with 'countryside' and 'rural environment' to refer to the economic and social interactions that characterise rural areas as a whole, as well as to include the natural and cultural values of the rural landscape [38].

Latvia's Network of Regional and National Development Centres also uses the term 'rural space' to refer to rural areas: rural space also includes small towns [39]. After the administrative territorial reform, which ended in 2021–2022, 375,102 people (19.81%) lived in rural areas considered sparsely populated in 2022 [40]. (There are more than 4800 places in Latvia that cannot even be classified as villages because of the lack of dense groups of constructions and infrastructure.)

The reform aimed to consolidate local governments into more sustainable and economically stronger units by 2021, creating a more homogeneous division of local governments across the country, ensuring the right of citizens to receive services of comparable quality wherever they live, and ensuring efficient and effective use of public funds [41].

The expansion of municipal territories has expanded the socio-spatial boundaries, affecting the organisation and logistics of the provision of social services and social assistance, as well as the forms of social work in response to the needs of the municipality's population. The population of the newly created municipalities also increased. The new circumstances require social workers to be more mobile in identifying people's needs and providing services, to take initiative and innovate. Digitalisation is becoming increasingly important for overcoming remoteness.

Rural social work is still not a separate field in Latvia, although social workers have from time to time highlighted the differences that exist when working in

rural environment. The reform has created a situation where, in the newly created municipalities, part of the social workers is in the centre of the municipality and the other part work in rural territories. How to ensure equal service availability across the municipality is one of the biggest challenges in social work. But at the same time, the answer is to be found in the question itself. As socio-spatial scales expand, it is becoming increasingly clear that people's ability to organise themselves in shaping their local living environment and finding solutions to problems such as availability of health and social services, culture, education, availability of food, mobility, employment and other areas is becoming more important.

Over the last 3 years, the smart village movement in Latvia has been growing rapidly. According to the definition developed by the European Commission's pilot project on smart eco-social villages: smart villages are communities in rural areas that use innovative solutions to improve their resilience, building on local strengths and opportunities. They rely on a participatory approach to develop and implement their strategy to improve their economic, social and/or environmental conditions, in particular, by mobilising solutions offered by digital technologies. Smart villages benefit from cooperation and alliances with other communities and actors in rural and urban areas. The initiation and implementation of smart village strategies may build on existing initiatives and can be funded by a variety of public and private sources [42].

In 2023, there are 18 smart villages in Latvia. The smart villages concept forces the transformation of social work from a micro-social work perspective to a community work perspective and makes social workers initiators and mediators of co-creation platforms between local community groups on the one hand and the rural-urban nexus on the other. With the increasing intensity of information and communication, the effectiveness of social work in the community depends on digitalisation: the availability of digital infrastructure, technologies and tools to all people in the community.

6.1 How can we assess the digitalisation in the field of social work and social services in Latvia?

This article described the journey of digitalisation in the field of social work, from the introduction of the computer to a comprehensive information system for the social welfare sector in Latvia. It mainly describes the use of IT in the organisation of social services by service providers.

The field of social services is always about interaction and cooperation with service users—the clients. The digitalisation of social work services should lead to a higher level of self-organisation in service availability. Social services are provided to people with different social functioning abilities. That's why digital solutions for services need to be designed in a way that is also easy to use for the recipients—the clients.

The availability of IT and relevant skills is important for professionals and lay people alike. The availability and quality of social services often depend on digital competence.

Latvia ranks 17th among the 27 EU Member States in the 2021 edition of the Digital Economy and Society Index (DESI). Latvia ranks 20th among the 27 EU countries for human capital, below the EU average. Only 43% of the population aged 16–74 have at least basic digital skills, versus the EU average of 56% [43].

This DESI score is representative of the overall situation in Latvia. The digital transformation programme 2021–2027 shows that there is a clear understanding at

the national policy level that people's digital literacy will largely determine socio-economic growth and well-being.

So far, there has been no separate research in Latvia on how digitalisation affects social work and the organisation of social services, what is the digital competence of specialists in the field and how service users assess the 'digital logistics' of social services.

A study carried out as part of the National Research Programme 2019–2021 shows a general picture of digitalisation and the use of IT in the field of social work and social services: 'Life with COVID-19: An Assessment of the Management of the Coronavirus Crisis in Latvia and Proposals for Future Societal Resilience'.

The project's WP2 provides an assessment of the effectiveness and coverage of social protection measures provided by the state and local governments, their impact on supporting different socio-demographic groups in crisis situations and in ensuring the well-being of the population.

The study repeatedly stressed that the main challenge is the lack of skills in using technology. The study concluded that with the increasing use of new technologies for providing and receiving services, there is a need 'to improve the digital skills of social service providers (state, local government and NGOs) and social service users by promoting the use of the latest technologies and communication tools in work practice'. The benefits of a unified information system for data exchange are also mentioned here: '(1) cooperation among institutions and among professionals would be timely and available to social service users; (2) digital personal files would not be physically vulnerable, for example when working remotely from home; (3) the ability to use multiple reliable sources of information data to make an impartial decision would be increased' [17].

The introduction of digitalisation is a hot topic of discussion among social workers even after the pandemic. Benefits and disadvantages, advantages and burdens, and other aspects of using IT applications and tools in the logistics of social services are the topics that social workers in Latvia ask about in professional and public discussions, focus groups and conferences.

6.2 Experience of social workers

IC technologies have contributed to the automation of many processes in the organisation of social work services. And this is forcing social service providers to change along, above all in the management of information—acquisition, use and storage of information, which includes data security and personal data protection.

Digitalisation in the field of social services is largely accepted as an inevitable reality. The experience gained during COVID-19 has further highlighted the issue of knowledge and skills in the use of IT. In the field of social work, this was reflected in the revision of existing professional standards, introducing a range of IT literacy requirements.

In spring 2021, the Latvian Association of Local and Regional Governments and association 'Centrs MARTA' in cooperation with the Norwegian Embassy in Latvia organised seminar 'Digital Solutions in Social Work'.

In her seminar presentation 'Digital Interactions in Social Work Practice', Anne Wullum Aasback from Norway shared her experience on digital solutions in social work in Norway and presented the findings of her research on the impact of digital technologies on social work: how digitalisation should influence the curricula of social work students, whether the digital society itself creates a demand for new solutions in social work, how digital tools affect social worker-client relationships and workers' professional freedom of action [41].

During the seminar, participants highlighted several strengths of digitalisation in social work and the organisation of social services:

IT systems facilitate optimal planning solutions,

e-case ensures that all client documents are available in one place, can be stored and archived,

The system maintains the routine; the specialist does the specialist's job.

At the same time, it was acknowledged that the introduction of technology does not diminish the client's need for communication and face-to-face contact.

It was concluded in the seminar that, *'despite all the digital solutions that are a good support, social work will remain at the forefront. Technology is just a tool to do social work better. Now we need to find a way to help all those in a very vulnerable situation remotely and with digital tools'* [41].

Technology and people are common key topics in almost any discussion about digitalisation in social work.

As services are increasingly digitised, opportunities for human contact are becoming scarcer [42]. The changing forms of work raise concerns about the future of social work, that the dominance of technology could overwhelm human relationships and alienate from the values of social work. Once again, social workers are revisiting the much-debated question of the identity of the social work profession: what is social work?

In an interview, the head of social service of a large municipality in Latvia said: 'the digitalisation: e-mail correspondence, e-services submission, getting a reply regarding a resolution, everything is sent via e-mail… does it not lead to the situation where we do not talk to each other, and that is the biggest reason why social problems arise and develop. … I sometimes walk past staff offices, this feeling… that the employee is sitting at the computer, doing a lot of things electronically, sitting at their desks… …. and I fear that we will lose the values of professional social work in the great fascination with digitalisation. I agree that 30% of our work is digitalisation, only the rest is social work'.

However, there are also realistic optimists who say that 'the profession of social work is one of the few that is recognised by specialists as a profession that will survive in the long term, and that automatisation, robotisation and modernisation will not completely replace it. At the same time, it is predicted that traditional services will be replaced by modern and personalised services that, together with modern technologies, will be able to ensure individual's independence and self-determination. I invite you to be creative and get out of Excel and other spreadsheets to start planning services that can deliver service' [44].

The issue of digitalisation in social work can be seen from several perspectives, which can be captured in the term 'digital divide':

On the one hand, the promising opportunities of digitalisation, and on the other, the insufficient digital literacy and staff capacity of the service provider (social worker);

Low digital literacy of service recipients (clients) limits their ability to fit in the digital ecosystem of social services. If the social worker has to act on behalf of the client, the level of self-organisation in service provision does not increase, but on the contrary, decreases, increasing the social worker's workload. But this goes against the very nature of digitalisation;

People are not always sufficiently aware of the specifics of the services and assistance available. This makes it difficult for people to use the e-environment (digital ecosystem) independently.

The provision of the necessary digital infrastructure, as well as the technological literacy of service providers and customers, largely maintain unequal availability of services in rural areas.

The e-Index is one of the indicators of the use of modern technologies in the work of public institutions and local governments and in the provision of public services. The e-Index is a measurement of digital government policy performance carried out annually in Latvia by the Ministry of Environmental Protection and Regional Development to assess the 'maturity level of public administration e-index', where the measurement is expressed on a scale from 1 (lowest) to 5 (highest maturity level) [44]. The 2022 measurement showed that 'no public and local government authority has reached the highest levels of maturity—4 and 5' [45].

In spring 2023, IT company Tietoevry together with market research company Norstat conducted a study on the importance of digital solutions and labour market trends, interviewing 1008 Latvian residents aged 18–74 [46].

When asked in which fields digital solutions should be improved in Latvia, 'more than half (52%) of respondents highlighted the public and local government sector. This is the second most common answer' [46]. This answer also makes an indirect reference to the field of social services, which are the direct responsibility of local governments.

It is not always the lack of technology infrastructure, or the limited availability of technology, that causes dissatisfaction. Often, the technical solution is not user-friendly and user-oriented, with sufficient performance and time savings.

The results of these studies show that, despite a generally dynamic and in many ways good performance in the use of IT and digital solutions in service management in Latvia, 'growing up being digital' is and remains a challenge for social service providers.

But there is another important aspect of social work.

Information and technology are essential factors in today's information society, permeating all socio-economic life and culture, and creating a specific social structure—the network society, as M. Castell called it.

The use of technology, the ability to use it, is important. However, one cannot fail to notice that alongside this, new kinds of social practices are emerging, where everyone is a co-creator and participates in the creation and shaping of this new kind of society—the information society. This is accompanied by the cultivation of new habits and new responsibilities. Technology not only makes life and work easier, but it also creates new opportunities and new ways in which we communicate, collaborate and share information.

The use of technology also encourages going deeper in theoretical exploration. In social work, it is important to see where technology is going and how it affects people's lives and society as a whole.

Social workers keep alive the principles that underpin social work: principles of social justice, human rights, collective responsibility and respect for diversities.

It is important to understand the new era and to be able to see and conceptually grasp the developments that reconstruct (renew, restore) the understanding of the core values of social work and the role of social work in modern society.

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Section 4

Educational Approaches in Social Work

Perspective Chapter: Listening, Learning and Community-building – A Faculty Peer Mentor Program Comes of Age

Shantih E. Clemans

Abstract

Social work faculty roles are complex and multi-faceted, characterized by both satisfaction and challenge. In the post-COVID landscape, new faculty members in particular experience physical and existential isolation and uncertainty; realities that impact their experiences as members of their academic communities. This chapter discusses the practice and research implications of a learner-centered peer mentor program—now in its third year--in which new faculty are paired with more experienced faculty volunteers (from various disciplines). The Peer Mentor Program is an integral part of new faculty orientation, a year-long effort. Mentorship "pairs" have flexibility to create relationships that meet their specific interests and needs. Moreover, the value of reciprocity and mutual aid is built into the program: peer mentors learn from new faculty and new faculty learn from peer mentors. An additional core element of the program is the virtual group check-ins with peer mentor volunteers. The groups are rooted in mutual aid, confidentiality, trust and learning together. (New faculty have their own monthly mutual aid groups.) The chapter will conclude with qualitative data from participants in the program, as well as recommendations for ongoing research to improve and even replicate the program beyond one academic institution.

Keywords: new faculty, faculty volunteers, peer mentors, learner centered, mutual aid, listening, reciprocity, qualitative data

1. Introduction

Social work is a complex, high demand/high reward, and evolving profession—full of challenges, complexities and promise. To best serve a range of clients across modalities, social work faculty need to learn thoughtful, individualized, and supportive ways to engage in teaching, research and mentoring/advising duties. Pulling from the literature on mutual aid group work, faculty development and community building, this chapter provides a case study of a peer mentoring program at a dispersed public university in the Northeastern United States with a mission to serve adult learners across disciplines. The peer mentor program is one approach to support new faculty.

The core element of the program is the pairing of experienced faculty (peer mentor volunteers) with new faculty. At the heart of the program (and the focus here) are the confidential monthly check-ins sessions with peer mentor volunteers; these sessions are informed by mutual aid, trust and reciprocity. An explanation of the new mentor (faculty) orientation program as a "sibling" program of the peer mentor program is also included. The voices and experiences of the peer mentor volunteers, facilitated by three experienced faculty representing Human Services, Social Sciences, Teacher Education, are included through end-of-the year qualitative data. Challenges associated with remote work, building community during times of isolation, changes in leadership, implications for program change and growth are all explored. Implications for ongoing models and programs to support new social work faculty are addressed.

2. Purpose of chapter

This chapter offers a case study of a peer mentor program at a public university in the Northeastern United States. Closely associated with the new faculty orientation program, a year-long set of offerings to support new faculty, the peer mentor program includes pairing senior faculty with new faculty as well as participation in monthly confidential check-in groups. Complexities associated with this model are explored, including tensions connected to changes in leadership and faculty expectations, the workload realities of a purely voluntary program, and the value and vulnerability of a faculty envisioned, and faculty delivered program. Qualitative data about the program is included from a summary of feedback from peer mentors. Social justice priorities and tensions are also offered, with specific relevance to the profession of social work.

3. Review of literature

The literature connected to peer mentoring programs and efforts is substantive. For our purposes, a few themes underscore studies related to the current chapter. First, various models appear in the literature, including peer to peer and student to faculty. Second, the value of peer mentoring programs as avenues to address isolation and build community emerges as a distinct theme. Next, in whatever form, a peer mentor program connects new faculty to "safe spaces" where they are able to ask questions, learn with each other and make mistakes. A fourth overall theme ties together foundational social work and group work concepts to inform peer mentoring programs including: the strengths perspective, reciprocity, and mutual aid.

Mentoring and coaching programs, including peer mentor programs, are unique and have distinct purposes across institutions and populations. New faculty in social work and across disciplines benefit from various orientation efforts including faculty-to-faculty pairs, student-to-faculty pairs [1–3]. A few studies explore the specific elements of peer mentor programs, including [3] who write about pairing new/less experienced faculty with senior faculty who serve as peer mentors. In this on-line model [3], peer mentors help with writing, editing, research, teaching and advising.

Another noteworthy example is [4], a backward design study where the authors identify four specific learning outcomes of new faculty orientation programs:

1. Learn university as a whole

2. Explore what it means to be a professor/teacher/scholar

3. Understand research expectations

4. Develop a plan for university service (2023).

These four components overlap with aspects of the model discussed here.

Regardless of the particulars of the peer mentoring model, common elements were present across academic departments, programs, and institutions. Most notable, peer mentor programs are important for community-building, specifically offering a pathway for nurturing feelings of belonging among new faculty. Next, peer mentor programs are generally not "top-down" undertakings. Rather, these programs are rooted in mutual aid, reciprocity and learning from each other, see, for example, [4, 5]. In addition to the various "how-to" components of orientation programs, the literature pays careful attention to the emotional and social elements germane to supporting new faculty. Trust, respect, safety, risk-taking, and the development of strong collegial relationships emerged as themes, see for example [1, 3, 6, 7]. "Emotions have often been defined as multicomponent, psychological processes including affective, cognitive, physiological, motivational and behavioral components" [7].

Moreover, peer mentor programs offered safe spaces for newcomers to navigate the uncertainties inherent in the higher education landscape, the sometimes overwhelming and murky challenges and tensions associated with deciding on priorities and the timing of academic activities. (In other words, knowing *what* to do, *when why* and *how*). New faculty benefit from having a person to ask questions in the context of a safe and non-evaluative relationship, see for example, [4, 8].

Power and authority are persistent themes in orientation programs, including peer mentor programs. Questions emerge connected to how peer mentor programs are envisioned and facilitated, for example, which programs are mandatory, and which are voluntary? How is participation of peer mentor volunteers evaluated and monitored? How are peer mentor-mentee pairs assigned? Who decides? Are peer mentors actually volunteers? Are there implications for being asked to serve as a peer mentor and declining?

Related to power and authority dynamics is the Strengths Perspective. The Strengths Perspective is integral to social work educators and specifically valuable for peer mentor programs. Probst [9] reminds us of "the importance of social work educators challenges not to focus on problems" [9]. Peer mentors need to have freedom to develop their own processes, questions and approaches to supporting peer colleagues (without being specifically told what to do and how to proceed).

In addition to peer mentor programs, there are various other elements of orientation and support for new and existing faculty (both in social work and across disciplines). In social work and teaching, some version of a case conference is commonplace for colleagues to talk together, in a mutual aid process, and learn about their practice. Engaging in regular opportunities to share examples, difficulties, questions, or dilemmas is a time-honored method of engagement in human service fields and in education. "Staff support groups" is an umbrella term used to describe many different types of groups "for staff who work closely together under conditions of some stress" [10]. Staff support groups share a common purpose to faculty/professional groups including: "To provide a protected time and space in which staff

can get support from colleagues and learn from each other" [10, p.11]. In colleges and universities, faculty groups exist as places to address concerns, to connect around discipline-specific interests or to socialize with colleagues, see for example [11]. Although there are some differences, peer mentor groups may be included under the staff support group category.

The concepts of mutual aid and reciprocity are essential ingredients of a peer mentor program and orientation programs as a whole. Mutual aid is the relational group where members both give and receive help. "People helping one another as they think things through" [12]. Members benefit from group participation for this very reason – receiving feedback, support and ideas on problems, questions or circumstances, while also offering support and feedback, validation and ideas to other group members; the result is a circular shape of conversation with the focus on learning from each other. Whether addressing personal problems or taking up questions around teaching, mutual aid is a meaningful force in many different types of support and discussion groups.

Reciprocity is another relevant concept that characterizes the relationship peer mentors form with new faculty and each other. Peer mentor volunteers are learning as well as teaching; teachers are teaching as well as learning [13]. Moreover, monthly discussion groups that support teaching and mentoring also rely on reciprocity, a space of learning together. Reciprocity happens when "subject expertise" is not the point, and a dynamic, open-hearted learning process takes place between peer mentor volunteers and new faculty.

The peer mentor program and its sibling, new faculty orientation program, is, at its core, a social justice undertaking. Mutual aid, learning together in a peer-to-peer, non-hierarchical fashion, is one way of emphasizing faculty power, see for example [14]. Amy Gutmann reminds us that: "Reciprocity extends to all individuals, not just to citizens of a single society. Democratic education, therefore, should not limit its vision to a single society. It should encourage students to consider the rights and responsibilities of both a shared citizenship and a shared humanity with all people. The very same value of reciprocity that supports the commitment to cultivate mutual respect in one society, among individuals of many different cultural affiliations, also supports a commitment to cultivate mutual respect mutual respect beyond the borders of states, among individuals who represent the widest range of citizenships and nationalities" [15, p. 309].

4. Peer mentor program

4.1 History

The peer mentor program at my university (a public university for adults, geographically dispersed across and beyond New York State) grew out of a faculty-to-faculty "buddy" mentoring program where new faculty were paired with more seasoned faculty as a path to learning the ways of the institution and such. The peer mentor program discussed here developed through a formal partnership with a committee charged with establishing meaningful, systematic ways of retaining and supporting underrepresented faculty of color and women. The peer mentor program, hosted by the Center for Mentoring, Learning & Academic Innovation, shared responsibility for all aspects of the peer mentor program.

4.2 Program specifics

4.2.1 New Faculty/New Mentor Orientation

New Faculty Orientation, the broader program in which the peer mentor program is embedded, is a year-long program that focuses on giving new faculty tools and strategies to navigate new roles and create safe, supportive spaces for open, non-evaluative discussions over time.

4.3 Recruiting volunteers

Each summer, a call went out in the university newsletter/email list calling for volunteers to join peer mentor program.

Working closely with deans, peer mentor volunteers were "assigned" to new faculty. The expectations of the program were rather loose: Peer mentors were asked in the summer to make connections with the new faculty member to whom they had been assigned. The connection was "unscripted" but included the importance of introductions, offering words of welcome, and setting up a regular time to talk/meet.

In addition to the peer mentor pairs, a core element of the program was a monthly confidential peer mentor check-in group. This group, held remotely, offered time and space for the peer mentors to come together to share updates on their relationship with their peer colleagues, as well as questions, dilemmas, frustrations and more associated with mentoring a new faculty member. Peer mentors, in this example, extend beyond social work faculty pairs.

The peer mentor program monthly check-in groups look like this:

- A set time is identified for the entire academic year (last cycle, it was Wednesday afternoons, for one hour).

- Calendar invitations are sent way in advance in order to establish regularity and predictability.

- The check-ins occur virtually on MS Teams, facilitated by three experienced faculty members (including the author).

- On any given check-in session, eight to 14 peer mentor volunteers participate. (Sessions are not required).

There is no set agenda. Here is how the opening unfolds:

> *Facilitator: Hi everyone. Welcome to our May peer mentor check-in. Thanks everyone for joining us today. As a reminder, the purpose of our time together is to share issues, questions, updates, or challenges associated with your work with your peer mentee (peer colleague). We make an agreement each session to respect the confidentiality of this group and each other. Whatever is said in here, stays in here. Who would like to start us off?*

Four important elements distinguish the peer mentor program over its three years. These same elements add significancy complexities to maintaining the peer-ness of the program where colleagues are learning together with, for and among each other.

1. Non-hierarchical/non-supervisory

2. Non-judgmental—all voices and perspectives welcome

3. Confidentiality paramount "What is said in here, stays in here."

4. University-wide—not just social work (human services) faculty.

One way to learn about and from the experiences of peer mentor volunteers is through feedback offered at the end of the academic year when most of them would be cycling off. The feedback falls into four themes that inform future directions of the peer mentor program. Participants were asked what was most meaningful about their role as peer mentors.

4.3.1 Theme 1: relationships and learning together

Being together in a supportive and encouraging atmosphere emerged as the first theme from the peer mentors.

> *"Relationship-building for certain, being able to be a sound voice and ear for someone new at the college and providing meaningful direction. What was most positive about my time with my peer mentee is that each time I reached out, she was responsive, and I think we both gained new insight from our conversations. I felt like she was always grateful for our meeting time together." –Peer Mentor A*

> *"The new mentor assigned to me is a rock star!... We decided to meet bi-weekly through much of the fall term and beginning of the spring term. I trust she will still reach out to me as needed both to seek [university-specific] practice information, as well as to run things by me as a colleague, and I hope, [she will become] a work-friend as the years go by!" –Peer Mentor B*

> *"I really enjoy supporting [peer] mentees in the areas of research and scholarship... Publishing two book chapters with one of my [peer] mentees this year was a great experience." –Peer Mentor C*

A second theme that emerged was *"Learning How To,"* the specific, concrete tasks associated with supporting someone learning how to be a faculty member. Some of these concrete tasks involved learning how to navigate a range of technology systems, databases and dashboards, essential to support students, register them, advise them in Prior Learning Assessments (and much more).

4.4 Theme 2: learning how-to

> *"This is the first year I participated in a peer mentoring program. One of the most rewarding aspects of this experience was observing my [peer] mentee's progress and active participation over time. Throughout the mentoring process, she posed a series of insightful questions concerning [the university's] practices and policies. Initially, her questions were related to technical issues, such as how to develop a degree plan,*

> *how to find documents ... or what assignments to include in the Educational Planning*
> *Study. However, as our sessions progressed, she asked more detailed questions about*
> *college policies or the faculty handbook." –Peer Mentor D*

Peer Mentor volunteers were also asked to reflect on aspects of "less valuable" aspects of supporting new faculty. One theme related to the voluntary role (with no time off or financial compensation) and the time demands the peer mentors had to constantly navigate to keep up with their own work responsibilities. Moreover, since the role of peer mentor has a fluidity and flexibility to it, at times, there was confusion around what was expected and what was not requited.

4.5 Theme 3: balancing responsibilities of peer mentor role

> *"At times, it was challenging to balance my responsibilities as a peer mentor with my*
> *other commitments. There were instances when I felt stretched thin and unable to*
> *provide the level of support that I wanted to give." –Peer Mentor E*

There were challenges associated with serving as serving a peer mentor, specifically, figuring out the expectations of the role within a changing institution.

> *"Learning a new [peer] mentee's ways of communicating, [while] trying to be*
> *supportive, respectful and helpful, while at the same time, not being perceived as*
> *overstepping." –Peer Mentor F*

> *"Identifying the correct time for scheduling meetings. My peer mentee was [moving to*
> *a new city] and it took a lot of time to start connecting and discussing topics related to*
> *the new role." –Peer Mentor G*

The pressure on peer mentors to fully support new faculty who need "a lot" during especially hectic times in the semester emerged as another challenge.

> *"During the weeks preceding and following the beginning of the academic term,*
> *faculty [members] receive a lot of email from students and mentees. Also, this is*
> *when my peer mentee had problems navigating the software and had many questions.*
> *Often, I had to connect [with her virtually] to show how to navigate through [the*
> *systems]. I found this a challenging experience because I couldn't spend as much time*
> *as I wanted helping my peer mentee." –Peer Mentor H*

Finally, the peer mentor volunteers were asked to provide feedback on their experiences as participants in the monthly peer mentor check-in group. The value of a confidential, non-hierarchical space where asking questions and sharing experiences, was a standout theme, as seen here:

4.6 Theme 4: commitment to non-hierarchical confidential spaces

> *"I appreciated a confidential space to unpack these issues. I also very much appreci-*
> *ated the style of facilitation and communication...and I worry it may lose valuable*
> *aspects [as we undergo leadership changes]." –Peer Mentor I*

> *"The peer mentor monthly meetings are excellent because we can discuss different issues and obstacles and identify strategies as a community. In addition, we can learn from the experience and examples of all other colleagues and improve our activities as peer mentors." –Peer Mentor J*

> *"Any opportunity to connect with and learn together with my colleagues is a welcome break in the day! There is always a sense of collegial respect and admiration. This team creates both a brave and safe space. If I had to miss a meeting, I would never feel pressured, guilty, or less important to the group." –Peer Mentor K*

Higher education is constantly evolving to meet the needs of students, faculty, and various communities. Changes in roles, leadership, supervision, and evaluation processes and functions add complexity and uncertainty to peer mentor program. The peer-to-peer, non-evaluative approach is in jeopardy for the future.

A strength of the program (as well as a challenge for some) included the interdisciplinarity of peer mentor pairs. In the model, for example, a peer mentor in the School of Business could be paired with a new faculty in the School of Arts & Humanities. A deliberate, generalist approach underscored the peer mentor assignments and to the overall tone and direction of the monthly check-in groups. Certainly, there were peer mentor volunteers who struggled to advise or support a new faculty member from a different school or department. However, the commitment to learning together across disciplines/specialties took priority. Looking ahead, as colleges and universities become more specialized, generalist peer mentors may be replaced by a model of department-specific peer pairings.

5. Recommendations and conclusions

As colleges and universities grow and adapt to increasing challenges of student enrollment and retention, academic quality, recruitment of talented faculty, demands of workload (and much more), orientation programs rooted in non-hierarchal, safe spaces for conversations, decision-making and learning together are, at once essential and endangered.

New social work faculty (and all faculty) are under enormous pressure to learn the various, sometimes competing, responsibilities of their jobs. At the same time, they also need opportunities to begin to take in a community that cares who they are, how they feel, how they experience the university/school/department, and what they need to succeed.

Peer Mentor programs, as vital components of new faculty orientation efforts, need to be institutionalized across colleges and universities; indeed, it is a complex balancing act as peer mentor programs require administrative support (financial and otherwise) and validation. At the same time, if the programs become mandated and monitored, the trust, safety, and genuine reciprocity inherent within them will, for sure, be weakened and potentially lost.

In an effort to build on to an existing peer mentor program and to strengthen and expand its scope, here are specific recommendations:

- *Release time*: Peer mentor volunteers need service credits/release time to be fully supported.

- *Financial compensation*: Stipends for peer mentor volunteers may go a long way to offer "legitimacy" and appreciation of their service.

- *Multiple peer-pairings*: Peer mentors may share the responsibilities with another faculty member, thus lessening workload pressures.

- *Peer mentors specifically focused on research, service, or teaching*: New faculty join small peer-mentor group cohorts around review, tenure and promotion categories.

- *Field placements*: specific peer mentors may be assigned to only support new faculty teaching field placement seminars or supervising internships.

As faculty expectations and workloads increase in intensity and scope, colleges and universities need to envision, employ and nurture over the long haul, programmatic efforts to support new (and experienced) faculty on their own terms. Faculty senates may be instrumental leaders in ensuring the faculty-driven element is established through collective process and decision making. Learning together in peer-mentor pairs, combined with a regular monthly mutual aid group is one among many viable, creative options out there to try. For social work faculty in particular, a parallel process is constantly at play. How we learn and engage together as a community of educators deeply and meaningfully informs how we care about and work with clients and future social workers.

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Preparing Social Work Students for International Field Education through Intercultural Awareness

Annie Townsend and Jaryd Stobaus

Abstract

As the world continues to witness increasing humanitarian crises, social work students are filled with a desire to help. International Field Education provides important preparation for social work students for a future whereby complex humanitarian contexts will inform their practice. In this chapter, we use a case study to introduce some of the humanitarian complexities social work students experience during International Field Education. We then show how an exchange between the student and the Field Educator is informed by intercultural awareness pedagogy. We break this pedagogy down into a suite of pedagogical principles. We use this exchange to complement and fill the gaps in existing research on how to improve intercultural awareness in students of the complexities that unfold during International Field Education and thereby set students up to have the foundational knowledge for future work.

Keywords: International Field Education, preparation, social work students, intercultural awareness, complex humanitarian contexts

1. Introduction

As the world continues to witness increasing crises, disasters, and unrelenting poverty, we notice many university students are filled with a desire to help. With humanitarian organisations requiring more human resources on the ground to work in these complex humanitarian contexts [1, 2], International Field Education (IFE) experiences provide a pathway for students to take up a humanitarian career [3–5]. However, successful learning experiences during an IFE requires intercultural awareness. Without intercultural awareness, students are less likely to have a critical understanding of the power distribution within the humanitarian system, the magnitude of humanitarian crisis drivers, their historical and contemporary influences, and the overlapping and interrelated nature of these drivers.

One of our biggest concerns, as two people who work in humanitarian contexts, is the trend of acceptance of ill-prepared personnel entering the field which has opened the door to anyone with self-proclaimed 'good intentions.' We worry this is exacerbating the cause of the humanitarian situation. In a worst-case scenario, this could

overcrowd a fragile space in the interest of taking 'humbling' selfies and spruiking testimonies of life-changing experiences, thereby glorifying humanitarian work for a self-serving purpose. A lack of intercultural awareness also contributes to some of the more damaging myths around humanitarian contexts - that they only exist in the realm of *Third world* and *developing countries.* These have become convenient labels, implying people living in these countries are 'not like us' and assumes Northern practitioners are best placed to address humanitarian contexts in the Global South. Attitudes like this perpetuate colonial narratives and position Western expertise over others [6–11].

Using a case study, we demonstrate the situation for a student, *Emery*, who is competing his IFE in Myanmar, a country in Southeast Asia. Through *Emery's* eyes we see that Myanmar is a context where multiple crisis drivers interact and overlap all at the same time which result in some of the more pernicious cycles of poverty for the local community. There is also the perception that normality and recovery live side by side the unfolding of crisis drivers, albeit, short lived.

A thorough intervention is required to help *Emery* progress through his IFE. Through an exchange with *Emery's* Field Educator (FE) *Nova*, we show how the interaction is informed by intercultural awareness pedagogy. We break this pedagogy down into a suite of pedagogical principles. These principles provide compass points to help facilitate a more enriching learning experience for students like *Emery* and to inform reflections and conversations during supervision. The principles also work together to contribute to a readiness to work in complex humanitarian contexts. In our case study, the student *Emery* represents typical student experiences which unfold during IFE, while *Nova* represents the kinds of interactions FEs facilitate while supporting students undertaking IFE experiences.

2. What is intercultural awareness pedagogy?

Intercultural awareness pedagogy is driven by global complexity, social justice movements and the need for students to develop a critical consciousness about the world and their place within it [12, 13]. In the classroom, intercultural awareness pedagogy provides students with learning opportunities to help them engage with and develop an appreciation of diverse cultures, including their own [12, 14]. Kearney [15] says that intercultural awareness pedagogy teaches students about the social and historical backgrounds of a context and prioritises perspectives local to the context. An intercultural awareness pedagogy also pushes back on colonialism and Global North predominance within universities [16] so that a more critically reflective approach is privileged [14, 17]. Song [18] demonstrates that an intercultural aware-ness pedagogy is a holistic one. This means that classroom learning about multi-cul-turalism, post-modern, social construction theories, and explorations of local-global constructs, such as the Global North and Global South, is combined with experiential learning experiences abroad, field education and other global engagements.

Critical to the success of intercultural awareness pedagogy is the building of relationships between students and faculties. Grosfoguel [19], Kearney [15] and Townsend and McMahon [14] demonstrate that relationships help to facilitate empathetic learning, challenge belief rigidity, and encourage cognitive and personal flexibility. The development of meaningful relationships also strengthens students' critical analysis of how exploitation and domination by global and colonial systems of power shape experiences of privilege, including their own positionality and access to social privilege [10].

2.1 Case study

Hi Nova! It's me, Emery! When are you available to talk? We need to make some supervision times. I know I should have been more pro-active in organising these times with you- I am in this slump. I'm hardly eating or drinking. Just know I want to do well but I am scared of failing.

Flooding has shut the school down, so I am not seeing any students or families which leaves me feeling like I am not doing much at all. I spoke with the school social worker who said that many village families have had to leave for the cities because of flash flooding on their farms. Children who are coming to school seem to be unwell and have this persistent cough. But there really is nowhere else for them to go while their parents try to find work.

INGOs are inundated with calls for help. Our school has been set up as a distribution centre and I am involved here with this programme. The social work organisation Save The Children is the lead agency. There are other Christian charities here now and the sound of their helicopters means they have organised another weekly bible drop to some of the remote villages.

I am spending a lot of time alone in my apartment looking out the window at the burnt-out shells of buildings that have been destroyed by bombs or grenades from years ago. Different military groups sit in their vehicles or camp here most days, watching and waiting. For what? I do not really know. People are too tired to protest. Malaria outbreaks mean people must rest more.

I have tried to reach out to the expat community because I am not good on my own. I got invited to a costume party the other day via the expat Facebook group, and the theme was 'paupers and lepers,' It was held in an expat's house in the old British raj area. The house is probably the biggest I have seen here. SUVs were lined up outside three rows deep. Lots of local kids around too, offering to clean U.N. vehicles for kyats (coins). I left the party early. Felt unsettled by it all-watching U.N. workers dressed as 'paupers' giving coinage to kids who have nothing-it's just wrong.

The civil war between the Indigenous groups is still here, every day, and I can see the tiredness in everyone, and nerves are frayed especially when new military convoys are close by. Htun the school social worker said her brother-in-law, a Karenni landowner and farmer, disappeared without a trace. He has been trying for years to get his family's land back since the new military take over and Htun thinks this is the reason for his disappearance. His land has been in his family for generations but, since the war, land contracts have been destroyed.

One of my friends from soccer, Arkar, has a similar story but does not feel safe talking about it. After the wrist tying ceremony the other day to welcome me to the soccer team, Akar said 'this means we are all like brothers now.' I got a photo of me holding my arm up like everyone else I see doing. I got a few more followers on Instagram #karenwristtying. For the whole day I was riding a big high because at last, I felt like a local, doing local things.

I cannot keep pretending that everything is ok. I do not know how to let my school colleagues know this. We are all so polite with each other and I do not want to embarrass

anyone. Zin the school principal is ex-military, and there is this uneasy relationship between Zin and Htun. The other day I saw Htun leave in tears.

When we come together for meetings, I am confused most of the time. Zin asks me for my opinion constantly. He is asking more of me than what I can give. I tried to tell him I am not the person with all the answers, but it did not go down too well, and I think I have insulted him which is the last thing I wanted to do. I just feel I do not know what the local rules of engagement are and what is it I am allowed to do.

I feel the weight of it all on my shoulders. Should I come home?

3. Unpacking Emery's experience

Emery stands at a tipping point amidst a range of cumulative risks which are compounding his experience. First, *Emery* is witnessing the impact of the humanitarian crisis around him and are informing what the future will look like and the kind of work that will be needed. The literature indicates that the humanitarian context of Myanmar is typical of other humanitarian contexts unfolding globally. For example, *Emery's* correspondence with *Nova* reveals overlapping crisis drivers of: war [20, 21]; looming floods from the changes to the monsoon season [22–24]; people movement from either changes to climate or ensuing internal conflict or both [25–27]; health issues linked to climate changes [22, 28] and, internal displacement [1].

There are several factors pressing up against these crisis drivers which interrupt responses to humanitarian contexts. There is the active presence of international humanitarian organisations who convey imperialistic tendencies [29–36] and different military groups [37]. There is also the heavy presence of reputable Christian charities like Save The Children [38, 39] alongside other Christian charities engaged in questionable actions and possible proselyting programmes [40–43].

The day-to-day consequences of Myanmar's colonial history for the community is also evident [42] and there is community upheaval for the Indigenous Karenni people and other minority groups [24, 44]. *Emery* has described the extraordinary wealth of the expatriate community, in contrast to the levels of poverty in the local populations [30, 45–50] and there are tensions between local colleagues [51]. Describing who or what is local is also a pressing issue for *Emery* that he struggles to understand. This echoes contemporary debates and critiques around localisation in humanitarian contexts [10, 52–54].

Emery has joined a soccer team for social contact and, without realising the significance of the wrist tie, he has shared a photo through social media of his arm held high, showing the wrist tie, to represent his short-lived, 'high' feeling. His actions, here, are questionable and it raises concerns about his intentions as a student undertaking such a significant endeavour to a complex humanitarian context where he is still struggling to understand some of the cultural nuances.

Emery is struggling to connect with his colleagues and explain his experience to them in a way that can be understood. Culturally, he does not have the language for this or other skills to communicate his sense of isolation and the confusion he feels about his role. Without the support of the community around him or connection to his colleagues, *Emery* has become less resilient. His well-being is impacted negatively and although learning opportunities are presenting themselves, he has lost a sense of purpose; not just during the IFE but also in how he pictures his future. Fox [55, 56] recognises these kinds
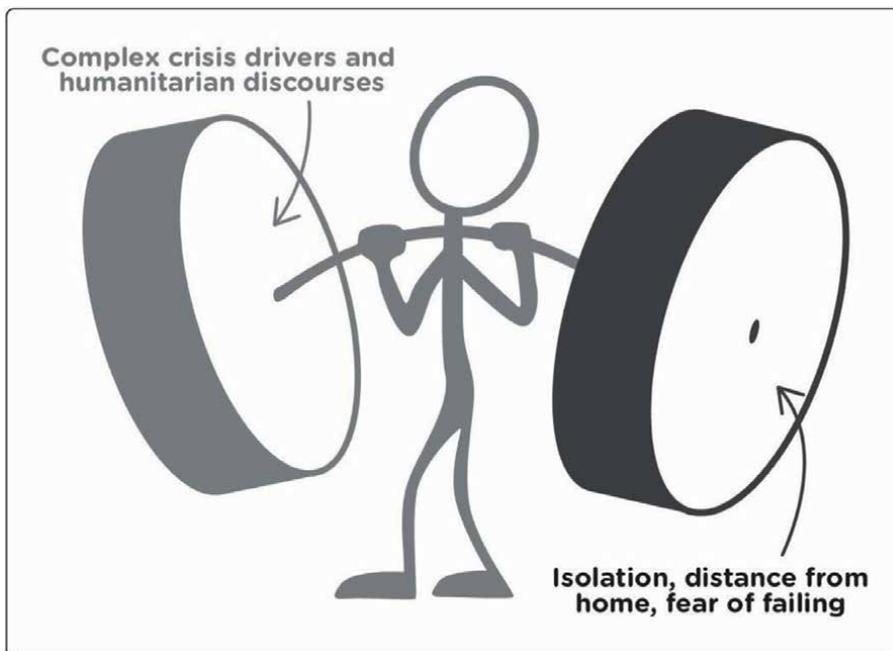
Figure 1.
'I feel the weight of it all on my shoulders'.

of risks associated with isolation during IFE. Isolation can produce a sense of separation between students and colleagues or clients in the cross-cultural setting and this appears to be happening for *Emery*. **Figure 1** illustrates *Emery's* experience of unbearable burdens.

4. Building a pedagogical intervention for intercultural awareness

It is obvious *Emery* needs additional mediation and guidance. In response to *Emery*'s story, we offer some key principles to inform an intercultural pedagogical intervention. Such an intervention is to prepare *Emery* for complexities of humanitarian contexts by strengthening his intercultural awareness during his IFE, ensuring improved learning outcomes for him and preparing him for future practice [3–5]. The intercultural awareness pedagogy is informed by the principles of reflexive practice, cultural awareness, lifelong practice, and relationality (**Figure 2**).

These principles have emerged from our lived experiences. We have had the experience of being students navigating our way through IFE- in 2002 (Annie) and in 2019 (Jaryd). These principles have also emerged from our observations of, and interactions with, students during complex humanitarian contexts both as a FE (Annie) and as a student peer working with other students who are undertaking an IFE experience (Jaryd). Here, we use *Emery's exchange* to demonstrate why these principles need to inform an intercultural awareness pedagogy.

4.1 Reflexive practice

Reflexive practice is a process whereby students like *Emery* can deconstruct and unearth deep assumptions about IFE intentions. This is necessary for *Emery*
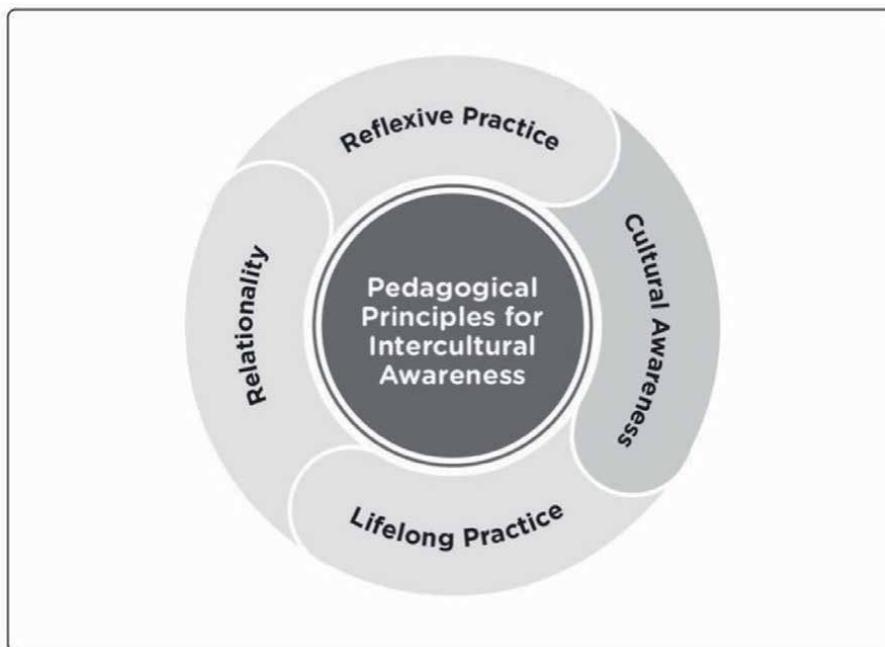
Figure 2.
Pedagogical principles for intercultural awareness.

because his original intentions are either unknown or not made sufficiently explicit which is holding him back from fully engaging in his field education experience. Without a reflexive understanding of his cultural self, *Emery* is also at risk of partaking in cultural reductionism and colonial attitudes in humanitarian contexts. Some open dialogue is needed so *Emery* can explore what cultural identity means for him [57]. A pedagogical intervention, informed by reflexive practice, will help *Emery* develop a deep and critical awareness of his own cultural self and his position in relation to damaging attitudes like 'othering' that are common in a context like this [10, 58].

Through reflexive practice, there is also an opportunity for *Emery* to deconstruct his experiences and reconstruct new learning [59]. Learning about how his insights can influence and transform his practice will help *Emery* imagine what IFE could be like, what he might do differently in the future and what new understandings about himself and others he could bring to IFE and other humanitarian situations. This includes engaging in ongoing critical analysis of power differentials and how these differentials may inadvertently make social work practice an oppressive experience for some vulnerable groups [10, 58].

It is obvious that this IFE experience for *Emery* has become an emotional one. He is worried about failing. He is experiencing a deep sense of disconnectedness from those around him, and he is also physically wrung-out from not sleeping or eating well. Reflexive practice can help a person recognise and name uncomfortable emotions and reactions to these emotions and to express emotions and reactions in ways that can be understood [60].

4.2 Cultural awareness

Emery has interacted with the local community through soccer. However, his descriptions suggest he is not interacting sensitively enough with his colleagues. He appears to act like a passive observer and regard his time spent with colleagues and community members as random interactions that do not hold any meaning for him. Potentially, these interactions could be opportunities for *Emery* to explore what he does not know about culture.

At this point in time, *Emery* does not seem to sit well with the idea that everyone carries culture, and that culture is not simply a construct applied to others but is relational and fluid. Culture embodies heterogeneity, carries temporal qualities, and cannot be singularised [57]. A pedagogical intervention which teaches cultural awareness is crucial for *Emery* to help him excavate the elements that make up his own and others' cultural self. He can then learn to navigate the cultural differences he is seeing and feeling with openness, awareness, and curiosity [61].

Emery also indicates in his email that he is interacting with the Karenni community who are an Indigenous group. They have shared with him a wrist-tying ceremony which is essentially an Indigenous ritual of welcome. But it also holds other nuanced meaning, depending on who has gifted the tie. While it is clear from his emails that he feels a connection with his teammate by wearing the wrist tie and hopes for a stronger connection through it, we are curious about whether he had any different knowledge about the wrist tie. The importance of building awareness of Indigenous knowledge in humanitarian contexts for students undertaking IFE is critical [14, 62–65]. Indigenous knowledge frameworks are stipulated by the Australian Association of Social Workers (AASW) as essential to the development of new social work curriculum content [66, 67] and therefore must have a place in student preparation for IFE and future practice.

Emery is also working in a context where colonialism has once been evident. The long-term impacts are felt by the Karenni populations, including one of *Emery's* work colleagues. Choate et al.'s [63] suggestions of ways in which Indigenous knowledge can be enacted in a pedagogical framework include the centralisation of topics such as colonisation and genocide. This is to promote critical reflection on the historical practices of colonialism and on the harms of this practice to enable students to acknowledge and address them (pp. 3–4). All of these would have helped *Emery* be more cognisant of the intergenerational trauma that is likely to be playing out for his Indigenous colleagues.

4.3 Lifelong practice

Emery seems to be struggling with the idea that learning is lifelong and going home is an option he is seriously considering. Struggling with the concept of lifelong learning can impede lifelong self-examination and reflection about key aspects of culture, cultural identities, and histories that are necessary for acquiring and implementing intercultural awareness [68]. A pedagogical intervention informed by the principle of lifelong practice is, therefore, critical to help *Emery* learn intercultural awareness skills.

Lifelong intercultural skills which would be useful for *Emery* include suspending judgement, tolerating ambiguity, understanding multiple truths in cultural contexts, and developing cultural humility. Learning about and practicing these skills is

essential to help *Emery* reframe setbacks as opportunities for personal growth and develop a more robust and resilient practice during his IFE and as a future professional working in the field.

4.4 Relationality

Building trust and connections with others is critical during IFE [15, 19, 55, 56]. However, building relationships and a sense of relationality is difficult in an IFE because there are many cultural differences that students will encounter: cultural shock is common for students. Practical concerns such as the fear of insulting hosts or language barriers or worries from home - all which Emery has mentioned - can all impact on a student's experience of relationships and building relationality.

Emery can develop relationality through listening, observing, remaining open to situations, and holding back from judgements or evaluation [15, 19, 55, 56]. Relationality ensures empathy and the ability to tune into, sense, and resonate with the local experience [69]. In *Emery'* emails, there is very little evidence of some of these important building blocks. As a result, there is a widening disconnect between himself and his colleagues and the community hosting him.

5. How do these principles help to invigorate intercultural awareness for students?

These principles provide compass points for FE to help facilitate a more enriching learning experience for students like *Emery* and to inform reflections and conversations during supervision. The principles work together to contribute to a turning around of what is a largely negative experience for *Emery* into a deeper learning experience which prepares him for future practice in humanitarian contexts.

Here we provide some extracts from *Emery-Nova* exchanges. In these exchanges, *Emery* is engaging with *Nova*, over Zoom. This is one of the final supervision sessions, so, in these exchanges, we are conveying the progress *Emery* has made in developing intercultural awareness through the guidance of his *FE*. *Nova* expects *Emery* to demonstrate his growth in understanding the importance of intercultural awareness skills.

Like with most supervision encounters with students who are undertaking IFE, *Emery* and *Nova* talk about the 'living' that happens around the field education experience. In our opinion, this is often a good indicator of how the student is faring in the field education experience. In the session *Emery* and *Nova* talk about a weekend soccer competition that *Emery* played in.

6. Emery-Nova exchange one

In the first exchange, *Nova* invites *Emery* to use his senses to describe the details of context, place, and people [70].

> *Nova: How did you travel to the village for the soccer competition? What did you notice? What did you hear? What did you smell?*
>
> *Emery: On the first day of the comp, we travelled by local ka (bus). I am still getting used to bargaining for a seat on the bus amongst the din of so many voices with*

> *everyone trying to get the attention of the ticket seller. It's all fun now, rather than stressful. The ka took the coastal road that I wasn't familiar with, and the ocean was this deep dark blue and I could hear the waves crashing against the rock walls at each bend in the road. As we travelled along the road, I noticed many of the Indigenous fishing villagers were working on the sand, fixing bamboo boats, and reattaching their bag nets. They were using hot coals to soften the bamboo and it smelt like peanuts. I asked Akar why this was happening. He said the prawn season is coming and the fisherman were getting their boats fixed since the last storm.*

> *Nova: Emery, can you tell me about the uniqueness of the experience at the soccer competition? What did you notice, feel, smell? What gave you the impression that you were somewhere different to any other experiences you have had?*

> *Emery: We arrived at the greenest, smoothest soccer field I have ever seen. Big crowds of Karenni had already started to assemble well before we arrived, and everyone was excited and happy to be there. Even some of the soldiers I had seen around the place were there, dressed in their best longyis, holding their kids on their shoulders, eating fresh pineapple. When you see soldiers every day in the city, you never think of them as fathers with children. We had a bit of time before the games started, so we went to the local water hole to swim. This family I did not know insisted I leave my belongings with them while I went swimming, so I knew I was going to be ok. There is this familiar smell of incense and rain - it's everywhere, and I find it really soothing.*

This exchange shows *Emery* is actively observing what is around him and is describing colours and textures. He is curious and asking questions. He is looking closely, perceiving details and nuances; evident in his description of the soldiers with their children and what they were wearing and eating. We could assume that things that were hidden to him are now more obvious. This was conveyed in his comment about soldiers being fathers.

Emery's description of being on the bus and arriving at the village demonstrates that he is thinking like an ethnographer [70]. He is piecing together the segments of context and place which, we can assume from his earlier email, had been a confusing puzzle for him. In this exchange, *Emery* talks about how the smell of the rain and incense are not just becoming familiar to him but are soothing. This suggests *Emery* is carrying less worry and is becoming more robust in day-to-day interactions [60]. Bargaining for bus seats, taking different bus routes, knowing his personal belongings were ok are signs that a student like *Emery* is feeling easier in the situation, even though there are still so many different experiences unfolding for him every day.

7. Emery-Nova exchange two

In the second exchange, *Nova* invites *Emery* to share vulnerable moments he experienced during the soccer competition, other than the pre-game jitters that are a common experience for competitors. *Nova* begins by using genuine curiosity to find out how open he was about feeling vulnerable [61].

> *Nova: Were there times during the soccer competition that you felt you were opening up to new experiences?*

> *Emery: At the end of the competition, we went to get our trophy. The winning team must dance up to the stage, one by one, and that was more nerve-wracking than the soccer final because people here have rhythm. I knew that I am not the best dancer - I dance like my dad. So, we had this hilarious process of dancing up there to the stage. But I forgot to wait until my name was called - which is the usual thing and I got to the stage too soon. I remember thinking 'what have I done?' The last thing I wanted to do was insult my teammates. Then they started laughing and the crowd cheered, and I started laughing. The crowd began to chant "Em, Em, Em".*

This encounter with *Emery* shows how comfortable he is with the unexpected, whether that is with local rituals or expectations from people around him. It reveals the level of trust that *Emery* has in himself to get through things that he still finds new: he is not perturbed by the risk of feeling embarrassed or embarrassing others. It also reveals the mutual trust between *Emery* and the community. It is likely the culture shock and fear that *Emery* was expressing in his initial communications with *Nova* is shifting for him and he is experiencing a growing sense of belonging and safety [15, 19, 55, 56]. Feeling vulnerable was not the end of the world for *Emery*. Rather, the experiences of vulnerability got him out of his comfort zone and offered itself up as important learning for him [71].

8. Emery-Nova exchange three

In the final encounter, *Nova* invites *Emery* to describe what has changed for him and whether he could reconstruct the field education experience in a different light [59, 61].

> *Nova: What has changed for you, Emery, as a student?*
>
> *Emery: Even though I am White, I feel I can safely go to villages on my own now to check up on school students who aren't coming to school and talk with the families and spend time with them. I take my time in getting to know people. Tea drinking is how you start any conversation in someone's home, and I am enjoying these small interactions so much more now. We all sit at these low tables on plastic chairs. Families know who I am, and they can place me.*
>
> *Nova: I am curious about the white wrist tie. I am wondering whether you know a bit more about this? What can you tell me?*
>
> *Emery: My white thread has come to mean more to me now. Wrist tying has become a bit touristy and has ventured away from its original meaning. But my wrist tie has connected me to my teammates - we are like brothers, and we are connected through the tie. When Akar gave the wrist tie, he said he trusted me, but I wasn't quite sure what this meant at first. But I am finding he is more comfortable with me now and feels ok to share some of his personal traumas.*
>
> *Nova: I am also wondering if this newfound connection to the community has led to any changes to your experiences in working with your school colleagues?*

> *Emery: I still feel that there is an expectation that I can contribute more than I can. What is different is I am more comfortable with 'not knowing'. I will ask questions when I need to and with less of an expectation of needing to give the right answer.*

> *Nova: What new insights do you have of the daily struggles Zin and Htun experience?*

> *Emery: Zin's conversations with me are deeply influenced by his experience of his country's colonial history. When I listen closely I am getting clues on the impact of British Coonial rule such as Zin's experiences of racial discrimination, poverty, the theft of land from villagers and the funnelling of money to brutal militia. This experience pushes him to find solutions for people he deeply cares about. This helps to explain his intensity at times and why he needs me as an ally.*

> *Htun and Zin are leaders in their community. They have lots of ideas, effective ideas. Htun talks about having two identities- a member of the community and a member of the humanitarian system. I see her frustration and sadness with this system, as well as her love and hope for their community. Sadly, most days I see what happens when this knowledge and experience of 'both worlds' is undervalued and not fully trusted by the humanitarian system.*

In this final encounter, what is obvious is the way that *Emery* is building connections to the community and developing close friendships. It is likely that *Emery* is recognising the deep, instinctual need and capacity for human connection and belonging. It seems *Emery* is being seen, valued and understood, and feels looked after. Even though the humanitarian context stoked distrust and amplified divisions in the communities, which then contributed to his feelings of alienation and eroded his trust in the learning experience, he seems to have developed a deeper consciousness about himself and the cultures of his colleagues and communities he is spending time with [72]. Towards the end of the conversation with *Nova*, we see *Emery* has a greater understanding of the complex, dynamic and relational characteristics of the local and how these are influenced by colonial histories [42].

9. Final reflections

The *Emery-Nova* exchanges show *Emery's* increased intercultural awareness. He can name his Whiteness and it appears he has less worry about how his Whiteness gets in the way of connecting to the community. He has a better understanding of the Indigenous practice of wrist tying and, by using his senses more actively, he is noticing more about Indigenous perspectives of place. He feels safer and more established in the community because he understands he has a place within it. This has opened more doors for him to get to know the families of the school where he works. He recognises the importance of making visible and valued unique and specific local knowledge and experiences in the humanitarian system.

There is also a shared cultural humility between *Emery*, his soccer team, families, and other community members, which all enhance a sense of renewed purpose for *Emery*. He is more relaxed and can laugh at himself for not knowing how to do things in a cultural way (such as dancing). At the same time, he feels enthralled with the uniqueness of the experience he is having.

10. Conclusion

Humanitarian contexts that are unfolding now are defining what the future work setting will look like for social workers. The drivers of contemporary humanitarian crises are dramatically changing who, or what, is considered vulnerable. Further, because of the confluence and overlapping nature of these drivers, it is anticipated there will be corresponding and enormous challenges for humanitarian response systems.

IFE plays an important role in preparing students for a future which is unfolding now and shaping what social workers will be expected to do and where they will be practicing. We have used *Emery-Nova exchanges* to bring about new knowledge and insights into how social work FEs can continue to strengthen the preparation of students for future practice, so they become well prepared and interculturally aware pre-service practitioners. Our framework has already been used as a resource for students participating in IFE and we will continue to evaluate its effectiveness over the coming years. We have also highlighted some typical tipping points during IFE experiences and the importance of intercultural awareness in helping students change a messy and stressful field education experience into a largely positive one, paving the way for future work whereby complex humanitarian contexts will inform practice.

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We would like to acknowledge Aboriginal and Torres Strait Islander people of Australia as the traditional owners of the land. We acknowledge that whenever we experience a deep sense of connection to our humanitarian students, friends and colleagues, there is no greater example of connection than the one set by the world's oldest living culture.

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Teaching to Think, Perform and Act as a Social Worker with Integrity: The Case of a Course on the "Diagnostic Assessment in Social Work"

Anait Mertzanidou

Abstract

Lee Shulman's concept of "signature pedagogy" is included in the Educational Policy and Accreditation Standards of the Council on Social Work Education (CSWE), specifically for the field education. This chapter demonstrates the value of implementing it in teaching social work courses. It draws from a participatory research conducted in the context of a course on "diagnostic assessment in social work," the spring term of 2019–2020, at the Democritus University of Thrace. Students' voices were collected *via* texts, reflections, and evaluations. Data of the research were analyzed by thematic analysis and were organized in the pre-formulated categories of how to think, to perform, and to act with integrity. The analysis shows that teaching in the class should be leading on development of an efficient "signature pedagogy" and outlines the challenging situation in responding to specific social work education targets and criteria. It further addresses the need to include sustainable development goals into social work teaching and prepare students to an eco-social vision so as to be prepared to deal with current and future crises and the new refugees in flows as a result of armed conflicts and climate change along with the sequential problems of human trafficking, xenophobia, and racism.

Keywords: participatory research, signature pedagogy, social work education, diagnostic assessment, Greece

1. Introduction

In the recent three "Educational Policy and Accreditation Standards" (EPAS) of the Council on Social Work Education [1–3], field education has been characterized as the signature pedagogy of social work education. It is a critical characterization deriving from the concept of signature pedagogy, which belongs to the prominent American educational psychologist and academic Lee S. Shulman.

According to Shulman [4], "signature pedagogies are types of teaching that organize the fundamental ways, in which future practitioners are educated for their new professions." Shulman culminated in this concept based on the research he and his group conducted in the "Carnegie Foundation for the Advancement of Teaching" on the education of the professions of law, medicine, engineering, clergy, and nursing. Each of the aforementioned research was a case study of the education of a profession and was conducted by the combination of research methods. The researchers studied curriculums, teaching materials, assignment methods, observed and recorded teaching and learning processes, organized focus groups, and interviewed educators and students. Signature pedagogy for the law is the teaching by "case method," for medicine are the clinical rounds, and for the clergy is the learning of preaching.

The aforementioned findings of Shulman enriched the global literature of professional education as they resulted in studies which on the one hand assess the education of the professions, which were studied by Shulman and on the other hand enforce the research of (examine) the possibility of using the concept of "SP" also in the education of other applied sciences, including social work education.

This global literature includes also articles, the authors of which reject elements that are characterized as "SP" by Shulman and criticize his approach to the distinction of the profession (for example [5], p. 29). Similarly, social work literature about "SP" of social work education includes a small number of excellent documented articles that doubt the characterization of field education as "SP" by the CWSE (see [6, 7]). Simultaneously, the controversial characterization of social work education as "SP" by the CSWE has introduced new valuable conceptual frameworks for research on teaching in social work education, such as the three pedagogical goals of the "SP", namely the education in thinking, performing, and acting with integrity.

Based on the interconnectedness of the social and environmental issues and taking into serious consideration the recent migration increase, caused by the financial and successive crises, armed conflicts, and catastrophes due the climate change, the value of introducing an eco-social perspective in social work education is essential. Within this framework, there is a need to initiate projects within social work education that aim to prepare social work students for this eco-social vision and promote the 17 goals of sustainable development. These goals aim to the extinction of poverty and hunger, ensure healthy lives, and promote well-being for all. Clean water and sanitation, as well as affordable and clean energy, are within these goals. Promoting decent work and economic growth as a result of quality education for all and gender equality may reduce inequalities and promote sustainable cities and communities. Furthermore, the eco-goals of sustainable development aiming to promote climate action and safeguard life below water, protect, restore, and improve sustainable use of terrestrial ecosystems, manage forests, and prevent loss. Last but not least fighting for peace and justice and develop partnerships to promote all the 17 sustainable development goals is also essential [8].

1.1 The experiment

The, hereby, presented research used qualitative methodology, and more specifically participant observation and thematic analysis were used to produce and analyze data. It is based on the three SP's pedagogical goals of teaching, whose aim is to encourage students to think, perform, and act with integrity. The aim was the

determination, organization, interpretation, and analysis of the content of the social workers' thinking, performing, and acting with integrity during the process of diagnostic assessment in generic and clinical social work.

The researcher, thus, examined the ways and the material used in teaching the students to undertake the assessment process. The focus was on thinking, performing, and behaving with integrity. This resulted in collecting and analyzing the teaching methods and tools, which were used.

The research was conducted at the Department of Social Work (Democritus University of Thrace). It focused on the in-person and online teaching of the course "diagnostic assessment in social work" during the spring term of the academic year 2019–2020, throughout the first lockdown period of the pandemic. The course was taught by Professor Theano Kallinikaki[1] and included the teaching of the holistic perspective in the diagnostic assessment in social work with references to other theoretical perspectives and practice models such as the psychodynamic social work, the systemic social work, the strengths perspective in social work, the anti-discriminatory perspective in social work, the solution-based social work, and the crisis intervention, which have also been taught independently in the context of other courses ("Theory of Social Work" and "Social Work Methodology").

The research tool was participant observation, which was conducted during the full length of the thirteen 3-hour lectures, from which three were conducted in person and ten were conducted through distance learning *via* Skype for Business due to COVID-19.

The course was followed by 25 third-year social work students. The class was mix-gendered and participants' old range was between 20 and 25 years old. This reflected the general profile of Greek university students, who are of young age and the majority of them enroll in universities through the panhellenic examinations right after their graduation from high school.

Obligatory attendance, together with the willingness to take on assignments and the acceptance of the participant observer's presence, were the three prerequisites for the enrolment in the class and were included in the learning contract between the Professor and students.

During the first lesson, students were asked to express their expectations from the course in order to adjust teaching with their learning needs.

Every student had their own "space" and "time" in the classroom to self-determine in their role as students. The Professor was using students' names in her communication and interaction with the students, a form of individualization, which was facilitated by the small number of the class attendants. Open-ended questions helped students reveal their point of views and perspectives.

Feedback was a constant element of professor-student interaction as the Professor was commenting on students' discourse and was encouraging students to do the same on her teaching. Students' participation was encouraged and the Professor also shared her concerns and feelings. Students' encouragement was a constant stimulation, which kept them alert and willing to participate in the course. Active participation through role-playing fulfilled the terms of the learning contract and gave positive assessments at the end of each lesson throughout the course.

The principles of self-determination and individualization, nonjudgemental behavior, open-ended questions, elucidation questions, feedback, sincerity, and encouragement are all elements of the social worker-service user relationship. These

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[1] Professor Theano Kallinikaki is the first University Professor in Social Work in Greece, at the first University level Social Work Course, established in the Democritus University of Thrace.

documents the parallel with the relationship between teacher and student as presented by Himes [9].

The data derived from participant observation was handwritten, incorporating verbal and nonverbal communications between the educator and the students (such as the tone of voice and laughter).

The majority of the notes taken derive from the first three in-person classes, while the rest includes the verbal and written communication between the Professor and students in the platform of Skype for business during online teaching. Despite their benefits, electronic recordings of the lectures were rejected as a method of observation, in order to maintain the spontaneity of the teaching, the learning process, and the educator-student interaction.

Afterward, the handwritten research data of the participant observation was subsumed into three predetermined thematic categories, which were identified with the three pedagogical goals of "SP."

2. Teaching to think as a social worker during diagnostic assessment

The research findings concerning how a social worker thinks during the diagnostic assessment include eight elements (**Table 1**), which refer to:

2.1 Bilateral expectations

Social worker's thinking begins with the recognition of the existence of bilateral expectations in the encounter with the service user. It continues with the distinction of their bringer (social worker/service user). It evolves with the understanding of their meaning, and it concludes with the assessment of their role in the progression of their collaboration with the service user. The students accepted the Professor's call to think of possible expectations as they eagerly came up with a variety of ideas. Afterward, the Professor explained:

> "All of us come with expectations to the first encounter. Welisten to the service user, but they on their turn wonder who we are and they wish to get to know us. They bring the desire to get helped, to get something that will relieve them. […] At this first encounter not only the identity card is essential but also the experiences and the person's history are useful data. The social workers carry in their bags their professional

Bilateral expectations
The initial request as axis of thought
The meaning conveyed by the service user
The holistic perspective
Non-preformulated perception
The cultural context
Reflection
Risk, needs, resources, and strengths

Table 1.
Thinking as a social worker during diagnostic assessment.

> *license, degree, and knowledge. We have to keep in mind how all these affect the encounter. Whereas the service user, who has come to meet us, won't be happy, he/she is in a world of pain. The fact that I have come to you, to the Social Service of the Municipality of Komotini, to say that I have failed as a mother/father and wife/husband, means that I have that perception. We usually ask for help from people we think that they could help us. Or he/she might not be able to name them and has come with phrases, such as "I hang on you" (1st lesson).*

The students were smiling and seemed amused by the sketch made simultaneously by the Professor to depict the notion of expectations. She drew the social worker and the service user on the blackboard as two tiny individuals facing each other and carrying, each of them, a bag full of their expectations. Thereby, the Professor facilitated the understanding of the abstract notion of expectations and highlighted their essence and omnipresence in social workers' thought by depicting them as the familiar, routine object of bags.

Expectations of the roles of social workers exist and are expressed in micro (service users), mezzo (groups and collectivities) and macro level (communities and society) and they could have positive and negative results for the social worker (see [10], pp. 95–96). This passage refers to bilateral expectations expressed at the micro level and the value of teaching is to prepare the students about the possible stances they and the services users might have at their first encounter, which will affect their relationship. The awareness of these expectations enables the social workers to manage them before the encounter and to control them during the diagnostic assessment, achieving to be free to observe and to digest what is going on "here and now" ([11], p. 21).

2.2 Service user's initial request

Service users' initial request constitutes the central axis of the social worker's thinking during the diagnostic assessment. According to the Professor:

> *"Our central axis of thinking is the initial request. More specifically, it reflects what they think as hard times in their lives. It is this, which brings them to the social worker's office (1st lesson).*

> *"During the first meeting, we should pay attention to the request. […] What is important in the diagnostic assessment is to talk with the person, without thinking to contact the other persons of service user's life. As social workers, we usually tend to look through "keyholes," find out, hither and thither. This, however, runs the danger of distraction" (3rd lesson).*

> *"At the first encounter, we should listen why these people have come. We should listen carefully what is going on" (5th lesson).*

> *"The difficulty for people is to decide to come for counseling".*

> *"When they come in the office, they already have a motivation" (8th lesson).*

The need to concentrate on the initial request and to avoid any distraction was underlined. A distraction might occur due to the social workers' desire to search the service users' past. To exemplify this case study was used. It refers to a couple who had

requested help in the past from the center for children's mental health for their son, and now, they returned seeking help for their 9 years old daughter Eva, who is their second child, presenting sleeping difficulties and refusing to attend school.

Toward the end of the interview, a worry was expressed: "*How will we manage?*" The social worker without referring to the service users' histories — as "*we don't dig into it in this phase- takes into consideration that we have a new request, another child, another request, another connection*" (5th lesson).

> "*The social worker gives them the opportunity to speak. They will tell us how they perceive the situation. That's why when they talk about their son, he doesn't tell them "what had happened?," "How often did he come?" "What have you done for that?" "What has satisfied you the most?". He isn't deceived into and he doesn't refer to the elements that the parents describe. He is focused on their request" (6th lesson).*

The initial request along with the case's social report was characterized by a student as the service user's identity. The Professor rebutted the claim and called the students to pay attention on the possible differentiation between the presented problem and the final request of the service user:

> "*Service user's first request might differ ultimately. [...] The case's social report is not the identity of the service user combined with his request. His initial request might not the major request. In the case of Eva, although the initial request of her parents was to help her to sleep alone and better, the main need was to reflect on "what are we doing as parents?" The social worker writes "there is separation anxiety in the context of a very dysfunctional relationship" (6th lesson).*

It was then explained that the function of the service user's initial request as central axis of social worker's thinking is more evident in working with people in crisis:

> "*When we work with people in crisis what we are interested in is the person's request, we want them to share their worries. People in crisis are not able to talk about the past neither we want them to do it" (7th lesson).*

Commenting on the case study of Mira, an Afghan adolescent who visited voluntarily the counseling center for adolescents requesting help regarding her parents, especially her father, who wants her to drop out of school to help in their housework, the Professor said:

> "*When we are trying to understand what is happening, we don't dig into details. You see that the social worker hasn't dug into any detail, such as "How have you been raised?" "What is your parents' profession?" It doesn't matter because the girl has come with a very clear request" (10th lesson).*

2.3 Individualization

The students were taught to search for the meaning that service users give to their difficulties:

> "*What's the matter? What does he/she present? What is the difficulty? Simultaneously it includes also the meaning: "What does it mean for this person?" It refers to "how*

> *does it occur for this person," not just "what is happening." [...] Keep the "how." "How does he/she live with his/her disability?" "What does the disability mean for that person?" The diagnosis was made by the ENT but "what does the deafness mean for that person?" "What does the unemployment mean for that person?" (1st lesson).*

Following this approach means applying the principle of individualization, which belongs to the seven principles that characterize the casework relationship according to Biestek [12]. It is defined as "the recognition and understanding of each client's unique qualities, and the differential use of principles and methods in assisting each person toward a better adjustment. Individualization is based upon the right of human beings to be individuals and to be treated not just as human beings but as this human being with his personal differences." By using the examples of disability and unemployment, it was explained that the service user is not "one of a class" ([13], pp. 96–97), namely a member of the class of people with disability or unemployed. Here, students have to move their thinking from the general to the specific, namely from the groups where the person belongs, due to his/her characteristics, to its uniqueness. The individualized perception of the service user during the diagnostic assessment will result in individualized response to the service user's needs.

Listening to the service user and understanding their own subjective perspective of their internal and external world is essential for the assessment process ([14], p. 182). This is essential to accomplish not only to give meaning to/understand the service user's experiences through theoretical prisms of social work but also to connect and empathize with him/her.

The concept of individualization was combined with the presentation of the principle of self-determination, as another principle of casework relationship, introduced by Biestek [12]:

> *"We recognize the uniqueness of the service user in relation to his/her identities, who-ever he/she is, whatever he/she is, respecting his/her self-determination" (6th lesson).*

Teaching about diagnostic assessment with service users in crisis and the description of their responses to crisis included another reference to the principle of individualization:

> *"It refers to the uniqueness of people's responses to challenging circumstances. Three of the people who lost their homes because of the fire in the region of Mati might have had reacted in completely different ways. One of them froze up, the other shouted and the third was initially disinterested. That's because everyone has his/her own defensive system, personality, and experiences. Someone who had already lost his/her parents or he/she had been in a car accident and survived or one might be more optimistic as a personality or show tolerance or in any case the reaction will be different" (12th lesson).*

None of the students commented on that element of the social worker's thinking, which in combination with their relaxed stance, could mean that it was already accomplished knowledge.

2.4 Holistic perspective

The holistic perspective, which takes into account all the aspects of the social functioning of a person, here and now, is an element of the way social workers have to think:

> *"We look at issues related to the practicality of life and not only with the diagnosis (of a service user's situation, made by a health professional for example). [...] Namely, parameters associated with the roles of the person. In the case of an offender "how is his/her relationship with his/her children?" "What has he/she done about it?" (1st lesson).*

The one-dimensional view during the diagnostic assessment (in contrast to the holistic perspective) could lead to mistaken perception of the service user and his/her situation, at the expense of the service user: underestimation of his/her situation and inadequate intervention or overestimation of his/her situation and exaggerated intervention. A case study of an offender was used and a number of questions were addressed, which could direct the social workers' thinking to a holistic approach of that person. The example of a stigmatized service user who is an offender highlights even more the need to overcome the focus on the stigma (crime) and to think about/take into account all the aspects that constitute his/her life.

Students were taught to answer these questions in their mind: "*Which is the family situation? the home condition? the school environment if he/she is a kid? the working environment if he/she is an adult? which is his/her health condition? which is the economic circumstance? Issues related to the cultural environment and particularities which might be generated. We'll see the elements, which affect the social circumstances or which have a role in generating a problem or maintaining it*" (8th lesson).

These questions correspond to some of the large quantity of the personal and environmental factors that contribute to the well-being of the person who lives in and interacts with his/her own environment. These factors refer to the whole spectrum of human life and include the personal, educational, professional, social, economic, political, religious, spiritual, and cultural realms of life. The ultimate aim was to enable students to think multi-dimensionally (Gould, 1996; Evans, 1999; Papell & Skolnik, 1992 in [15], p. 439).

"Plefsi", a diagnostic tool was also presented as a conceptual framework to achieve holistic perspective during the diagnostic assessment:

> *"The systematic ways of describing are the result of our desire to recognize every social factor that can affect a problem and assess how serious it may be, how long it might last, and what consequences it may have. Simultaneously, we may provide a picture of what should follow. This is the result of the diagnostic assessment. [...] We examine how the problems might evolve and how they relate to the person's environment. Therefore, we have to examine what is happening in one or more social roles, in the role of a parent, partner, professor, neighbor, or employee of the Ministry of Education. [...] We assess the social functionality, namely the person's competencies, his/her ability to respond; however, it should be according to what the environment has defined as a good parent, etc." (11th lesson).*

2.5 Non-preformulated perception

The need to gather information and to avoid personal prejudices belongs to the core elements of social workers' thinking. It was underlined that:

> *"We must have correct information and not just based on our assumptions" (1st lesson).*

This lesson relates to the concept of giving meaning/understanding, which precedes the formulation of a judgment and making a decision and is defined as the

way in which the social workers interact with the available information to formulate a judgment (Platt & Turney, 2014 in [16], p. 183). In short, it is the process through which the social workers give meaning and significance to what they see, listen and feel during their work with families (Cook, 2016 in [16], p. 183).

Non-preformulated perception refers also to the referral agencies.

> *"It is very important how we perceive the agency to which we make the referral. If we consider that the x agency for addictions, which uses methadone, has strict methods for which we have a negative perception, it is possible that it might affect our stance, our nonverbal communication, our behavior, and the words we choose to describe it. When assessment is based on evidence-based practice, services may be more competent, efficient, and utilitarian, or we could suggest all available agencies for his/her request" (5th lesson).*

For example, let us assume that "*you work in a child care home. What is your opinion about these kids? Are they like others? do you feel sorry for them because they are in this situation? do you have mercy on them? or you feel anger about their parents who had neglected them? And you are blocked and affected by the way you perceive them. Do you use the label of abandoned? or you work without this label, and therefore you are interested in what they do, where they get satisfaction, what they want, what is important for them, what could make them feel better?*" (7th lesson).

Another example used was that of Muslim Roma people, who are part of the Muslim Minority of Thrace:

> *"If we have rejected labels, then it must be shown in our work someway, in the diagnostic assessment, in our encounters, in our intervention planning. It must be shown that we don't get carried away by the dominant opinion. Roma doesn't care about school. This is racist perception, which characterizes may be the majority of our society. But we can think that there may be also other reasons for this regarding that they are Greeks, they have permanent place of living, they are citizens, they have rights, and they vote. To what extent are the schools accessible for these children?" To what extent do they welcome them, take care of them, support them,? or they create situations from which they are excluded?" (10th lesson).*

The concept of non-preformulated perception was analyzed further by using a translated article, focused on the first impressions of the social worker, in combination with the example of an addicted mother:

> *"You should keep in mind "now, what am I thinking about this child?" What am I thinking about these parents?" What I am thinking is neutral or affected, prejudiced by my impressions, by my opinions about parents who abuse their children? And "provided that I have created an impression, I have read or seen on the Media, does it affect the way I am thinking?" Or I assess this mum, this woman, this child for who they are and in their reality. The impression they make on me when we begin our collaboration and how I form that impression, which many times can be very or absolute decisive. [...] If we think that every mother who is addicted to drugs is corrosive for her child, therefore the child has to be removed from the mother, we obviously have clearly in our mind how we are going to deal with this case, from the moment it appears. We will assess and write a review which will include as many difficulties and weaknesses as possible, to conclude that this child should move away*

from this home, from this mother. In contrast, if we are not fixed on this perception, if we think that we have to assess every case, every mother, every child, independently and in relation to how they live, we can find out that the child is on its mother's priority that the mother can, therefore "the child stays with you, but you need counseling or frequent collaboration to ensure that things are going well," but if they aren't, we could make a new assessment" (12th lesson).

The Professor explained further the role of knowledge on first impressions:

"We have specific knowledge and clear information about mothers who are addicted to drugs, according to which a mother who is in this situation can lose control, may be unable to take care, she may be indifferent, she can have very disturbing relapse. These are true. We have that knowledge. And this knowledge may extremely lumber our impression, driving us to focus on her negative aspects" (12th lesson).

Impressions have a significant role even with service users who are successful in their roles but they can not show it:

"Even a mother who achieves things can be hesitant, uncertain, or feel threat because of our presence. And this can affect the way she will talk to us" (12th lesson).

2.6 Cultural context

Furthermore, students were taught to take into consideration the cultural context during diagnostic assessment:

"Descriptions should be examined in their social-cultural context. […] What someone expects should be viewed in the particular cultural environment. […] For example, eight refugee mothers from Idomeni Refugee Campus, who participated in our research and lived in a tent, had the same view that "they are not good mothers." We asked them why and they replied two factors. Firstly, they are not satisfied at all with their children eating Karamolegkos' flatbreads instead of their handmade flatbreads. Secondly, because they couldn't have the cleanliness they wanted, to wash with bar soap and not with liquid soap given to them. Moreover, they didn't have faucet for the bar soap. […] If you think you are a "bad mum", we will talk about what "bad" means for you" (1st lesson).

Providing that the expectations service users bring in the encounter are colored by experiences of the past, which includes cultural elements, is lived today and anticipates an opportunity to be wakened to the fullest and to be examined in the therapeutic relationship ([17], pp. 328–329); the recognition of the cultural context is necessary for the formation in the service user of a sense of full inclusion of his distinctive characteristics.

According to the Professor, the cultural factor could also impact on the choice of the place where the service user will express his/her request. She gives the example of "*a citizen of Komotini, who would choose the nearby city of Alexandoupolisor would choose a therapist who is not from here* [Komotini]" (1st lesson).

The role of cultural context in understanding the person in his/her environment is given by an example of social work with minorities in the field of education and in particular regarding the Muslim Minority of Thrace, which is a familiar population to the students as the Democritus University is based in Thrace:

> *"Issues of adolescent pregnancy in Roma families is an element of cultural particularity. We have to discuss it in relation to the school dropout and to the competence in school" (8th lesson).*

Commenting on the case study of Mira, the Professor said:

> *"We see issues relating to the cultural competence of the social worker. The social worker recognizes and accepts in a direct way the cultural particularities but she doesn't comment on these, she doesn't criticize them, she doesn't characterize them, and she doesn't put labels on them. She follows the girls' feeling, such as she is another one student, because she could be a Greek student with a father with the same request to drop out from school" (10th lesson).*

Furthermore, the cultural context has a significant role on how are defined the social roles, which a person has to fulfill in his/her environment:

> *"Who is a good parent", "Who is a giving parent", "Who is an efficient parent" are defined by a huge variety of parameters that are related to the cultural environment in which we live" (11th lesson).*

2.7 Reflection

The concept of reflection was addressed by the use of a case study of a man with cancer, which was used also as a role play in the classroom:

> *"What does the social worker ask herself? Here, we get into "deep water," into clinical work, but we examine it because it refers to the first encounter. Remember her first question: "Did I come to know the service user? and "What did I come to know?" (3rd lesson).*

This reminds of [17], p. 338) dismissal of the professional narcissism and his call on social workers to reflect on what happened at the meeting, what they did or what they did not do, therefore impacting on the service user's decision to continue or discontinue their collaboration.

Commenting on the case study of Eva, the Professor described the social worker's reflection process:

> *"When everything was finished, the social worker had second thoughts about the encounter. "I have a first impression of separation anxiety because…". […] In this reflection, the social worker writes "I made an appointment only with the mother because…" […] "But I said to the father he will get the appointment through mum. Maybe it was wrong?" Here, you can see the issue of reflection at the end of each encounter, where we think what went well and what didn't go well. The social worker gives prominence on what he had done. "I chose to make an appointment only with mum" because she made me to think what? And in contrast "why I didn't make an appointment with the father?," Or "why I didn't make a shared appointment again?" […] He thinks that the father's stance has affected him. That's the mistake. That he got carried away in his assessment which wasn't the father's request, he wasn't emotionally present, it seems that he didn't care what is happening" (5th lesson).*

The value of reflection is presented also by the Professor through the cases of referrals:

> *"In reflection, we wonder about everything we have in our mind in relation to the encounter. For example, is the referral the best solution for the service user,? or we feel inadequate to some degree and incompetent and we are insecure, and therefore we prefer not to take this burden, not to take the responsibility and to cede the responsibility to someone else? Or because it serves the insufficiencies of our agency. We have to reach a conclusion and this conclusion should be thoughtful. Otherwise, it will be a very serious blow for the service user"* (5th lesson).

The discussion of the role of first and last impressions in the eleventh lesson, provided the students with an example of what they can reflect on:

> *"We should take into account the last picture as much as the first picture. How is the person who is leaving from our encounter, either during the diagnostic assessment or in the following encounters? It is important for us to have that focus: "How does he/she leave us?" Which were the last words he/she used to say goodbye?" "How did the encounter finish?" "Did he/she leave grumpy?" "Did he/she leave happy?" "Did he/she leave hopeful?" "How left the person who was with us?" It is a crucial observation. [...] This last picture can give us a feedback regarding what we have done, what has happened between us, and the person who was with us"* (11th lesson).

2.8 Risk, needs, resources, and strengths

Finally, there was an emphasis on thinking about risks, needs, resources, and strengths of the service user during the diagnostic assessment.

Thinking as a social worker includes the assessment of the involved needs and risks:

> *"We should assess the danger without referring the person to other specialties. Adolescents with suicide ideations are definite, and they will actualize them rather than telling them to us. They are acting out without getting into the process to talk to us"* (2nd lesson).

The class regarding the diagnostic assessment in social work with people in crisis triggered a student to reveal her concern of working with a service user with murderous intentions. The Professor explained:

> *"The first stage is the psychosocial assessment and risk assessment. Risk assessment pertains to the possibility the person in front of us to inflict injury to himself/herself or to others. This means that we have to insist on this element. [...] We should examine the context of his/her references. We should assess the risk in order to deter it. We should examine whether the danger presented by the service user is a possible danger or is an outburst generated by other parameters. Is this happening due to an accident for which someone else was responsible, and we have in front of the husband who has lost his wife and child, and he tells us he wants to kill him? We understand that he feels tremendous anger, therefore we have to weigh this element of anger, to see whether it is possible to be occurred. [...] People who seek for help at social services are not angels, and they may be extremely angry or disappointed"* (12th lesson).

Social workers should recognize and take into account the strengths and resources of the service users:

> *"People have abilities and sources. [...] We have to encourage them to reveal them. Nobody knows the limits of his/her strengths because he/she hasn't needed to use them yet" (6th lesson).*

> *"Persons, groups, and communities have strengths which enable them to change and to evolve. [...] The science of social work in general is based on that principle: Everyone is meant to develop, evolve, proceed, deal with difficulties, change, and make progress. The change is innate with the human development. We believe that people have from the beginning abilities and skills to create, improve, and change undesirable situations. [...] If we thought that the perpetrator remains perpetrator during his/her lifetime, then we wouldn't work with the perpetrators. If we thought that a person with disability doesn't have something to do in his/her life, then we wouldn't have worked with the disability" (7th lesson).*

> *"We begin with the main principle of the social work science. People are able to change their ways of adjustment and their behavior when it is imposed by the environment or when they choose it. We change, and we are in harmony with what our environment pursues. [...] We accept the existence of this ability to change" (8th lesson).*

> *"We take into account which are the abilities and skills that we expect the child has and in relation to his /her age, education, and experience of group life" (9th lesson).*

Two diagnostic tools were presented, one for minors (Triangle) and one for adults (Plefsi) as contexts of thinking:

> *"The diagnostic assessment can be based not only on theoretical tools but also on diagnostic tools. One of the most popular and familiar systems, which we have translated in Greek, is "Plefsi." This enables us to organize our thinking in a way so we can reach evidenced conclusions; namely, we have in some way a systematic way to keep track of the diagnostic assessment. [...] It's called Person in Environment (PIE), and it helps us to think what difficulties and strengths exist in the person and his/her environment simultaneously. [...] This system is linear, we check things, and we don't write anything, but it helps us to think and organize the information in our mind. [...] These systems although coldly, they could help social workers in terms of efficiency and time. [...] The progression is recorded on the axis of strengths and needs" (11th lesson).*

3. Teaching to perform as a social worker during diagnostic assessment

The research findings about the performing of social work include the development of trust, the need to contact service users who drop out from the collaboration, and several characteristics of communication.

3.1 Developing trust

One of the first necessary elements of the social worker's actions is the development of trust, which needs to be gained so that constructive cooperation can be

achieved. Therefore, the social worker strives to establish and maintain the trust of service users.

> *"Between these two persons, a punt should be built. To build it, they need trust. [...] We should make the diagnostic assessment based on information that the persons will tell us, therefore we need to trust them. There isn't any irrational situation, and everything has a reason. There is no such thing as irrational behavior. Even someone who is bored has his/her own reasons. [...] We should inspire trust and competence in the unknown X"* (1st lesson).

> *"The diagnostic assessment includes the building and founding of the relationship, the regard, and the trust, as well as the development of the intervention. In the case of Eva, while we were still during the diagnostic assessment, her mother came at the second encounter with the social worker and told him that her daughter was getting better, she had a new doll with which she sleeps"* (12th lesson).

Means of achieving the development of trust are the time investment, the use of nonverbal signs, the confidentiality, the sincerity, the active listening, and the avoidance of doubting of adults and children. It is a revival of relationship-based social work.

> *"The circumstance in which you could make the person to trust you includes the confidentiality, the sincerity, etc."* (1st lesson).

> *"The mother who will trust us information about how she lives with her child with a disability, and not only that she has a child with disability, should firstly trust us and feel that we are suitable and capable to do it"* (1st lesson).

Developing trust with service users in crisis called the students to differentiate trust from dependence:

> *"The service user who is in crisis could become, among others, dependent from the social worker and expect that he/she is going to make decisions and find the solution in his/her place. We need trust but not the dependency. We don't hurry to confound it during the period of acute crisis but we keep it in our mind"* (12th lesson).

The development of trust is also crucial in diagnostic assessment in social work with children. Commenting on the case study of Eva, the Professor said:

> *"You have to approach Eva by telling her "your teacher has told me that you seem sad." You have to show that you know about the situation from somewhere. We have discussed that we have to be absolute sincere with children. Therefore, here you should show your sincerity"* (10th lesson).

This revelation of the information's source by the social worker made a student to concern about ruining the trusting relationship between Eva and her teacher and to suggest getting know with Eva by attending one of her classes. The Professor insisted on social worker's sincerity:

> *"Why don't you want to be sincere with Eva?"* It is expected that you have visited all classes in the beginning of the school year to introduce yourself; therefore, Eva knows

about you in some way. […] She theoretically knows that there is someone who is interlocutor of the children, the parents, and the teacher. You don't have a reason not to tell her truth. We should exercise the principle of sincerity to gain children's trust. You should put the principle of sincerity on the table. […] In order to start the diagnostic assessment, we should bring her to our office and we can do that only if we have previously gained her trust. Because we are a person which Eva, not only doesn't know but she probably identifies it also with the place where she isn't very happy that she's coming and she doesn't enjoy it very much. […] We must be able to think in her place" (10th lesson).

Sincerity seemed a difficult task for another student who had the idea of using art, in particular painting, to begin the relationships with children: "*Can we ask her if she wants to paint and feel comfortable with us?*" The Professor declared that:

"You call her on pretext. You don't tell her the truth. […] You put her trust in danger. Why do you want to tell her to paint? Do you paint with other children? And why you haven't painted with her up to now? Why are we going to paint while the other students are in the class? […] We don't gain the trust only with painting. You could refer that "after our discussion, we could paint, I have also some toys, which you could try while we are talking." But not as an invitation. […] "We can't be a little sincere or not sincere at all. We are sincere and we have to show it" (10th lesson).

Contacting service users who drop out from their collaboration with the social worker.

Commenting on the case of Eva and the way the social worker had been working with her parents, the need to contact the service users who drop out was underlined:

"The social worker writes to the Eva's father, who didn't show up at the encounter, which was arranged falsely through the Eva's mother: "I am sorry that you couldn't come. As our collaboration is very important, I would suggest meeting at… But if the date isn't convenient, you could contact to make another appointment." The text is written on the agency's paper, and the phone and working hours are evident on the paper. Hence, the father has the chance to contact directly. […] And that is repeated again when the person, with whom we have an appointment, doesn't show up or we don't know if he/she has received the message, as it is the case here, the social worker repeats the same things in a new message: "I understand that you, unfortunately, didn't receive the message," without any mention to "why" and "what has happened," "how," "when," we don't care about these. The most important is to remind the other person that "it is important for us" and this time "it is necessary." This helps to manage persons who have uncertainty in relation to whether they will collaborate or not with us" (5th lesson).

3.2 Characteristics of communication

The value of effectively using communication, namely skills, such as active listening with minors and adults, were addressed.

Specifically with children the communication must correspond to the developmental stage, it must be individualized, without promises, trustworthy, without doubting, and with possible parental preparation.

> *"We should take into account the developmental stage of the child. [...] Age is critical because the child's condition is very important cognitively, emotionally, and developmentally. We should match every developmental phase with issues that refer mainly to the communication and particular conditions where the child lives [...] The age factor and the content of the child's discourse determine the adaptation of our language, in order to talk in their language, which is something easy for some and difficult for others, and it depends, sometimes, to the age distance between them. The adaptation of the language means that the content and quantity of the discourse should be specific, clear, and brief. We send clear messages for what we have to tell, and we choose the adequate words, in order to not say very much but specific things. And definitely sincerity. Children are the best receivers and assessors of the messages of sincerity. [...] We introduce ourselves, as we do with adults, we explain who we are and what we do. If I say that "my name is X, and I am a social worker" doesn't mean anything for a child because obviously, it hasn't heard again the word social worker. I have to say briefly what I am, based on the agency where I work. We have to describe what we do. "I am here to talk with children like you and to listen to them and to think with the children their possible difficulties. To a four-year-old child, we could say "here, we could talk about what happens at school. How was our day yesterday, what we have done at the weekend." [...]We have to introduce ourselves and to explain who we are and what we are going to do together even with a child with mental or cognitive disability. We will do it with fewer words and more clarity. Their understanding corresponds to previous developmental stages. We suggest them to sit with us, to be with us, to follow us, to answer us or to note or draw things. We don't treat them as powerless and incapable" (9th lesson).*

Furthermore, the Professor described five elements of communication, which need attention by the students. These are the potential explanations and interpretations, the quantity of social worker's discourse, the acceptance of silence, the use of service user's discourse, and the careful selection of terms in written and verbal communication.

The first point of attention in the verbal communication refers to the expressing potential explanations and interpretations:

> *"The social worker doesn't "leave" the parents when they were going to speak with their daughter about coming to the center for children's mental health. He tells, thinks, and share with them what ideas, what they could tell their daughter. And he recognizes the mother's emotions. He tells her "it must have been very difficult what you have been through." This trigger them to share their emotions with him. [...] There was the recognition to the mother that what she said, should have been very difficult because the mother obviously does not speak in a vacuum. We give her a feedback. That moment she has a reflection of her discourse content. [...] We use the techniques of repetition and summary. [...] But we don't use the technique of interpretation during the first encounters with people as we don't have assured their trust. [...] And there are techniques, which belong only to specific perspectives, such self-revelation of the systemic model" (6th lesson).*

The following extract refers to the case study of Mira:

> *"The social worker said: He cares about you in the way he knows, based on his perceptions of the "right" girl, and therefore happy girl. [...] Here, the social worker puts words to what is underneath. The father's stance is based on strong perceptions which*

> *say: "What are you doing with your daughter? You send her to school but what is she going to do after it? What does this mean for your community of Afghan migrants?". [...] The social worker doesn't question the father' perceptions. She gives prominence to them by putting words to them and she says "Look, these are the perceptions that your father has and these are on which he depends on." Therefore, he isn't angry with you, or he isn't against your wishes or his wife. But he is driven by, affected and functions in correspondence with the perceptions he has". [...] In the end, she says: "Our discussion revealed that your parents care for you." It's a positive feedback. "But they think as their parents do in their country and like today in your country. [...] The social worker gives an excellent feedback: "Everyone in your family knows the desires of the other family members. You don't discuss them to avoid making sad each other." It's a strong feedback regarding the bond that exists in the family, the quality of the relationship that exists in the family" (10th lesson).*

Synopsis was referred again in the context of presenting techniques, which facilitate the dialog in social work with service users in crisis:

> *"Therefore, it has to do with…" (12th lesson).*

Synopsis includes reflection of feeling:

> *"In reflection of feeling we can use different ideas. "It should have been very harrowing." The social worker names the presented incident as harrowing" (12th lesson).*

Another point relates to the "talking," which should be sensible.

The "quantity" of the social worker's communication should be proportional to the service user's quantity of verbal communication. Commenting on the role-play of the teenager named Ilias, the Professor stated:

> *"You see that the social worker doesn't talk very much. Teenagers don't want too much loquacity. And this is acknowledged here by the social worker. She doesn't use more than ten words" (2nd lesson).*

The same point is presented on the case study of Mira:

> *"You see that the social worker doesn't say too much. Her discourse is no more than two lines. Actually, even the two lines are rare. It is interesting, and it's for you to remember that during working with adolescents, they don't want yawp and it doesn't fit for them. Yawp and the guidance bother them. They want freedom and ease" (10th lesson).*

In general, social workers' speech should be based on the active listening and should include everything that the service user has agreed with. An example is given in the role-play of the man with cancer:

> *"Their accounts are brief, both the social worker and the service user are brief. Zero sermon. And we should not give sermon" (3rd lesson).*

The attention to the verbal communication includes also the acceptance of silence. Commenting on the case study of Ilias, a 16-years-old boy who was referred to the mental health center by the prosecutor due to his recurrent behavior of stealing bicycles:

> *"Silence talks. It has something to tell us. Besides, it is the first encounter, why does he have to be a babbler?" (2nd lesson).*

The intentional use of the service user's voice. Commenting on a role-play of a social worker and a man with cancer was argued:

> *"The social worker uses service user's discourse. She doesn't use neither slang nor her own words. It isn't easy. She doesn't reel off emotions. Nothing. She uses the words "fear" and "pain" because these are what she has. Because she has used the active listening" (3rd lesson).*

Moreover, commenting on a case study of Eva, the Professor said:

> *"At the end, when the parents ask the social worker what they are going to say to their daughter about their collaboration with the center for children's mental health, she says that it is good to tell her the truth: That they want to talk with a specialist and to think ways to calm her "fear of darkness." Here, you see the parenthesis, these are her own words because she says "she wakes up and says I am afraid of the darkness," it is what the parents have told her. You see the active listening. She has heard their words very carefully, and she kept that. Namely, that they could tell their daughter the truth by using her own words." (5th lesson).*

Commenting on the case study of Mira, the Professor said:

> *"Mira said: "I want to scream. I want to study, like my classmates will do, this is my dream." Then the social worker repeats Mira's words: "You want to follow your dream..." (10th lesson).*

The students were told to pay attention to the *selection of terms* in both verbal and written communication.

The way of writing should be careful in order to give a concrete and comprehensive picture. It should include concise description of elements with sequence in language understandable by the reader. Its summary and report of information must be in a meaningful and evolutionary order. It should include descriptive depiction of the personal history and the developmental process. Other elements are summarizing individual histories and descriptions, as well as explicit and scientific terminology.

Special attention should be given to the written language, mainly to the filling out the case's social report. The first point of attention refers to the descriptive language:

> *"Moreover, you should be descriptive, for example, "he looked down" or "he was waggling his hands." We never make diagnoses: "His psychology was bad, etc. [...] You could use adjectives "such as "aggressive" but you should say toward what he was aggressive?" (2nd lesson).*

> *"The social report may facilitate the intervention addressed. The text (of the social report) is not only for its author and the agency where he/she works. The writing should correspond to what has been said during the diagnostic assessment. [...] What we say should have accuracy (6th lesson).*

Another advice to the students was to write in formal language, which can be achieved by carefully choosing the terminology:

> *"I like using the term "difficulty" rather than "problem" but sometimes it's like we are sweetening the deal" (1st lesson).*

> *"You should be careful about the verbs and the words you use (2nd lesson).*

> *"When we write a paper, it should be with formality. […] It has to be professional and not everyday language" […] We should pay attention to the terminology, to the words we choose to use. […] The social reports are saved in the files at the agency, and they will be read by many specialties, the history isn't only for us and it's very important to be written in a terminology, which corresponds to that situation. […] We should use the terminology of our science, the terminology of our knowledge from other sciences, such as human development. If you assess that the father has an overprotected stance toward his daughter, you should name it; "Here, we have indications of an overprotected stance from the father." And what elements have this overprotection" (6th lesson).*

> *"It's better to write in third person singular and to pay attention on the language you use" (6th lesson). "The third person singular is conferred more academic, more professional, and more neutral. "Based on his narratives, it seems that…". "Based on his reference to a past collaboration comes up that…", "He appears to…". "He seems to…." (8th lesson).*

Open-ended questions are valuable:

> *"We use mainly open-ended questions and closed questions only when we need them, such as "What grade are you in?" But "how is your experience at school every day?" Is an open-ended question which is very functional and important to be used?"*
> *(6th lesson).*

The development of trust
The need to contact service users who drop out
The characteristics of communication
• Namely skills, such as active listening (with minors & adults)
• Specifically with children: correspond to developmental stage, individualized, without promises, trustworthy, without doubting, parental preparation
• Emphasize verbal and written communication:
• Expressing potential explanations and interpretations
• The "quantity" of the social worker's communication, as proportional to the service user's quantity of verbal communication
• The acceptance of the service user's silence
• Intentional use of the service user's discourse
• Selection of terms in both the verbal and written communication

Table 2.
Performing as a social worker during diagnostic assessment.

> *"We usually don't put words to the children's feelings, such as "You don't feel well,"
> or "You are not happy." In contrast we say who has these concerns. "Your teacher
> worries.""*

> *"We know from her diagnosis certificate that she was an excellent student. Therefore,
> we can use this information in our questions: "We know from your previous school
> that you were an excellent student. What about now? Are there courses that are more
> interesting? or pleasant?" We should wonder in the child's language" (10th lesson).*

Table 2 shows in short the abovementioned research findings.

4. Teaching to act as a social worker with integrity during diagnostic assessment

This section refers to acting as a social worker with integrity and includes four
elements (see **Table 3**).

Service user's informed consent for assessment, referral, and recording.

The social worker must achieve the informed consent from the service user for
his/her participation in the diagnostic assessment. This informed consent includes
information about issues of confidentiality:

> *"The social worker should ask the service user's permission to keep notes during the
> interview. [...] He/she should inform the service user that he/she has the right to access
> his/her social record. [...] The social worker should inform the service user for the
> access of other professionals to his/her social record" (4th lesson).*

The need for informed consent was underlined about the purpose, the aim and the
type of the proposed referral:

> *"Someone who has come to the social service, he/she isn't very happy, he/she is already
> sad and disappointed, he/she considers that he/she has failed in a realm of life and
> wants to get help. Consequently, we respect him/her and we don't hurry to say "well,
> nevertheless, we can't help you, go there." The phrase "we can't help you" should
> be evidence-based. We can't help you, why? [...] But when the major theme of the
> person's priorities is, for example, the management of his/her dependency, we will
> obviously encourage him/her and prepare his/her referral to an agency, which deals
> with it. But that doesn't cancel the fact that we have taken his/her history because we
> can together with the referral report in cooperation with the person and after having
> his approval, to send them, so that there won't be the need for him/her to describe
> again everything he/she has been through. In order to go on. [...] We would say "we*

Informed consent from the service user
Avoidance of unrealistic promises
Nonjudgmental behavior
Parents' and guardians' permission

Table 3.
Acting as a social worker with integrity during diagnostic assessment.

> *suggest you calling on this agency as it has these services. If you decide about it, then you could tell me if you agree to send your history too." We won't do it without telling her/him. It relates to how we manage the files, which has to do with issues of deontology and service users' rights" (5th lesson).*

> *"We should share our referral to the child: "Here, at this point, I wrote that in my opinion, it is better for you to have meetings with Ms X at the X agency, which helps children with this kind of difficulties. Because it happens to many children like you" (9th lesson).*

The social worker's sincerity in not recording their online communication with service users *via* video calls, without their permission:

> *"Remember to reassure the confidentiality during online interviews because these systems have abilities that exceed the limits of confidentiality as someone could videotape or audiotape the encounter. […]. People may have that question and we have to assure them that we are unfeigned, and we don't record our encounter. We have to be sincere. It is very important for our service user. […] We have the issues of sincerity. If we want to videotape or audiotape the online encounter, it has to be named, to be stated, to be known. We must have the consent of the person, although he/she is far away from us. We must keep our principles and apply them, and it is very important" (6th lesson).*

> *"We tell Eva that "everything we discuss here will stay between us except for something seems dangerous and very difficult for you, therefore we probably will need the help of others to get the things better." We tell her the truth because indeed our collaboration with Eva will not be confidential 100% because after completing the diagnostic assessment, in which we used tools such as the triangle and the resilience, we have to set goals, which we will share with others, the teacher, and the parents. We are not gonna save the information from this assessment in the private box of our brain, and we are going to share them" (10th lesson).*

4.1 Avoidance of unrealistic promises

The educator emphasized also the need for avoidance of unrealistic promises to children, teenagers, and adults because the social worker needs to assure the sincerity that must characterize both his/her behavior as a professional and his/her relationship with the service user. Any promise by the social worker generates expectations in the service user for the next phase of the intervention. Given the fact that the social worker is unable to assure the achievement of these expectations, the short-term benefit of the engagement of the service user will end up in painful frustration. The avoidance of promises also applies to the principle of confidentiality, which must be approached by the social worker as possible and not unconditional.

> *"The parent wants his/her child with a disability to recover. If he/she talks about the tremendous burden, our promise that "we are here and we will do our best," will be ironic, they are lies and here we are talking about sincerity. It is irony, the child won't get better. The aim of the reassurance needs attention. The reassurance doesn't come with a promise, which is not real" (1st lesson).*

Attention is also needed in working with children:

"When you are working with a child, you won't say "I will keep secret everything we say". Idiocies! Regarding that the next day I will hand in a review to the prosecutor. If he/she is an adolescent, I should tell him/her that "I will talk also with…". Firstly, we should be truthful" (2nd lesson).

The same attention is needed when working with adolescents:

"You could tell them "If I see something very worrying, I will discuss it with my colleague" (2nd lesson).

"We should be careful with the confidentiality. We don't say to the child "what we will say, will be kept between you and me, I won't tell it to anyone". We shouldn't promise something that we will not keep. During interviews with children relating to the child protection, who are involved in procedures of leaving from their homes, with experiences of abuse, with complications in their life, we can't say "it is going to stay between us" because it will not! Because we are going to write the review for the prosecutor. Because based on what we will learn and assess, others will make decisions for his/her lives, by the prosecutor, the social service, etc. In these cases, we are obliged to say from the beginning that "what we will say here will stay with us, will be our secret in some way, but to the point that the situation we discuss won't be dangerous for you. Because then we may need help from other people to take care of it and for your benefit." And we try to describe this benefit: "Where you could stay, who could take care of you, and who can help us" (9th lesson).

"We listen and we try to think with the service users' solutions and to exchange thoughts and ideas. There is no promise in the diagnostic assessment and in counseling that we will surely resolve the issue that bothers you. We don't know this. We don't give fond promises. We declare again our basic principle: I am not here to tell you what you should do, to tell you what is good for you. We'll see together. And we say this from the beginning. This element of the beginning gains the informed consent of the service user, who knows that we will proceed on these" (10th lesson).

4.2 Nonjudgmental behavior

The nonjudgmental behavior of the social worker toward the service user constitutes an element of integrity.

"People may be troubled, worried, feared, or have second thoughts and doubts. Although we begin on the basis of nonjudgment, they don't know it" (1st lesson).

The nonjudgmental attitude constitutes one of the seven principles, which Biestek [12] defined as essential to the casework relationship. The students seemed skeptical, and after seconds of silence, some of them revealed their concern about applying this principle in working with service users with inappropriate behavior.

"Every relationship is related to the attachment and the issues of identity. We are talking about the issue of love and consequently the issue of acceptance. And acceptance means I recognize the other for what he/she is, his/her characteristics may be negative as well. […] During the diagnostic assessment, we may encounter service users who are offenders, therefore they are persons who deviate from the ordinary figure we accept.

> *"Do I have fully accept the mother who throw her newborn from the bridge in the city of Patra? [...] You cannot show disgust toward the mother during your cooperation. You should work with her on professional terms. That's why we have the deontology. [...] We are not the bank clerk who will say behind the desk "your account is empty." As social workers, we should show sympathy to the fact that his account may be empty because of gambling. [...] Consequently, we have to focus on abilities for sincerity, acceptance, and trust. These are the characteristics, which are tested in the praxis"* (1st lesson).

In this passage, the Professor reminded the students that accepting service users with inappropriate behavior as an act of integrity derives from social work ethics and deontology. Nevertheless, this principle seemed too difficult to be actualized as some students proposed the referral as solution in such cases.

> *"And how sure is that your colleague is better than you? We should think, each of us, with which abilities we will work on the issue? But firstly, you should gain his/her trust"* (1st lesson).

The Professor's answer attributed this ethical obligation to the trusting relationship, and she connected it with the social workers' competence in terms of abilities. Moreover, she facilitated the students' understanding on acting with integrity with such cases by using the case study of the couple at the center for children's mental health, in which the father abuses his son.

> *"We should express ourselves in ways that won't make people feel blamed or be insulted. Because they won't come again, they won't bring their child over again, and they won't get on with dealing their difficulty. [...] We keep the nonjudgmental stance in an absolute way. There isn't any comment from the professional that concerns the past situation, neither that he was aggressive toward the child nor why he hadn't come to the center for children's mental health or why he is laughing while he is talking about his past as a perpetrator. None of these. Besides, we have just got known with the people"* (5th lesson).

> *"You should keep in mind that much as horrible and paradoxical the behavior, which the service user brings over, confesses, and refers during the diagnostic assessment and social work intervention, we should listen to it. We should encourage its analysis according to the way it comes up. If we are talking about the child's disability, and the mother tells us "I wished its death," it's a wish that we should talk about. What does it mean? How much does it make you sad? How much demanding is the life with him/her? Much as outrageous is a situation, we're there to listen to it. And we should listen to it. This is the challenge and difficult of our job"* (12th lesson).

The obligation to listen to service users with inappropriate behavior made a student to ask about working with a service user who confessed a crime he/she committed in the past, receiving the following answer from the Professor:

> *"If a person tells you straight out that he/she committed a crime, he/she has a very serious reason. [...] You should analyze it. Without showing either big surprise or critique, such as "I didn't expect that from you," nothing like that. "Why do you refer to such a particular issue right now during our encounter?" "What are you thinking about it?" "What do you want to think about it together?" "How did you manage it up to now?" "What legal aid have you seek?"* (12th lesson).

Cooperation with minors based on parents' and guardians' permission.

Social work with children and adolescents must be done on their parents' and/or guardians' permission. However, this does not entail that the social worker rejects the minors when they come to see him/her without having told their parent/guardians.

> *"You probably won't have voluntary presence of children up to 14 years old. But if the child comes to an agency, such as telephone counseling, you have to listen to it but then you will somehow make a contact with a person who has its custody. We can't begin a systematic collaboration when we don't have the consent of the person who has the custody of the child, which is up to 14 years old. It is very important. We can listen to kids, their own issues and needs but then we have to explain them that "you are a minor and we need to chat what your family knows about your coming here. Do you have talked with your mum? Does your father know it? Is there someone who knows that you are going to come here? What's his/her opinion?" Parents should know where their children are. [...] Consider you are a social worker in a special school and the children come and tell you their difficulties. If these difficulties refer to the school, you can work with them regarding the class and the teacher. But if these are issues related to their home, you should ask them what their parents know about your conversation or if they are thinking about telling them. The issue is legal. [...] We should have the consent of the parents. For children above 16 years old, the matter is easier, although the infancy in Greek laws is up to 17 years old" (8th lesson).*

> *"When you work in an agency as a permanent stuff and you work with people who are its service users, such as at a school, you have the chance to make an exploration before informing the parent. Besides, right now, what can you say to her mother if you haven't understood what is happening with Eva. [...] But after that, if we decide to have systematic encounters with Eva, centered on issues of self-esteem, her expectations, difficulties, attempts to make friends, or participation in activities in the community, we obviously need the informed consent of her mother and father or the person who has the custody. [...] The social worker introduces herself and describes briefly how she works in the counseling center for adolescents: "I am here and at this center, which belongs to Ministry of Education and it relates to schools, I can make up to two encounters with the students, which I can keep secret. Because children have the chance to come to talk to me, I am here to listen to them, but if we need more than two encounters, namely if we get into a process of systematic collaboration to manage the difficulty that children bring, to get into a process of change of the behavior or the stance, or they want to manage a situation of anxiety or depression or sadness, then obviously the parents must be informed." We make this statement from the beginning. The adolescent referred "I remember you from your visit to our class in the beginning of the year. But today I came alone." And the social worker replied "You are welcome. What do you want to discuss" (10th lesson).*

5. Conclusions

The use of SP' concepts of teaching to think, perform and act with integrity as a research tool in teaching-learning diagnostic assessment in social work proved valuable for all involved parties: the concept of SP in social work, the social work assessment, and the social work education.

The concept of SP is used three times in a row in the last three EPAS of CSWE to characterize the field education in social work but its use is not evidence-based,

producing critiques on the appropriateness of its particular use. The use of the threefold of thinking, performing, and acting with integrity in this experiment could model and evoke expanded research of its use in the field education of social work to gain general acceptance.

Although most social workers agree that assessment is necessary, there may be quibble on what social workers' assessment is based or how best to proceed once the assessment is completed ([18], p. 85). The categories of thinking, performing, and acting with integrity facilitate the categorization of the teaching content-learning objects, which could contribute to the collection of a body of knowledge that is taught/learned now, letting its transformation and adaptation.

The research on the course of "diagnostic assessment in social work" reveals the need for *equal investment* in the three dimensions of professional work according to Shulman [4]: namely thinking, performing, and acting with integrity. This kind of educational investment contributes both to the short-term success of the diagnostic assessment (namely the reappearance of the service user in the second meeting) and to the long-term success (namely the agreement for corporation and keeping it to the end). Unfortunately, internal factors, such as the uncertainty new social workers have about their abilities, and external factors, such as the pressure of managed care for quick results, push the social workers, in the USA and UK, to the pitfall of focusing only on the action. Meyer [17] talks about the pressure that social workers feel "to do something" and the ignorance of the value of thinking, which has consequences on the achievement of behavior with integrity. The equal value that was given to the cultivation of the thinking, performing, and acting with integrity during the course of diagnostic assessment, contributed to the preparation of the students in dealing with the aforementioned pressure and any other counterpart for when they become future professionals. That is because the students recognize the haste that was derived from their uncertainty, will understand the therapeutic power of listening and understanding of service user, and will resist the trend of managed care.

The three components of the Course, thinking, performing, and acting as a social worker with integrity, were taught simultaneously in every class, formulating in that way thirteen coherent classes. Moreover, every class included simultaneous teaching about knowledge, skills, and values, which added to the coherence of the classes. The unexpected transformation of the teaching from in person to online due to COVID-19 resulted in the inclusion of deontology issues in the component of acting as a social work with integrity by discussing the need for informed consent of recoding the online encounter of social workers and service users during the diagnostic assessment. Generally, the education in acting with integrity allows the timely and holistic teaching of social work ethics because the time space of the assessment in the continuum of social work intervention results in the examination and dealing with the first ethical issues, problems, and dilemmas that the students might face during their field education and after their graduation. Participant observation revealed the students' concern on working with service users with inappropriate behavior as a difficult of task in terms of acting with integrity.

The threefold education in professional work is suggested as tool both for the specification of the trends that have been internalized in social work education and for the comparison of these trends to the social work education in other countries. A major part of teaching-learning how to think, perform, and act with integrity referred to the ecological vision. Case studies, such as of Mira, an Afghan adolescent who visited voluntarily the counseling center for adolescents, descriptions such as those about the survivors of the conflagration in Mati (of Attiki Region in Greece) and examples, such as the refugee mothers at the Campus of Idomeni, stressed the importance of the

ecological vision during the diagnostic assessment, specifically and in social work in general. This kind of education, which teaches the interconnectedness of the social, economic, and environmental factors resembles the three dimensions of the sustainable development and achieves to prepare the social work students to contribute in the future to the pursuit of the 2030 Sustainable Goals defined by the United Nations (UN) (https://sdgs.un.org/2030agenda).

The conceptual framework of thinking, performing, and acting with integrity could also be used simultaneously as a tool of social work students' assessment, facilitating the achievement of balance between researching the teaching and learning in social work education, contributing in that way in overcoming the critique of previous decades on social work educators emphasis on teaching and neglect of social work students learning [15]. In that way, it provides a context to collect and study the *deep learning* instead of *surface learning* as they are defined by Marton & Saljo (1976 in [15], p. 434): 1) it facilitates the study of learning from both teachers' and learners' perspective and 2) it drives the researchers from how much is learned to what is being learned and how the learning occurs. Thinking, performing, and acting as social worker with integrity includes obviously many elements, which constitute the spectrum of diagnostic assessment and which can not be taught-learned in a single class of 13 lessons. Therefore, this experiment reflects only *what* was viewed as crucial by the Professor as learning objects, lacking other elements useful in diagnostic assessment.

This study managed to include rather than just locate students' perspectives ([15], p. 434) due to the processes of collecting their written expectations at the first lesson and their assessment at the end of the course.

Despite the change in the teaching-learning environment from in-person classes to online due to the outburst of the pandemic COVID-19, the students' engagement remained at the same high level. What was changed was their form of participation as they used the chat tool of the Skype for business platform in combination with verbal participation. The students were engaged in whatever was taking place in the classroom (presentation, discussion, role play) either willingly or after being motivated by the Professor.

Another benefit of their engagement concerned the re-viewing and reconsidering of the applied learning in the field education ([15], p. 438) by the 4th year students who had completed it.

Example of the students' engagement and evidence of the facilitative learning climate was the kind request of some students for repetition of the Professor descriptions.

The learning outcome was assessed and the students were graded by two tasks, in which all of them were successful. The first task was minor and required filling in a social history form based on a case study, which was previously presented and discussed in the class. The second task was major and concerned the writing of one or more imaginary encounters of the students as social workers with a service user for the diagnostic assessment. Nevertheless, the compulsory online way of teaching deprived the chance of using more role plays, other than the three of the first in-person classes, limiting the opportunities for students' engagement in the teaching-learning process.

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Section 5

Leadership and Social Policy in Social Work

Chapter 13

The Role of Social Work Leaders in Eliciting Cooperative Behaviour

Thandazile Mathabela

Abstract

The essence of how social work leaders elicit cooperation has not received much attention even though the social work profession has produced great leaders. Research has questioned the extent to which existing leadership models apply to social work leadership and proposed the development of a leadership model that is embedded in social work ethics, values and goals. However, neither leadership nor followership happens in social vacuum. Thus, to understand social work leadership and its effects, it is necessary to understand the social context in which they occur and how leaders behave within particular social contexts. This analysis suggests that, in order to comprehend the influence of social work leaders on followers (i.e., social workers), we must first understand the nature of the relationship that already exists between leaders and followers and how this relationship or context influences whether the leader's prototypicality or behaviour makes the followers to be more likely to engage in cooperative behaviour.

Keywords: cooperative behaviour, relational models or elementary relationships, communal sharing, authority ranking, ingroup identification, identity prototypicality, identity advancement, identity entrepreneurship, identity impresarioship

1. Introduction

Social life has been shelled by countless problems. Social workers have relentlessly engaged in critical roles regarding the development and implementation of interventions to manage social problems. These interventions include mitigating persistent poverty, ensuring healthy development for children and youth, closing the health gap, stopping family violence, advancing long and productive lives, eradicating social isolation, ending homelessness, creating social responses to changing environment (e.g., by reducing substance abuse and mass incarceration), harnessing technology for social good, promoting smart decarceration, reducing extreme economic inequality, building financial capability for all and achieving equal opportunity and justice [1–3]. The implementation of social work interventions requires the cooperation of different non-governmental and governmental sectors, individual social workers, social work groups, other professionals and society at large [4].

Research, based on the evolutionary analysis of cooperation [5, 6], outlines conditions under which individuals are most likely to cooperate and proposes mechanisms in which cooperation can evolve and spread amongst people [7]. From this perspective,

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cooperation is defined as a process of social interaction by which individuals, groups and organisations come together, interact and form psychological relationships for mutual gain or benefit ([8], p. 10; see also [9]). Hence, cooperative behaviour is seen as a result of consistency in the opportunities for mutually rewarding activities by the people involved in a relationship [6, 7]. It may also be viewed as the degree to which the group members engage in behaviours that are beneficial for the groups they belong to (i.e., [10]).

This chapter adopts the perspective that people are most likely to cooperate with those who are similar to them and are part of their social circles (i.e., spatial selection, [11]) and that cooperation is most likely to develop, spread and be enhanced within groups through the implementation of group norms [6, 7]. Group norms are likely to be effective if they express the central values of the group and clarify what is distinctive about the group's identity. They are existential for the group's existence (i.e., group survival), they determine group members' behaviour (i.e., behavioural expectations), they make the group distinct (i.e., create a social identity) and they express the central values shared by the group (i.e., social identity). Groups develop norms to guide and direct member's behaviour, provide order, allow members to make sense of, understand each other's actions and predict each other's behaviours in social relationships (i.e., group, [12–15]). Cooperation is enhanced when cooperative norms are present, especially when norms of the group are similar to norms of the self [16–19]. Leaders play an essential role in the formation and enforcement of group norms and so do social identity processes [20–23]. For instance, leaders who demonstrate leadership behaviour that promotes unity (i.e., cohesiveness and solidarity) and oneness are perceived as more effective and influential when compared to leaders who demonstrate leadership behaviour that promotes hierarchy (i.e., ranks and seniority differences; [24]. Likewise, followers' preferred interaction between leaders and followers is the communal sharing relationship [25]. Moreover, leaders who are perceived as prototypical of the ingroup and who treat group members in a fair manner are likely to prompt high levels of cooperation within a work group context [26]. These results suggest that, in a particular leader-follower relationship, leaders are instrumental in eliciting cooperative behaviour. This analysis suggests that, in order to comprehend the influence of social work leaders on followers (i.e., social workers), we must first understand the nature of the relationship that already exists between leaders and followers and how this relationship or context influences whether the leader's prototypicality or behaviour makes the followers be more likely to engage in cooperative behaviour.

2. Cooperative behaviour

Social workers are members of different social groups and work groups. Work groups are composed of group members, and leaders are members of the group. Cooperative behaviours, that can occur within a work group, are distinguished as informal and formal cooperative behaviours. Informal cooperative behaviour involves informal systems and processes such as behavioural norms that influence group members' behaviours [8]. It is a form of voluntary behaviour. Informal cooperation is more likely to occur when parties involved perceive they will be in contact with each other for a long time, when they are under the impression that it is their advantage to cooperate and/or when they believe that they must reciprocate benefits received in the past [27]. In an organisational context, informal cooperation refers to work efforts, innovations and creativity beyond in-role performance (i.e., extra role duties not stipulated in formal contractual employment; [28]). Examples are sharing knowledge,

helping a newly employed colleague or willingly working overtime to achieve the organisation's target. In contrast, formal cooperation refers to work efforts within the in-role performance (i.e., in-role duties stipulated on the formal contractual employment; [28]). For instance, the performance agreement of a typist includes the number of pages to be typed or the number of documents that are required to be typed.

Cooperation behaviours became a focus of research when organisations introduced work structures focusing on groups or teams and allocating work activities in terms of groups (i.e., management teams, project teams and or self-managed teams; [29, 30]). Research in this tradition conceptualises cooperative behaviour as solidarity [31], solidarity behaviour [32], organisational loyalty [33, 34], organisational commitment [35], contextual performance [36], willingness to cooperate [37] and as pro-social organisational behaviour, whistleblowing, principled organisational dissent and extra-role behaviours [38, 39]. Research has shown that cooperative behaviour and/or willingness to cooperate positively predicts group and organisational outcomes such as employee performance [40] and negatively predicts employees' resistance to organisational change [41], as well as absenteeism [42, 43]. Moreover, cooperative behaviour is a strong predictor of trust, organisational and work group effectiveness, workgroup efficiency, group goal attainment and employees' extra-role behaviour (i.e., the extent to which employees go beyond role requirements in carrying out their jobs; see [8, 10, 44, 45]).

The willingness to engage in extra-role behaviours is promoted the most within the work group context. Social work-based work groups are made up of the group's members (i.e., social workers), including the leaders (i.e., social work supervisors and social work managers; [46]). It is in this context where leadership processes occur, that is, "where leaders, as group members, ask followers, as group members, to exert themselves on behalf of the collective to achieve organisational or group goals" ([23]; p. 244). Leadership behaviour (e.g., skills, competencies and leadership styles) is vital for group members' commitment to achieving group goals and work group effectiveness [47, 48]. Thus, the essential aim of leadership is to influence employees (i.e., group members or followers; [49–52]). Most studies have shown that leadership behaviour predicts not only organisational outcomes (i.e., efficiency, job satisfaction, productivity and staff well-being) but also group performance by influencing the processes that govern performance [53–56], strong work engagement [50, 51], perceived leader fairness and charisma [57, 58], follower's adherence to instructions and trust [59], trust with their co-workers [60], job satisfaction [54, 61], citizenship behaviours through followers' trust in the leader [62], decreased turn-over intentions [63], increased identification with the leader [64] and workgroup [65], commitment to change [66], follower's self-esteem [53, 56], followers' intentions to support group goals [67], followers' job satisfaction, lowering burnout and lessening loneliness at work [54, 61, 68]. However, leadership as a process of social influence and social interaction (i.e., leadership or followership) does not happen in social vacuum [69]; that is, both leadership and followership are embedded in a social context [52, 70, 71]. Thus, to understand social work leadership effects, it is necessary to understand the social context in which they occur and how social work leadership behaviour is executed within the respective social contexts [52].

3. The role of social context

Social context affects how social work leaders are perceived. Research has highlighted the importance of understanding leadership as a within- and

Aspects of social work leadership	Review summary
Leadership definition	Complex, multicontextual phenomenon.
Existing theories	No single theory adequately explains social work leadership.
Group norms	Code of ethics, social work principles and values play an important role in how leaders exercise influence on followers and in their willingness to engage in cooperative behaviour.
Aim of social work leadership	Attain cooperation from social workers, associations and stakeholders.
Proposed approach to social work leadership	Understanding social work leadership through the relational models theory [75–77] and identity leadership approach [20, 21].

Note. Summarised analysis of social work leadership literature. Own work.

Table 1.
Provides a concise summary of key concepts in social work leadership.

between-group process, which requires understanding the social context [24, 72, 73]. Bligh [74] emphasised the importance of understanding the social context in the development and application of leadership theory. Leadership is basically a contextual phenomenon, that is constantly developing and changing, and should be applied within a specific situation [74]. Social context can also be conceptualised as the relationship between leaders and followers (i.e., identity leadership; [73]). In this chapter, social context is conceptualised from the perspective of the relational models theory [75–77]. According to Fiske's relational model theory ([75], p. 689), social interaction is defined "[…] as a process of seeking, making, sustaining, repairing, adjusting, judging, construing and sanctioning relationships". It postulates that people are oriented to relationships such that people generally want to relate to each other, feel committed to the basic types of relationships, regard themselves as obligated to abide by them and impose them on other people (including third parties) (**Table 1**).

4. Relational models theory

The basic assumption of the relational model theory is that individual behaviour assumes social meaning only in the context of relations [75, 77, 78]. According to Fiske [75], the most basic characteristic of human beings is sociality, which implies that humans generally cognise and organise their social life in terms of their relations with other people. Relational model theory also assumes that people observe behaviours of themselves and others during the process of social interaction from which they make conclusions about the kind of social relations they are operating from [75–77].

It further assumes that, across all cultures, social relations are structured into four relational models. The combination of these models shapes people's sense of their self (who they are) and provides structural norms and motives of relationships with others, social roles, groups and institutions [75–77]. It also urges that just "as children are biologically programmed to learn language, people are prepared to recognize and be guided by the models, which enable them to anticipate and interpret the behavior of others, coordinate social action, and make moral judgments" ([77], p. 285). Relational models theory suggests that people are generally motivated to generate, regulate and maintain relationships [75–77]. The regulation of relationships involves observing norms that govern the nature of a relationship and ensuring that they are respected and abided by all

the members in a relationship. It also involves pronouncing what members within a relationship ought to do which refers to "obligations" and what they should never do which refers to "taboos" [75–77]. This regulation is vital because violation of those norms may lead to individuals within a relationship changing or even rejecting relationships [75–77].

Relational models theory distinguished four elementary relationships [75–77] as referred to communal sharing, authority ranking, equality matching and marker pricing. However, this review focuses only on the communal sharing and authority ranking relationships (**Table 2**) [24, 25].

Communal sharing (CA) relationship is defined by a sense of oneness and unity, social identity and collectivism, solidarity and loyalty [75–77]. Members of this relationship typically feel that they share something in common, such as blood, deep attraction, national identity, a history of suffering or the joy of food. Examples include nationalism, racism and intense romantic love. In a communal sharing relationship, caring for others is a core obligation, while individualism is its core taboo [75–77]. It has strong similarities with the experience of strong group identification, which is one of the predictors of cooperative behaviour.

Aspects of relational models theory	Descriptive summary
Basic assumptions	• Individual behaviour has social meaning within the context of relations.
	• People cognise and organise their social life based on relations.
	• People observe the behaviours of others and make conclusions about social relations through social interaction
Four relational models	• Communal sharing (CA), authority ranking (AR), equality matching (EM) and market pricing (MP).
	• People often use a combination of the four models to coordinate interactions.
	• One model often significantly defines a given relationship
	• This review only focuses on communal sharing and authority ranking relationships.
Characteristics of communal sharing relationship	
Characteristic	**Description**
Social identity and collectivism	Strong sense of unity, solidarity and loyalty.
Shared norms and values	Commonalities such as profession, nationality, blood relations, romantic love, etc.
Core obligation	Caring for others and unity.
Characteristics of authority ranking relationship	
Characteristic	**Description**
Hierarchy and power dynamics	Higher and lower rankings, power and control.
Mutual acceptance of power differences	Those with high status have decision-making authority.
Core obligation	Mutual respect.

Note. Summarised literature analysis of relational models theory [75–77]. Own work.

Table 2.
A summary of key concepts in the relational models theory.

In most organisations, leadership increasingly looks less like a hierarchy or authority [79]. Instead, it is better understood as a system of influence relationships in which multiple people participate [79]. Research has documented that followers who strongly identify with their organisation or team are more likely to view others within the organisation as a source of leadership (identity prototypicality). The results also indicated that the presence of relationships beyond hierarchal relationships within an organisation is likely to shape leader-follower relationship to a more plural form of leadership which is called shared social identity approach to leadership [79]. This means if employees of the organisation feel that they share something in common with the organisation or the team they work within, they are more likely to be influenced by their leaders and consequently see others across their organisation as sources of direction, alignment and commitment [79].

Authority ranking (AR) relationship is a hierarchy in which individuals or groups are placed in relatively higher or lower positions [75–77]. Those ranked higher have status and privilege not enjoyed by those who are ranked lower. Further, the higher ranked typically have some control over the actions of those who are ranked lower. This relationship is characterised by the mutual acceptance of power differences, which implies that the power to make decisions lies with those of high status and those of low status should be submissive (see also [80]). However, the higher ranked also have duties of protection and pastoral care for those beneath them. Examples include military rankings, the authority of parents over their children especially in more traditional societies and God's authority over humankind. In this relationship, mutual respect is a core obligation, and disrespect of a hierarchy is a taboo [80]. Physical abuse, use of force and manipulation are not considered to be authority ranking but as toxic relationship [81]. The latter is more properly categorised as null relation in which people treat each other in non-social ways [76, 77] see also [75, 81].

This relationship is associated with a leader-follower interaction where power, authority, responsibility and respect are of equal importance for both the leader and the followers [80]. Research has shown that a leader who advocates, promotes and champions the interests of the ingroup is supported and endorsed [72]. For instance, leaders should be role models and guide followers partly based on power and status. This notion of the leader's need for credibility as a role model is based on an AR relationship with the followers. In this kind of relationship, the followers need to understand that the leader always acts within their best interest and holds legitimate power to guide followers and to define appropriate behaviours in each situation [82].

In an AR relationship, a system justifies leaders to have more resources, for example, bigger offices and higher salaries based on the hierarchical position [82]. In return, AR leaders assume greater responsibilities in terms of guidance and protection of followers, for example, by setting a vision, providing followers with resources according to rank, establishing a clear hierarchy structure and/or maintaining a social order that is accountable for everyone [82]. In short, the guiding fairness principle of the AR elementary relationship comprises equity between power and responsibility on the one side, and rewards, on the other [82].

Furthermore, people hardly use one elementary relationship in any given situation [82]. Naturally, people use a combination of the four elementary relationships to coordinate their interactions. For example, "colleagues may share a printer freely with each other (CS), work on a project in which one of them is the expert who takes the lead (AR), divide the office space equally (EM), and sell each other working hours for an agreed amount of money (MP)" ([82], p. 47). Nevertheless, while the elementary relationships can be combined in different ways, there is often a primary

elementary relationship that significantly defines a given relationship, allowing other relationships to sustain the primary elementary relationship [76, 77] see also [75, 82]. However, this chapter focuses on communal sharing and authority ranking relationships by providing an analysis on the kind of social work leaders and behaviours required to elicit and maintain cooperative behaviour.

A recent review on social work leadership has shown that leadership is an interlinking, multicontextual phenomenon. Despite the abundance of literature on leadership, no theory or approach has been able to provide a satisfactory explanation of leadership in the social work sector [4, 83]. We have proposed that social work leadership be understood within the context of the relational models theory and as a group process (i.e., identity leadership; [20, 21]) in order for social work leaders to attain cooperation from social workers, associations and different stakeholders.

5. Identity leadership approach

The identity leadership approach is based on the premise that leadership processes are embedded in a context of shared group membership where leaders, as group members, influence followers, as group members, to act on behalf of the group [20, 23]. It is further based on the premise that leadership can be conceptualised from both intra- and intergroup perspectives [20, 23, 72]. Moreover, the identity leadership approach states that, for leaders to be influential, they need to exercise influence on followers through social identity processes that can be described as four dimensional ([20]; see also [84]). The first dimension refers to what a leader should be, namely, being prototypical of the ingroup [20]. The other three dimensions refer to what a leader should do, namely, to advance ingroup needs (identity advancement), create an identity (identity entrepreneurship) and build living structures that are visible not only to the ingroup but also to the outgroup members (identity impresarioship; **Table 3** [20]).

Different from other leadership approaches, the identity approach to leadership defines a leader as someone who is a member of the ingroup, someone who bears the title of being a leader and someone whose responsibility is to exemplify, advocate, embrace and promote rationality and thinking pattern of the ingroup [20, 85]. This approach is based on the social identity theory [20, 86] and self-categorisation theory [87]. More specifically, it is based on the following three theoretical concepts: self-categorisation, social identity and social comparison.

Self-categorisation refers to the assumption that people categorise themselves and others into social groups [86, 87]. The self-categorisation theory explains group processes and the processes involved in how people evaluate and categorise themselves into me, us and them [88]. This process is characterised by how people think of themselves and how they compare themselves to others during social interaction. More specifically, it is proposed that people tend to group the self as identical or similar to others (i.e., ingroup) while differentiating the self in contrast to others (i.e., outgroup). Moreover, self-categorisation exists at different levels of abstraction based on the principle of class inclusion ([88], p. 241). The latter means that categories differ in their level of inclusion and abstraction. For instance, dogs and cats are members of the category of animals, while animals and plants are members of the category of life. Three levels of abstraction are distinguished [88]: the first level is self-categorisation as a human being, which is based on the differentiation between humans and animals. The second level is self-categorisation as a member of social categories, which is based on the differentiation between groups of people with regard to defined characteristics

(e.g., class, race, nationality, occupation). The third level is self-categorisation as a unique human being which is based on the differentiation between oneself as a unique individual with unique attributes and other individuals. Self-categorisation on a group level creates a social identity for individuals, which they internalise as an important aspect of themselves and which allows them to understand their social environment [86, 87].

Social identification refers to the extent to which people identify with a particular social group that determines their inclination to behave in terms of their group membership [89]. More specifically, social identification is when people behave according to what they think is valued by and normative for the group [90]. People conform to group norms which means that people behave the way others (i.e., members of the "ingroup" or "outgroup") expect them to behave whether they agree with these norms or not [90]. Moreover, social identity is defined as that part of an individual's self-concept which derives from his knowledge of his membership in a social group (or groups) together with the value and emotional significance attached to that membership ([89], p. 63). Based on this definition, research has shown that three components contribute to one's social identity, namely, a cognitive component (i.e., cognitive awareness of one's membership in a social group (self-categorisation)), an evaluative component (i.e., a positive or negative value connotation attached to this group membership (group self-esteem) and an emotional component (i.e., a sense of emotional involvement with the group, i.e., affective commitment; Ellemers et al., [91]). Research has also shown that affective commitment to the group (i.e., emotional component) is the main aspect of social identity that affects people's tendency to behave in terms of their group membership [91]. As people tend to group the self as similar to ingroup members while differentiating the self in contrast to others ([86]; see also [88]), they may also in some situations go along with the ingroup as they fear to appear as disrespectful or as they feel embarrassed to stand out as disparate or opposed to the ingroup ([76], p. 76). This may be because of social identification or the desire to belong ([76]; see also [86, 90]). Self-categorisation theory describes this process as deindividualisation. Consequently, shared social identity makes people willingly conform to group norms. It is during this process that group members develop a desire for positive distinctiveness [86].

Aspects of social work leadership	Review summary
Identity leadership	Leaders are group members who influence followers to act on behalf of the group.
Four psychological dimensions (i.e., strategies)	Identity prototypicality, identity advancement, identity entrepreneurship, identity impresariohip.
Proposed approach to social work leadership	Understanding social work leadership through the relational models theory [75–77] and identity leadership [20, 21].
Group norms	Code of ethics, social work principles and values play an important role on how leaders exercise influence on followers and on their willingness to engage in cooperative behaviour.
Ultimate social work leadership goal	Attain cooperation from social workers, associations and stakeholders.

Note. Review analysis of relational social work leadership. Own work.

Table 3.
Summary of key concepts in the proposed relational social work identity leadership approach.

Social comparison is the process by which group members determine the relative social standing of a particular group and its members, and devise strategies to achieve and or maintain positive distinctiveness [86]. It is a process whereby group members compare the ingroup favourably relative to other groups on specific comparison dimensions to achieve positive distinctiveness. Positive distinctiveness assumes that people are cognitively motivated to achieve positive self-esteem (i.e., they strive for a positive self-concept; [86]). People may differ on how they achieve positive distinctness depending on the nature of social identity and informed by the interpersonal-intergroup continuum as they strive to achieve or maintain positive social identity [86].

Self-categorisation, social identity and social comparison processes inform the four dimensions of identity leadership, namely, identity prototypicality, identity advancement, identity entrepreneurship and identity impresarioship [20]. The first psychological dimension refers to what a leader should be namely being prototypical of the ingroup ([20]; see also [84]). Both social identity theory and self-categorisation theory [87, 92] describe how group members cognitively represent the ingroup and members as prototypes. A prototype is a distinctive set of characteristics, attributes, values, norms and goals that define what the ingroup stands for and what differentiates the ingroup from the respective outgroup. For example, when members of a department of social work compare themselves with members of the department of psychology, they may view themselves as doing applied, practically relevant research. When comparing themselves with a graduate school of business, they may view themselves as academics who research to understand real-life issues. In the first scenario, the researcher who does the most "applied" research may be perceived as the most prototypical group member, whereas in the second scenario, the researcher who does most research on real-life issues may be perceived as the most prototypical group member. A group member is perceived as prototypical when she or he is most similar to the ingroup while at the same time most distinct from the outgroup. Research has shown that prototypical ingroup members are perceived as more influential and are more supported by the members of the ingroup ([23, 93]; see also [84]). They have also been found to positively influence group members' status as they embody the ideal group qualities, values, norms and attributes that define what the group is about different from outgroups [94]. More specifically, exemplifying what the group is about makes group members feel special as well as distinct from other groups ([50, 51]; see also [84]).

The identity leadership approach describes a prototypical leader as a group member who best represents the group's identity as his or her actions and decisions signal the group's opinion [84]. For example, in a group that advocates for a professional women's soccer league, the leader who is a woman playing soccer, with very good soccer skills and willing to compete at a professional level, is more likely to be perceived as prototypical than a woman leader who might like the game but never played it. Research has demonstrated that prototypical leaders are regarded as more effective, especially if followers identify with the group [95–97]. Leaders, who are perceived by followers as highly prototypical, may even substitute limitations of their leadership, such as acting unfairly. For instance, Ullrich et al. [85] showed that leaders' prototypicality can act as a substitute for procedural unfairness. Even though procedural fairness, in general, has been found to have a positive influence on leader endorsement, it was found that when a prototypical leader transgressed by practicing what was regarded as highly unfair by the ingroup, followers no longer emphasised the importance of fairness in that regard [85]. These results suggest that leaders who exemplify, advocate, embrace and promote a rationality and thinking

pattern that they share with their followers can continue to have their support even if they have broken some of the ingroup norms [85].

The other three dimensions refer to what a leader should do, namely, to create an identity (identity entrepreneurship), advance ingroup needs (identity advancement) and build living structures that are visible not only to the ingroup but also to the outgroup members (identity impresarioship, [20]). Identity entrepreneurship is about creating an identity for the ingroup as it is defined as the process of encouraging members of the ingroup to have a sense of oneness by minimising individual mobility. Individual mobility is one of the strategies group members can adopt to disassociate from the group and peruse individual goals designed to improve their personal self rather than that of the ingroup. Social identity theory specifies different strategies that may be invoked as group members strive to achieve positive distinctiveness [86]. In this instance, the individual choice of behaviour is deeply motivated by the perceived intergroup relations (e.g., individuals may perceive their group as less successful when compared to the outgroup). The choice of social mobility depends on the perceived legitimacy and stability of the intergroup relations (i.e., insecure intergroup relations) on the perceived permeability of group boundaries. Thus, identity entrepreneurship refers to the psychological dimension where leaders are expected to create a sense of oneness within a group and ensure a unified and positively distinct social identity (i.e., a sense of "we" or "us"). The latter can be achieved by making ingroup members feel that they are part of the same group, defining what the group stands for and its core values and norms and what the group does not stand for [20]. For example, in a team that aims at playing in a professional women's soccer league, the team leader should not only be a woman but somebody who can communicate the vision of the group by encouraging group members to play as a team, by making them believe in themselves, by uttering statements such as women are strong, full of perseverance and winners. Thus, identity entrepreneurship is based on the actions of the leader and on what the leader says about the group (within the ingroup and to the outgroup). The effectiveness of the leader in clarifying what the group is about is considered important because it ensures that individual group members are not only motivated to categorise themselves as belonging to the group but also identify with the group and adopt group norms, goals and interests [86, 87]. Research has shown that unless followers have a sense that they are part of a common ingroup, leaders' efforts to try to mobilise their collective energies are likely to fail [98].

The psychological dimension of identity advancement is about advancing ingroup needs. It is based on the assumptions that group members may seek positive distinctiveness and require positive differentiation through direct competition with the outgroup in the form of, for instance, social competition [86]. Social competition is a group-level strategy outlined in the social identity theory that requires group members to draw together and combine forces to help each other to maintain or improve social status, which might be in the form of joint performance or outcomes [86, 87]. More specifically, social competition is when people accept, either implicitly or explicitly, a belief or set of values and norms that lead to behaviour that is in junction with those values and norms of social comparisons that seek to confirm or to establish ingroup-favouring evaluative distinctiveness between the ingroup and outgroup, motivated by an underlying need for self-esteem ([99] as cited by [90]). In contrast, direct competition with the outgroup occurs if intergroup differences are perceived as illegitimate and/or changeable [86]. Thus, identity advancement is defined as a state where the leader should be seen promoting the shared interests of the ingroup and ensuring that the goals, ambitions and interests of the ingroup are successful

and protected regardless of the circumstances. It is through identity advancement that leaders overcome failures by devising strategies for success while promoting the interests of the ingroup. It is where the leader is seen to be acting in ways that serve the ingroup, rather than personal interests or those of other outgroups [20]. For example, in a team that advocates for professional women's soccer league, the team leader should not only be a woman and be able to articulate the vision of the group but should also come up with tactics and strategies that improve the teams' soccer skills, or that attract sponsors. Research has shown that endorsement of a leader depends on leadership strategies that followers perceive as promoting the ingroup interest and advancing the group identity [72]. For instance, Gliebs and Haslam [72] suggested that there is significant support for a leader who advocates strategies of intergroup competition as an interactive function of the status of the ingroup. Likewise, Haslam et al. [20] proposed that leaders have more influence the more followers perceive an overlap between the group's interests and the leader's behaviour. Additionally, the leader who is seen as promoting and advancing the ingroup's interests is more likely to influence the followers ([72]; see also [20]).

Lastly, the psychological dimension of identity impresarioship is defined as a state where leaders should be seen as creating ingroup-related material and delivering concrete outcomes for the group such as establishing structures, implementing practices, formalising rituals and organising events and programs that benefit the group [20]. It is about endorsing structures that enable and entrench shared understanding, coordination and success of the ingroup. It is also about shutting down structures that divide or undermine the ingroup and promoting structures that make the ingroup matter even to outgroup members [50, 51]. For example, in a team that advocates for a professional women's soccer league, the leader should not only be a woman, able to articulate the vision of the group, develop winning tactics and source sponsors, but she should also ensure that the team has, for instance, a playground to practice on, resources (i.e., soccer jersey, good medical team and rehydrates) in all matches and that they huddle at the beginning of each match. Through identity impresarioship, the leaders' influence is based on both actions and results. Here, the followers expect the leader to produce tangible results that can show outgroups what the ingroup is about (**Table 4**).

According to the identity leadership approach, leaders use all four psychological dimensions to influence and motivate followers to engage in cooperative behaviour [20]. For instance, apart from being prototypical of the ingroup, a leader needs to convey his or her vision for the group and how he or she can help the group to work

Four psychological dimensions (i.e., leadership strategies)	Descriptive summary
Identity prototypicality	Leaders are prototypical when they embody the ideal group qualities, ethics, principles and values.
Identity advancement	Leaders promote the shared interests of the ingroup and protect its goals.
Identity entrepreneurship	Leaders create a sense of oneness within the group and minimise individual mobility.
Identity impresarioship	Leaders create and deliver concrete outcomes and structures that benefit the group.

Note. Review analysis of the identity leadership approach. Own work.

Table 4.
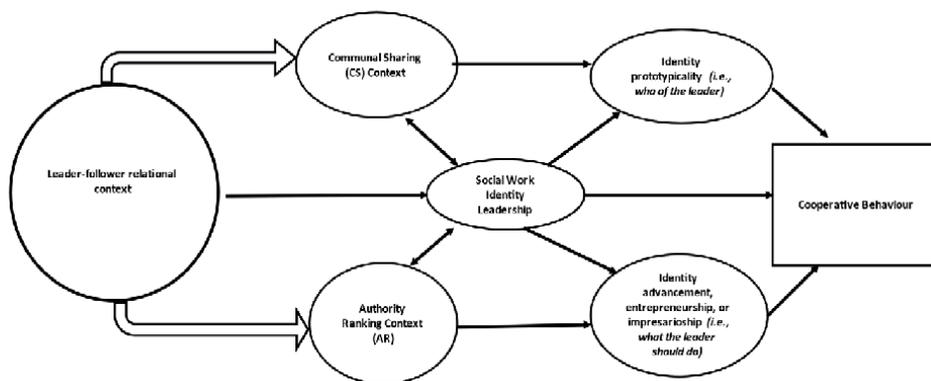*Summary of key concepts in the identity leadership approach.*

Figure 1.
Relational social work identity leadership model (own work).

towards this vision. The leader is also expected to establish structures and mechanisms that can help the group to make it possible for them to achieve their goals and interests. When followers feel that they share something in common with the leader, the ingroup is more likely to be influenced by this leader and thus see the leaders and members of the ingroup as sources of direction, alignment and commitment [79]. This means irrespective of which strategy leaders apply, the main influence of leaders on followers is through shared group norms.

Group norms for social workers mean a code of ethics, social work principles and social work values [83, 100, 101]. In a recent systematic review of social work leadership, Peters ([83], p. 102) concluded that the identity and function of social work leaders portray the example of leaders in whatever you do. (i.e., setting an example), gain acceptability by acting in a way that encourages followers to acknowledge the role of the leader (i.e., gaining acceptance), finding a path forward, expressing a clear direction, (i.e., giving direction), naming new objectives, services and structures (i.e., giving direction), having well-thought-out concepts that inspire others (i.e., offering inspiration) and utilising teams as the most efficient form of leadership by investing time in creating and fostering cooperation (i.e., building team; [100]). These correspond well with the four psychological dimensions [20, 21] of the social identity approach to leadership which states that, for leaders to be influential on followers, they need to be prototypical of the ingroup (i.e., set an example and be acceptable), advance the identity of the ingroup needs (i.e., inspirational), entrepreneur and create identity (i.e., give direction) and to be impresarios by building lived structures that are visible not only to the ingroup but also to the outgroup members (i.e., building team). Hence, in order to comprehend the influence of social work leaders on followers (i.e., social workers), it is important to understand the nature of the relationship already in place between leaders and followers, as well as how this relationship or context affects the leader identity or functions on follower's willingness to engage in cooperative behaviour (**Figure 1**).

6. Discussion

Identity leadership assumes that leadership processes and strategies are based on the context of shared group membership ([20, 22, 102], see also [23]). Group membership

is informed through a psychological process as conceptualised by the self-categorisation theory [87] and social identity theory [86]. Self-categorisation theory proposes that people categorise themselves and others into social groups [86, 87]. These social categories provide individuals with social identity [86, 87]. Social identity is what makes people (group members) prone to social influence because group members share the same values and norms ([103]; see also [104]). Identity leadership refers to a leader as someone who exemplifies, advocates, embraces and promotes a rationality and thinking pattern of the ingroup ([20, 102], see also [22, 23]). More specifically, identity leadership assumes that the leader's effectiveness lies on the leader being perceived as prototypical of the ingroup and being viewed as "one of us" [21, 105]. Leader prototypicality refers to the extent to which a leader exemplifies ingroup characteristics [21, 22, 84, 105]. Prototypical leaders are perceived to be more effective in influencing ingroup's attitudes [106], behaviours [23] and performance [107] by being charismatic [23]. Leader prototypicality is one of the four psychological dimensions of identity leadership, and it is regarded as an integral part of identity leadership (i.e., strong ingroup leadership; [21, 22, 105, 108]).

Prototypical leaders are perceived as representing the group's characteristics in terms of the ingroup's goals, values and norms to a greater extent when compared to other ingroup members [21, 22, 105]. A prototypical leader's attitude and behaviour influence ingroup members' perceptions and create ingroup identity by making group-based categories more relevant to group members [21, 22]. The way group norms are defined within a group determines the types of actions that are appropriate and are to be performed by the leader and group members. These actions are reliable and gain collective support to the extent that they are seen to reflect the group norms [21, 22, 105]. Prototypical leaders are skilled in advancing the identity of the ingroup as they seek to direct and reflect the norms and standards of the ingroup through group activities [20, 23].

Prototypical leaders do not just facilitate collaboration, but they carefully determine how ingroup members collaborate and what they collaborate on [22, 23, 109]. These leaders not only focus on the members of the ingroup but also lead the ingroup to cooperate or compete with other groups [22, 109]. This gives prototypical leaders more influence over the ingroup members as compared to non-prototypical leaders [110]. Hence, we assume that leader prototypicality plays a role in influencing and shaping group cooperative behaviour. Furthermore, we assume that the relational model (i.e., communal sharing or authority ranking) which dominates the leader-follower relationship influences whether who or what of a leader makes him/her influential on followers to engage in cooperative behaviour. More specifically, we prognosticate that when the communal sharing model is regarded as the dominant elementary relationship between leader and followers, identity prototypicality might be more important compared to identity advancement, identity entrepreneurship or identity impresarioship for a leader to be influential on followers. Thus, identity leadership proposes that leaders use all four psychological dimensions to influence and motivate followers [20]. For instance, apart from being prototypical of the ingroup, a leader needs to convey his or her vision for the group and how he or she can help the group to work towards this vision. The leader is also expected to establish structures and mechanisms that can help the group to make it possible for them to achieve their goals and interests. When followers feel that they share something in common with the leader, the ingroup is more likely to be influenced by this leader and thus see the leaders and members of the ingroup as sources of direction, alignment and commitment [79]. This means irrespective of which strategy leaders apply, the main

influence of leaders on followers is through shared group norms. Hence, this analysis assumes that leaders who use all four psychological dimensions of identity leadership to influence and motivate followers might play a role in influencing and shaping the group cooperative behaviour. Furthermore, this analysis assumes that when authority ranking is regarded as the dominant elementary relationship between the leader and followers, identity advancement, identity entrepreneurship and identity impresario-ship might be more important for a leader to be influential on followers than identity prototypicality. However, the conflict between group members' identity and group norms may elicit social re-categorisation processes (i.e., stereotypic perceptions of dissimilar others, group within a group (i.e., subgroup) formations and intergroup biases) that may interrupt the group functioning, negatively affect ingroup identification and ultimately may affect cooperative group behaviour [111, 112]. The conflict between ingroup identification and group norms may lead to differences between group members' identities, attributes and group norms. Finally, this analysis assumes that leaders' violation of norms and core obligations of the dominant leader-follower relationship decreases his/her influence on followers. More specifically, leaders' violation of norms, as well as core obligations within the communal sharing and the authority ranking model, will result in the decrease of the leaders' influence on fol-lowers and decrease follower's willingness to engage in the cooperative behaviour.

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Chapter 14

Social Policy Practice for Social Workers

Ahmed Elebshehe

Abstract

This chapter addresses the mutual influence between social work and social policy, presents the concept of social policy practice (SPP) among social workers and its associated concepts, and explains its importance in achieving the mission and goals of the profession, especially social justice. The chapter focuses on how social workers practice social policy, levels of practice, and the role of social workers in the stages of the social policy-making process. It also focuses on the knowledge and skills necessary to policy practice. In addition to how to measure social policy practice for social workers as a fundamental pillar in efforts to improve it, the chapter presents tools for measuring social policy practice for social workers as the first Arab attempts in this field.

Keywords: social policy, social policy making, social work, policy practice, social justice, social action, policy analysis, advocacy

1. Introduction

Social policy plays a critical role in shaping the social, economic, and political landscape of a society, influencing the well-being and quality of life of its citizens. By addressing social problems and promoting social justice, equity, and inclusion, social policy contributes to building a more just and compassionate society.

Policy practice is an essential component of social work that allows social workers to address systemic issues, advocate for social change, and advance the well-being of individuals, families, and communities. Social workers engage in policy practice across different levels to address social issues and promote social justice. Policy practice for social workers involves the application of social work principles and values to influence and shape policies at various levels (e.g., local, state, national) that affect individuals, families, communities, and society as a whole.

Overall, social workers should engage in social policy practice to advocate for vulnerable populations, address structural inequities, create change at multiple levels, empower communities, ensure ethical practice, promote social justice and equity, and respond to changing social needs. By engaging in policy practice, social workers contribute to building a more just, inclusive, and compassionate society for all. To do this, social workers must be prepared and equipped with the knowledge and skills necessary to engage effectively in the practice of social policy at all levels.

Measuring the reality of social workers' policy practice is essential and a fundamental pillar in efforts to improve policy practice, as through it the strengths and weaknesses of this practice and the requirements for its improvement can be identified.

2. The mutual influence between social work and social policy

There is no universally agreed definition of social policy, as the concept varies depending on the ideology of society. Social policy can be defined as any formal government legislation that affects people's well-being, including laws, regulations, executive orders, and court decisions. A broad view of social policy recognizes that corporations and nonprofit and for-profit social service agencies also develop policies that affect clients and those they serve, and thus have social impacts ([1], p. 61).

Social policy plays a prominent role and effective contribution to establishing and directing social care and welfare in society [2]. It deals with social issues and focuses on social welfare and provides a mechanism for specific programs to enrich the human condition. Social policy is a broad construct that goes far beyond programs and services provided to the poor and disadvantaged. As a result, social policies are present in every aspect of public and private social services, society, and at every stage of daily human experience. All people, regardless of their age, race, ethnicity or gender identity, are directly affected by social policies [3]. So, it influences society and human behavior, and the social work profession has long recognized their importance to social work practice ([1], p. 61).

Social work is one of the professions most working in the fields of social care, and it cooperates with other professions. Social work is "a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing" [4]. The social work profession is a practice-based profession that promotes social justice and advocacy for marginalized individuals [3].

Social policy impacts all aspects of social work practice ([5], p. 5; [6], p. 10). Hence, the effectiveness of social work practice depends on social workers' understanding of these policies and their ability to implement them. On the other hand, the effectiveness of social policy in society is critically linked to the effectiveness of social work practice, as it may support or change these policies through participation in the process of making them ([2], p. 56).

3. Social policy making

Policy making is the process through which policies are created and implemented in order to meet specific needs ([7], p. 169). Making social welfare policies may mean new welfare policies or other alternative policies, through successive stages and processes that always begin with precise definition, up to defining goals and objectives, then formulating, programming, implementing, assessing, and evaluating this policy. It is a continuous, dynamic process that includes interconnected stages and steps ([2], p. 214).

The term policy process is used to describe the ways in which policies are developed, implemented, and evaluated ([8], p. 198). Social welfare policy making is an ongoing, dynamic process that includes interconnected stages and steps ([2], p. 214). There are many viewpoints in defining these stages, including:

Gilbert and Specht ([9], p. 17) identified the stages of social welfare policy making into eight stages: identification of problem, analysis, informing the public, establishing policy goals, building public support and legitimacy, program design, implementation, and evaluation and assessment. Al-Sarouji ([2], pp. 220–221) identified it in seven stages: identifying and analyzing societal issues, defining the objectives of social care policy, formulating the policy and comparing alternatives for decision-making, translating the policy into programs and projects, implementing care policies and distributing tasks and responsibilities, assessing and evaluating the policy, and its expected effects and estimating and thinking about preparing a new care policy. DiNitto and Johnson ([10], p. 15) identified it in five stages: identifying policy problems, formulating policy proposals, legitimizing the policy, implementing the policy, and evaluating the policy. Karger and Stoesz ([5], p. 172) identified it in four stages: formulation, legislation, implementation, and evaluation. Bochel ([8], p. 176) identified it in three stages: policy formulation, policy implementation, and evaluation. Hamza ([11], pp. 108–110) also defined it in three stages: policy development, policy implementation, and policy evaluation.

It is clear from the above that there is a discrepancy in the stages of policy making between detailing and merging, and confusion between stages and steps in some previous viewpoints on the one hand ([2], p. 215). On the other hand, the majority of viewpoints agreed that there are three basic stages of policy making: policy development, policy implementation, and policy evaluation. Here is a brief overview of each stage:

The policy development stage: It is the first and most dynamic stage of making social welfare policies, where problems are analyzed, needs are identified and studied, policy alternatives are identified and the best one is chosen in light of the community's resources and capabilities, and in which governmental and popular forces interact in order to arrive at a policy that expresses the society's goals. After it is enacted by the competent authorities, it becomes a guide to the paths and directions of work in the field of social care ([11], p. 108).

Policy implementation stage: In this stage, work is done to develop social care policies within the scope of practice ([11], p. 109). Policy implementation includes all activities designed to carry out the intent of the law: establishing, organizing, and employing institutions to implement the new policy, or assigning new responsibilities to existing institutions and employees; issuing directives, rules, regulations and guidelines to translate policies into specific courses of action; direct and coordinate both staff and expenditures toward achieving policy objectives; and monitor activities used to implement the policy ([10], p. 43). Representatives from different levels of government, and from different sectors, public, private and not-for-profit, may be involved in policy implementation ([8], p. 197).

Policy evaluation stage: This is often viewed as the final stage of the policy process when the success or lack of a policy is evaluated. Besides monitoring during the implementation of a policy or program, evaluation is generally viewed as an integral part of the policy process that may lead to changes in existing policies or to the development of new policies ([8], p. 198). This stage requires an evaluation of the policy's impact, an evaluation of how the policy addresses the problem, and how programs implement the policy ([9], p. 20). Policy evaluation is done formally and informally by government institutions, external advisors, interest groups, the media, and the public ([10], p. 15).

4. Concept of social policy practice

There are several concepts used to describe policy-related social work: policy practice, policy advocacy, political advocacy, class advocacy, system advocacy, legislative advocacy, reform through litigation, policy analysis, political social work, social action, community organizing, and community development ([12], p. 4).

Despite the close connection and overlap between the concept of policy practice and these concepts, there are differences between them. Policy practice is broader and more comprehensive than advocacy of all types ([12], p. 4; [13], p. 8; [14], p. 8). Also, policy practice is broader and more comprehensive than policy analysis, as policy analysis is a task or one of its activities ([13]; [15], p. 6; [16], p. 8).

Although the term political social work is most closely related to policy practice, it focuses more on the macro level only, while policy practice is an integrated approach to practice applied at all levels of practice and in all institutions ([12], p. 3). Despite the close connection between policy practice and community social work, as there is a degree of overlap between them in the declared goals, basic values, and vision, there are differences between them. While policy practice sets out to change social policy or contribute to policy formulation as its ultimate goal, community social work tends to regard community building or strengthening the organization of individuals as its goal, and seeks to develop the capacities of local communities and groups, solidarity, and strengthen social capital as goals in themselves ([14], p. 6). Policy practice often makes use of community social work, especially when working at the grassroots level ([12], p. 5).

Reform through litigation is a form of social policy practice [17], as well as social action [17–19]. Policy practice differs from the concept of political participation, as political participation includes many activities carried out by individuals (including social workers) to influence their political environment as citizens of a political system. In contrast, policy practice is those activities (including political participation activities) that social workers undertake as part of their professional activities and are directly related to the well-being of their clients through influencing social policy ([14], pp. 5–6).

The term policy practice is generally used to describe the role of social workers in the social policy arena ([20], p. 3). Yelaja is considered one of the first scholars to use the term social policy practice, as in 1975 he presented a conceptual model for teaching and practicing social policy at the macro and micro levels. Also, Jansson first used the term policy practice in 1984 in his book on the theory and practice of social welfare policy, when searching for a term to describe the action or practice component of social welfare policy. He defined it in Ref. [21] as "the use of conceptual work, interventions, and value articulation to develop, enact, implement, and evaluate policies" (p. 24). He redefined it in Ref. [22] as "efforts to change policies in legislative environments, institutions, and communities, whether by establishing new policies, improving existing ones, or defeating the policy initiatives of others" (p. 10). Since that time, definitions of policy practice have varied, including:

Rocha [12] defined it as "an approach to change that uses advocacy methods and community-based practices to change programs and policies at multiple systems levels, targeting communities, local governments, state and federal governments, foundations, large government agencies, and courts" (p. 1). Cummins et al. [13] defined it as "using social work skills to propose and change policies in order to achieve the goal of social and economic justice" (p. 2). Gal and Weiss-Gal [14] defined it as "activities, undertaken by social workers as an integral part of their professional

activity in various fields and types of practice, that focus on the formulation and implementation of new policies, as well as on existing policies and suggested changes in them. These activities seek to further policies on the organizational, local, national, and international levels that are in accord with social work values" (pp. 4–5). Barker defined it in social work [23] as "professional efforts to influence the development, enactment, implementation, modification, or assessment of social policies, primarily to ensure social justice and equal access to basic social goods" (p. 326).

It is clear from the previous definitions that social policy practice is an essential part of the professional activity of all social workers in various institutions and at all levels, and is fundamentally linked to influencing the social care policy of clients, to achieve social and economic justice, and to advance social and economic well-being in general, in a way that contributes to achieving the goals of the profession. Within the framework of its values and ethics and in accordance with the cultural and legal framework of society.

5. How social workers engage in social policy practice

Policy practice includes various tasks and activities. Yelaja [24] identified the activities of practicing social policy at two levels: the micro level, which includes activities of identifying social needs, analyzing the impact of the policy, evaluating its achievement of its goals, and determining corrective actions. The macro level includes policy formulation and development activities. He defined the roles of the social policy practitioner along a series of five roles: (1) social policy analyst, (2) social policy evaluator, (3) social policy advisor, (4) social policy developer, and (5) social policy advocate.

Wyers [25] identified five models of policy practice found in the literature at the time: (1) the social worker as a policy expert, (2) the social worker as a change agent in external work environments, (3) the social worker as a change agent in internal work environments, (4) the social worker as a political conduit, and (5) the social worker as politics in its own right. Also from a review of the literature, Figueira-McDonough [17] identified four ways of doing politics: legislative advocacy, reform through litigation, social action, and social policy analysis.

Pierce [26] identified the tasks of political practice into two basic types: analysis and action. Policy analysis and writing use research and evaluation skills, and efforts to shape other systems' policy include guidance, influence, collaboration, testimony, lobbying, class advocacy, and monitoring. Policy practitioners can engage in a wide variety of direct policy-making activities such as policy-related self-evaluation, policy implementation, change where possible, and act as formal policy makers. Pierce emphasized that activities related to the practice of politics are not carried out in isolation or in isolation from each other. Moreover, analysis and action are not separate functions; as specialists think and write they take action on policy making at the same time. It is important that the various components of policy practice are interconnected in a coherent manner.

Stein [27] noted that the social worker as a policy practitioner seeks to improve the lives of clients by influencing the process by which policy is developed and implemented. Whether a social worker works alone or with others, the tasks that define this area of social work practice include: advocacy, setting the agenda, evaluating the feasibility of change, analyzing policies, testifying before policy makers, lobbying policy makers, and sometimes participating at public demonstrations to draw attention to an issue and evaluate the impact of a welfare policy on clients. Stein emphasized that

not all tasks necessarily play a role in any one job, and even if all the tasks of policy practice are performed, they are likely to be shared with other people on the basis of time, skills, interests, and expertise in the subject matter. Finally, the tasks that define policy practice are not always done in a linear manner.

Chapin ([7], pp. 185–186) identified the tasks of policy practice as: identifying target populations, examining perspective, obtaining an agenda, identifying policy options that include clients' perspectives, negotiating consensus on policy goals, assisting in policy development, and evaluate policy based on customer outcomes. Defined by Cummins et al. [13] identified policy practice activities in: Policy analysis, advocacy for change, coalition building, and campaigning. Jansson [28] identified eight tasks for doing politics: determining what is right and wrong, navigating policy systems and advocacy, setting agendas, analyzing problems, writing proposals, enacting policies, implementing policies, and evaluating policies. He also identified methods for policy practice: electoral advocacy, legislative advocacy, troubleshooting, and analytical models for policy advocacy. The different approaches are often combined in hybrid approaches where policy practitioners combine or move between these four different approaches.

The Council for Social Work Education [15, 16] has explained that for social workers to engage in policy practice they must do the following: Identify social policy at the local, state, and federal levels that impacts well-being, service delivery, and access to social services; assess how social welfare and economic policies affect the provision of and access to social services; and apply critical thinking to analyze, formulate, and advocate for policies that promote human rights and social, economic, and environmental justice.

Weiss-Gal [19] summarized the policy practice activities identified in the political activism literature for social workers into four categories: legislative advocacy, social action, research, analysis and documentation, and internal advocacy.

Pawar [18] presented a vision of a three-dimensional model of social policy practice for social workers. The model consists of: "personal being," "people," and "paper." The first dimension, personal being, includes specialists working with themselves with the aim of building their capabilities in terms of knowledge, skills, and qualities in order to strengthen their being. The second people dimension involves social workers working with people at four levels, namely the local community, large government institutions, politics, and organizations, with due regard to cultural contexts. A critical way to engage with people at the community level is to mobilize and organize people through awareness-raising processes for a specific goal or mission. Social workers also need to engage with people in government institutions and social policy makers, with the aim of issuing new legislation or amending existing legislation. Social workers also engage in policy practice at organizational levels, if some of its processes are unfair or inappropriate, with the aim of changing them. The third dimension refers mainly to the participation of social workers in policy practice through policy analysis. The ultimate purpose of policy analysis is to influence the people (the second dimension) who contribute to policy and program decision-making. Pawar emphasized the importance of teamwork by forming a team of practitioners who bring different sets of knowledge and skills to participate effectively in the practice of social policy.

In light of the above, it becomes clear that although there is agreement that the practice of politics is closely related to influencing social policy, there is no agreement on how social workers practice social policy. There are multiple points of view in determining how to practice policy. There is a point of view that defines specific roles

or models for the social worker as a policy practitioner [24, 25], the second point of view focuses on the policy-making process [28], and the third point of view defines specific tasks of policy practice [13, 17, 19, 26, 29], and the fourth perspective combines previous perspectives [15, 16].

Despite this diversity in defining the dimensions of policy practice, there is agreement among the majority of previous viewpoints that policy practice includes the following tasks: policy analysis, advocacy, social action, and policy evaluation. Social workers perform these tasks during the stages of the social policy-making process and use many tools such as launching campaigns, building coalitions, media, and research. Social workers focus more on campaigning, building coalitions, and using the media when conducting advocacy activities, while they use research when conducting policy analysis and evaluation activities.

Based on the fact that the analysis of social policy is more general and comprehensive than its evaluation ([2], p. 230). Given that not all policy practices require or lead to social action activities, especially conflictual and antagonistic ones, although they are a valid form of social policy practice when necessary ([18], p. 19), it is better to work with non-conflictual approaches whenever possible. On the one hand, the energy used in conflict can be saved and bad feelings and negative repercussions resulting from it can be avoided ([30], pp. 370–71). Advocacy in general and some types of external advocacy in particular require social workers to be familiar with social action and ways to bring about social change. On the other hand, it often includes activities related to social work [31, 32]. Therefore, two basic dimensions of social policy practice for social workers can be identified: policy analysis and advocacy. Each dimension includes two sub-dimensions, as follows:

5.1 Policy analysis

Social workers can conduct policy analysis from two perspectives: one is analysis of policy and the other is analysis for policy. While the former involves analyzing existing policy in terms of its intent, content, and coverage, the latter provides information for new policy and advocacy for a particular policy. The results of analysis of existing policy are often useful for analysis in order to develop new policy ([18], p. 22).

5.1.1 Analysis of current social policy

This includes identifying the apparent and latent functions and consequences of the policy, as well as the values on which social policy measures are based ([24], p. 104). Policy analysis may include policy evaluation. This includes evaluating policies and interventions ([19], p. 289), determining whether policy objectives have been achieved and identified problems or needs are met or at least reduced ([7], p. 181), and evaluating positive and negative aspects of social policies in order to determine their effectiveness, and studying the impact of legislation already passed [33], where the consequences of policy measures, the impact of policies on people are considered ([24], p. 104), and determining what changes should be made if the evaluation is negative ([34], p. 15).

5.1.2 Analysis for developing a new social policy

This means studying the policy to understand its goals, strategies, and potential impact ([13], p. 10). It includes analyzing the social, economic, and related

circumstances that require social policy measures ([24], p. 103), analyzing a specific social problem and analyzing and evaluating various policy proposals ([33]; [34], p. 14) as well as proposing possible solutions. and written for specific purposes ([18], p. 22; [34], p. 14). When presenting problems to institutional, community, and legislative decision-makers, social workers engage in agenda-setting tasks by using research to determine the causes of problems, analyzing policy options to determine the best policy for clients, and analyzing problems and finding solutions based on the best available knowledge. In light of this, providing proposals solutions to problems, and making presentations and participating in discussions to persuade others to support their proposals ([34], pp. 14–15). Social workers also study the experiences of other communities to benefit from them as a basis for policy change ([19], p. 289).

5.2 Advocacy

Advocacy has always been an important part of the social work profession. Although its prominence has fluctuated over the years, it remains at the heart of professional practice. Advocacy efforts become increasingly complex as the profession's political role increases to ensure social justice. Advocacy is defined as "the act of directly representing, defending, intervening, supporting, or recommending a course of action on behalf of one or more individuals, groups, or communities with the aim of securing or maintaining social justice" ([35], p. 95). According to Ezell [36], "Advocacy is those efforts aimed at changing specific, existing or proposed policies or practices on behalf of or with an identified client or group of clients" (p. 23). Barker [23] defines it in the social work dictionary as "defending the rights of individuals or communities through direct intervention or through empowerment" (p. 10).

Many types of advocacy have been discussed in the social work literature. Mickelson ([35], p. 96) classified advocacy into two types: Case Advocacy for practice at the micro level, and Class Advocacy for practice at the macro level, and emphasized the mutual relationship between them and the importance of interaction between them to achieve social justice. In addition to these two types, Ezell [36] presented many other types of advocacy, which are: internal advocacy, system advocacy, policy advocacy, political advocacy, self-advocacy, clinical advocacy, citizen advocacy, direct service advocacy, legal advocacy, and local community advocacy.

Hardina et al. ([32], p. 271) identified the types of advocacy as: situational advocacy, self-help advocacy training, class advocacy, legislative advocacy, and political advocacy. Cox et al. [31] classified advocacy into two types: case advocacy and cause advocacy. This type includes: legal advocacy, legislative advocacy, self-defense, and system advocacy. Fitzgerald and McNutt [37] referred to electronic advocacy as a form of policy practice, defining it as "the use of technologically intensive media to influence stakeholders to influence policy change" (p. 334). In fact, it can be used in all other types of advocacy.

All previous types can be classified under two basic types of advocacy: internal and external advocacy [31, 32] ([38], p. 6).

5.2.1 Internal advocacy

Internal advocacy is defined as activities in which social work practitioners engage in their roles as professional staff, and are undertaken for the purpose of changing the formal policies, programs, or procedures of the organizations in which they work, in order to increase the effectiveness of the services provided or to remove organizational conditions that are are deleterious to the client populations served ([39], p. 537). It

is also defined as activities that social workers undertake or participate in with the aim of making changes in the policies of their organizations or other organizations to improve services ([19], p. 293). It is therefore linked to advocacy on the part of social workers and other professionals working within the System ([38], p. 6; [39]).

Internal advocacy includes the following professional activities: assisting the client in obtaining services either from the organization or from other organizations; providing information, training, education, and awareness of clients who need assistance with the aim of making them self-reliant in obtaining the resources and services they need; efforts to eliminate harmful conditions or practices from their organizations; reporting violations; and working to change organization policy to increase customer access or improve service effectiveness ([32], p. 274; [36], p. 26). In addition to making efforts to influence co-workers' attitudes toward organizational policy; And introducing better policies within the institutions in which they work ([19], p. 289).

5.2.2 External advocacy

External advocacy requires the use of a range of practice activities outside the organization [32, 38]. It is worth noting that internal advocacy activities can lead to external advocacy [32, 38].

Hardina et al. [32] defined the types of external advocacy as: class advocacy, legislative advocacy, and political advocacy:

- Class advocacy: This type of advocacy practice recognizes that most people who seek services from social institutions have common problems that may be rooted in institutional discrimination or social policies that have harmful effects. Thus, class advocacy involves bringing together people with common problems, social workers, and other concerned individuals who take action to solve the problem. The basic rationale for this type is that groups of people coming together to take action have greater power than a single individual acting alone [32].

- Legislative advocacy: is "the process of influencing the course or content of a bill or other legislative action. This may be facilitated by individuals, agencies, organizations, or coalitions to protect or establish the rights and entitlements of their clients. Legislative advocacy may occur directly using advocacy tactics specific legislative or indirectly through the mobilization of community groups" ([23], p. 244). It aims to encourage and influence legislation that benefits the disadvantaged population represented by social service ([17], p. 181). The process of influencing legislative change is called lobbying [32]. Legislative advocacy activities include: contacting legislators or public officials; pressuring policy makers; providing advice to legislative committees; testifying before legislative committees ([19], p. 289). It can also include analyzing the effects of a policy, and disseminating this information to officials and the public [32]. Perhaps this highlights the overlap and interaction with the task of social policy analysis.

- Political advocacy: The rationale for classifying participation in politics as a type of social service advocacy is that electing public officials who support social service values is a good way to ensure that legislation reflects the interests of both social workers and the people they serve. Political advocacy can include: registering voters, volunteering for a political campaign, running a campaign, and running for office [32].

Social workers' social policy practice is linked to the cultural and legal framework of society, as what is appropriate to practice in one society may not be appropriate in another society. Also, what is appropriate to practice in the same society in a certain period of time may not be appropriate in another period of time in relation to the legal framework for each period of time [40].

6. Levels of social workers' social policy practice

Social policy practice has been an integral part of social work practice since the beginning of the profession, as it has historically given special importance to social institutions and policies and the transformations they undergo [13, 14, 20, 41]. Many people and events have contributed to a renewed focus on social policy practice in social work education and practice, culminating in the Council on Social Work Education (CSWE) inclusion of Engage in Policy Practice in Educational Policy and Accreditation Standards (EPAS). Policy and Accreditation Standards in 2008 AD is one of the core competencies in social service [41].

Social policy is not just a topic that social workers study and understand in order to help clients access programs and resources. It is also an arena for social service practice, as social workers practice with individuals, families, organizations, and communities ([13], p. 9). Social policy practice is an important aspect of the general practice of social service in all institutions, whether at the local, regional, or national level and within all levels of small, medium, and large intervention, in order to achieve the goals and mission of the profession for social and economic justice ([13], p. 2; [15], p. 6; [16], p. 8). Whereas the value foundation of social work, commitment to human rights and social justice, current shortcomings in meeting basic needs and issues of local communities, and the need for balance between micro and macro practice make social workers engage in policy practice and political participation with due regard to cultural contexts [18]. There is now a clearer understanding that social workers may be called upon to draw on policy practice skills, regardless of their specialist areas of interest ([12], p. 1).

At first glance, direct practice appears disconnected from macro-level practice that requires a clear political focus. However, participation in policy making is easily integrated into the context of direct practice ([6], p. 369). In fact, it is often working with individual clients that makes social workers aware of the need to change and reform care policies ([7], p. 170).

Direct service practitioners can play an important role in social policy making. They have at their fingertips essential information about learned social problems from their experiences on the front lines. They also have ideas about the causes of these problems and their solutions. Because of their proximity to beneficiaries of social services, practitioners witness the intended and unintended effects of policies on them. In committing to social justice and expanding opportunity, social workers use the information they gather to put policy concerns aside integral to their professional practice ([6], p. 370).

Pawar ([18], pp. 15–16) noted that policy practice essentially involves participating and contributing to policy formulation and implementation with the aim of amending or changing policies that are not suitable for people, policy evaluation leading to the formulation of new policies and/or changing/improving existing policies, all of this leads to achieving social service goals while adhering to values and principles. In addition to formulating, implementing, and evaluating policies, doing policy sometimes involves and requires challenging and changing people in discriminatory

situations, despite good policies. It also means that it extends from individual practice (micro) to community and/or organizational practice (macro).

From the above it is clear that social workers practice social policy at all micro, meso, macro and international levels. It also becomes clear the importance and necessity of integration between social workers at these levels, which contributes to achieving a real impact on social policies.

7. The knowledge and skills needed social policy practice

The lack of knowledge and skills necessary to practice policy is one of the most important obstacles that limits the involvement of social workers in social policy practice. Hence, the importance of acquiring social work practitioners with the necessary knowledge and skills to participate in social policy practice is highlighted [42–44].

Yelaja [24] defined the basic knowledge needed to practice social policy in:

- Conceptual clarification of social policy, social welfare, and social development.

- Ideological dilemmas in social care, including a critical examination of social welfare ideologies and their relevance to social policies today.

- The historical origins and development of social care as a social institution and social work profession. The impact of industrialization on social care, values, and its role in shaping social care services, and a historical analysis of the emergence and development of social care as an institution and its future.

- Key and specific social policy issues in society.

- Human rights and social justice and their implications for the formulation of social policies and development.

- Social indicators and their role in the process of drawing up and developing social policies.

- The legislative process in social policy.

- The political process in formulating social policies.

- Comparative analysis of social welfare systems in different parts of the world.

Yalja emphasized the importance of field training for social work students in institutions related to policy making at all levels, as well as institutions concerned with defending human rights.

Jansson ([28], p. 78) pointed out that policy practitioners need at least four basic skills:

- Analytical skills to evaluate social problems and develop policy proposals, to analyze the severity of specific problems, to identify barriers to policy implementation, and to develop strategies for program evaluation.

- Political skills to gain and use power and to develop and implement political strategy.

- Interactional skills to participate in task groups, such as committees and coalitions, and to persuade others to support specific policies.

- Value-clarifying skills to identify and arrange relevant principles when engaging in policy practice.

Cummins et al. ([13], pp. 18–19) defined social policy development skills within the framework of general social work practice skills, in:

- Engagement skills: enable social workers to develop trusting relationships with a wide range of clients from different backgrounds and experiences. These same skills, applied in policy practice, foster the development and nurturing of relationships with actors in policy contexts including legislators, policy analysts, and stakeholders. All of these participants in the policy process have different personalities and different views on policy goals and the policy process.

- Assessment skills: which social workers use to understand the person in his or her environment, can be applied to larger unit organizations to identify strengths upon which change can begin, as well as resource needs and opportunities for intervention. Evaluation skills are applied to understand problems, analyze proposed solutions for their suitability, and develop an implementation plan that takes into account all circumstances of the people involved.

- Communication skills: necessary to establish and maintain relationships with individuals and families. Social workers learn to "start from the client's place" by actively listening to understand the world from the individual's perspective. So also, in the practice of politics, they rely on their full stock of communication skills. Policy practitioners must be able to communicate with diverse groups, including those in the opposition and those sitting on the fence. There are times when confrontation is important, but it is just as important to know when that time is and how to use confrontation skills wisely. Policy practitioners also use writing skills to prepare reports on issues and policy summaries for distribution to policy makers.

- Problem-solving and negotiation skills: important in direct practice with individuals and families in finding alternative options for new directions and new actions to be taken. Often, in family work, social workers are in the middle trying to help "both sides" develop solutions that will lead to a win-win situation. Likewise, in policy work, when policy practitioners identify needs and develop alternative policies to meet those needs, they are rarely able to see the details of the proposed policies fully adopted. Often, they must settle for a watered-down version or partial step forward that is more politically palatable or more financially practical in a given time period. With continued pressure and persistence, long-term goals may later be achieved, but policy practitioners must find ways to negotiate and find common ground in the short term.

- Networking and collaborating skills: These are important in connecting clients to the required resources in addition to working with other professionals with

families facing multiple challenges. Comprehensive services that include all providers teaming with families have proven effective in helping families facing challenges at risk of abuse and neglect. Many schools use interdisciplinary teams to plan and implement services for students with disabilities. These same skills play a role in policy-making efforts to find allies who will join together to support legislative initiatives. Endorsements from diverse viewpoints are extremely helpful in demonstrating broad support for bills. Understanding how to develop and maintain relationships and connections with other groups and individuals with common interests is one of the most useful skills in practicing politics.

It is worth noting that in the field of interest in providing social work students with the knowledge, skills, and values necessary to practice social policy effectively, it is possible to benefit from actual and proposed educational programs in this regard, such as the Australian Social Work Degree Program, which offers an innovative approach to teaching policy skills over a period of 2 years. The policy modules have a clear framework within which to understand policy development and provide students with real practical policy experience that combines an experiential learning approach with traditional teaching methods [45]. The educational program proposed by Weiss et al. [46], for teaching social policy, includes three components: (1) specific courses on social policy and policy practices; (2) integrating policy content into practical training courses; (3) creating a focus on policy practice.

8. Measuring social workers' social policy practice for improving it

Measuring the reality of social workers' policy practice contributes to identifying the strengths and weaknesses of this practice, and then working to improve it by enhancing the strengths and overcoming the weaknesses. Here, we present the dimensions and indicators for measuring social workers' practice of social policy, taken from studies by the researcher on the social policy practice of social workers in Egypt:

8.1 Questionnaire to assess the role of direct social work practitioners in making social welfare policies

The questionnaire included three dimensions: the professional tasks of social service practitioners in the policy development stage, their professional tasks in the policy implementation stage, and the professional tasks in the policy evaluation stage [47]:

- Professional tasks related to policy development: analyzing client problems, identifying clients' needs, contacting officials at all levels to discuss clients' issues and problems, proposing social legislation for clients care, pressuring organization officials to change policies to provide better customer services, allying with colleagues and interested parties to express viewpoints of clients and their problems and defending their rights, gaining public support regarding clients' issues and problems, and predicting the effects of proposed policies.

- Professional tasks related to implementing the policy: understanding the social care policy for clients, participating in choosing the best solutions and methods to achieve the goals, proposing programs that implement the policy, providing clients with all information about the organization's services, helping clients

obtain the services and resources they need, helping clients obtain on their rights from the institution.

- Professional tasks related to policy evaluation: modifying any deviations in program implementation, overcoming obstacles to clients benefiting from services, knowing clients' opinions about the services provided to them, evaluating the effectiveness of services in achieving their goals, evaluating the organization's efficiency in providing services, determining the effects of the current policy on clients. Submitting proposals to develop the organization's services.

8.2 Scale of social workers' social policy practice

The scale consists of two basic dimensions: policy analysis (analysis of current social policy—analysis in order to develop a new social policy); and advocacy (internal advocacy—external advocacy). The validity and reliability of the scale were verified. The validity was verified through content validity, face validity, and internal consistency validity. Reliability was verified through Cronbach's alpha coefficient and the split-half method, after applying the scale to a sample size of (50) social workers (**Table 1**) [40]:

8.2.1 Correction key for scale

5.1. Policy analysis:
5.1.1. Analysis of current social policy, which includes the following activities: 1, 5, 9, 13, 17, 21, 25.
5.1.2. Analysis for a new social policy, which includes the following activities: 2, 6, 10, 14, 18, 22, 27.
5.2. Advocacy:
5.2.1. Internal defense, which includes the following activities: 3, 7, 11, 15, 19, 23, 29, 32.
5.2.2. External defense, which includes the following activities: 4, 8, 12, 16, 20, 24, 26, 28, 30, 31, 33.

During the past year, have you performed or participated in the following activities?		
N.	Activities	Yes (1) or No (0)
1	Identify the guiding values of a social policy, plan, or program of client care.	
2	Presenting the priorities of clients' needs and problems to officials to take them into consideration when developing a new policy for their care.	
3	Report violations to officials in the implementation of a policy or welfare program (in or outside your workplace).	
4	Communicate (by: interview—phone call—WhatsApp—email) with state officials to reject a proposal for specific social legislation due to its negative impact on clients.	
5	Identify the forces influencing clients' social care policy making.	
6	Convince officials that a particular social problem suffered by clients deserves serious attention.	
7	Remove obstacles to clients benefiting from services (in or outside your workplace).	

	During the past year, have you performed or participated in the following activities?	
N.	**Activities**	**Yes (1) or No (0)**
8	Organizing a campaign to persuade state officials to include specific issues and problems of clients on the social policy agenda.	
9	Assessment of the extent to which a social policy, plan, or program for clients care achieves its objectives.	
10	Providing solutions to officials regarding problems experienced by clients.	
11	Educating clients about their rights and duties.	
12	Submit proposals or requests to the Council of Representatives (via the WhatsApp service or the Council's website) for clients care.	
13	Identify the intended and unintended effects of a social policy, plan, or program on clients.	
14	Assess proposed social policies, plans, or programs for clients care to choose the most appropriate ones.	
15	Helping a client or group of clients obtain their rights through legitimate means.	
16	Using the media to enhance community awareness of a specific social problem that clients suffer from.	
17	Identify the strengths and weaknesses of a social policy, plan, or program for clients care.	
18	Providing officials with the expected effects of a proposed social policy, plan, or program for clients care.	
19	Train clients to rely on themselves in accessing the resources and services they need.	
20	Using the media to enhance community awareness of some of the negatives in a social client care policy, plan, or program.	
21	Determine what changes need to be made in a social client care policy, plan, or program.	
22	Providing officials with successful experiences of other countries to benefit from in clients care.	
23	Demand changing the work policy and procedures in your workplace to improve the services provided to customers.	
24	Organizing seminars or conferences to defend clients' rights.	
25	Providing proposals to officials regarding developing a social policy, plan, or program for client care.	
26	Supporting the activities of (recognized) associations or coalitions interested in defending the rights of clients.	
27	Submitting a proposal for new social legislation to state officials to take care of clients.	
28	Assisting clients in filing a lawsuit to obtain their rights.	
29	Submit proposals to develop work policies and procedures in your workplace.	
30	Participate in peaceful demonstrations or protests to defend clients' rights.	
31	Nominating in (parliamentary-union-institutional) elections with the aim of achieving social reforms to care for clients.	
32	Changing work policies and procedures in other organizations (outside your workplace).	
33	Supporting advertising campaigns for candidates in (parliamentary-union-institutional) elections who have a reform vision for client care.	

Source: Elebshehe ([40], p. 23).

Table 1.
Scale of social workers' social policy practice.

Based on the fact that (yes = 1, no = zero), therefore, the scale scores range between (0, 33), and the levels of social policy practice for social workers were determined according to their scores on the scale, as follows:

- If the scale scores range from (0 to 11) degrees: low level.

- If the scale scores range from (12: 22) degrees: average level.

- If the scale scores range from (23: 33) degrees: high level.

According to the arithmetic averages, the scores are as follows:
The average scores on the scale range between (0, 1), and the levels of social policy practice for social workers were determined according to their average scores on the scale, as follows:

- If the average scores on the scale range between (0: 0.33): low level.

- If the average score of the scale ranges between (0.34: 0.67): an average level.

- If the average score on the scale ranges between (0.68: 1): high level.

9. Conclusion

There is consensus on the importance and necessity of social workers' social policy practice to promoting social justice, empowering individuals and communities, addressing the root causes of social problems, and developing social welfare policies that better serve the needs of the most vulnerable members of society.

This chapter provided an overview of what policy practice is for social workers, how it is practiced, the levels of practice, and the knowledge and skills needed for this practice. In addition to tools for measuring the level of social workers' social policy practice as a basis for efforts to improve this practice.

There is a need to review studies conducted on the reality of social policy practice in many societies, the challenges of this practice, to enhance their participation in policy practice. And using results of these studies in identifying appropriate mechanisms to improve the level of social workers' social policy practice at all levels of professional practice.

Providing social workers with the knowledge and skills necessary to practice social policy empowers them to be effective advocates, policy analysts, and change agents. It strengthens the profession of social work and enhances its ability to address the root causes of social problems and promote positive social change. So, there is a need to analyze the political content in academic curricula and field training for students of various academic programs of social work.

Political knowledge can be embedded into social work education curricula in several ways, including, for example:

- Offering courses or modules that focus specifically on social policy and political advocacy. These courses cover topics such as policy analysis, the legislative process, advocacy strategies, and the role of social workers in influencing policy change.

- Field education in settings where students can engage in political advocacy and policy analysis.

- Focusing graduation research projects and field training projects on political advocacy or policy analysis. For example, students can research a specific social issue, analyze relevant policies, develop advocacy strategies, and present their findings to stakeholders or policy makers.

- Inviting policy makers, lobbyists, activists and experienced social workers to share their insights and experiences with students. Hearing from those actively involved in political processes provides students with valuable perspectives and helps them understand the practical implications of policy practice.

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Section 6

Community Resilience and Humanitarian Efforts

Community Resilience, Community Rebuilding and Social Cohesion during New Normal

Poonam Gulalia and Chittaranjan Subudhi

Abstract

Resilience is a concept that, in reality, exists on a continuum and presents itself across multiple domains of life. The education for all practice disciplines is also undergoing a paradigm shift through the construction of identity and inquiry into the personal and professional practice self. Moreover, postmodernism has seen a resurgence in spirituality and engaging with multiple ways of reality away from rationalistic and scientific paradigms. In social work practice, it has now been identified as facilitating authentic relationships, enhancing social cohesion and promoting a collaborative learning environment. Through an ethnographic methodology, the researchers attempt to chart the engaging journey of the past year with first-year students of the Master's Program of Social Work. The community of students engaged on online and offline platforms to understand the field, themselves and their relationships with various stakeholders. Through a collaborative learning environment, students have been facilitated to develop communities of inquiry, reflect on how social cohesion has taken place, and reflect on how their own spirituality has influenced their practice. It has helped me understand the need to include spirituality in social work as being as important as issues of diversity, multi-cultural and holistic approaches. The transformative journey is a mutual learning process shared by everyone, and it constructs our common future.

Keywords: resilience, community, social cohesion, spirituality, transformation, social work

1. Introduction

In the twenty-first century, this new world faces a common fate of humanity on a crowded planet [1]. It is also time to dwell on the real meaning of a 'learning community' and how it is related to social cohesion and resilience building in the student community in these times. At the outset, it is essential to state that India has 35 million students enrolled in Higher Education, contributing to a small Gross Enrolment Ratio (GER) of 27.1% [2]. With a larger population, China has a much higher GER of 51.6%. Suppose we achieve the target of 50% GER by 2035 as envisaged by the National Education Policy (NEP), 2020. In that case, we need to give importance to online learning with NEPs' provision of multiple entry and exit points.

2. Resilience and its dimensions

Given that the primary concerns are resilience, one needs to address the theoretical approaches and practical research knowledge available to us to 'resilience'. Resilience has been studied as a dynamic process of successful adaptation to adversity revealed through the lens of developmental psychopathology. It is an outcome of successful adaptation to adversity [3]. From Palestinian literature, one learns that 'Sumud' is an idea interwoven with ideas of individual and collective resilience and is linked to the surrounding cultural context. Resilience is seen as a pre-requisite to 'Sumud', implying that an individual student learner has to be resilient to stay and not leave their place, position or community.

The researchers like Ungar [4] and Kent [5] wrote that resilience does not occur in segregation. It is a collaborative process that requires something or someone to interact with each other. It is dependent upon the situation or environment, including our relationships. A literature review has revealed that community resilience is necessary for individual resilience in diverse ethos and contexts. In this context, it is also essential to understand the relationships between the notions of 'the individual' and 'the collective' as key to understanding resilience since they have reported a shared identity, community collaboration and increased social ties as integral to enhancing the well-being of individuals.

In attempting to create a learning community of students in the fieldwork spaces, especially in the virtual world, it became mandatory to begin discussing the same among small groups of students. In consulting with peers, students began to get to know and learn about themselves and others. It also created spaces for the kind of emotional responses that any student might have and the reason, besides mapping the community assets that the student might have overlooked. Building resilience in and through these spaces threw light on what is being talked of in resilience research as the need to integrate with the contemplation of socio-political and cultural perspectives. This aligns with 'Sumud' and 'Samagrata' [6], the Indian approach to well-being, including health-related resilience, which remains an under-researched relationship [7].

Before proceeding to the inter-relationships between health-related resilience and well-being, it is essential to revisit the definition of resilience, which is evolving. According to the American Psychological Association (APA), resilience is 'the process of adapting well in the face of trauma, tragedy, threats or other sources of stress'. Being a complex concept that exists on a continuum, it may present itself in different degrees through multiple domains of life and requires introspection from the students' learning.

3. Sustainable well-being society

Writing for the Organization for Economic Co-operation and Development (OECD), Mason [8] wrote, 'change and sustainable development in education, at whatever level, are not so much a consequence of effecting change in one particular factor or variable, no matter how powerful the influence of that factor. It is more a case of generating momentum in a new direction by attention, as I have argued, to as many factors as possible'. This implies that transformation requires the convergence of many dynamics. The pertinent question arising here is how a system as complex as education disrupts its own momentum and transforms. How will new structures, patterns, and cultures replace old ones? The complexity of education systems demands

that an approach be adopted that finds 'the right combination of mutually reinforcing dynamics' (P. 30) through active experimentation, adaptation and a bias toward agility and revitalization rather than stability and probability.

This brings one to question the original design of most education systems, which, if unpacked, leads one to acknowledge that they focused on providing knowledge to average students. The fact is that 'education systems were not designed to endure the complexity inherent in the enterprise of teaching and learning or the pace of exponential change in the twenty-first century'. How, then can opportunity for change be created? How can current conditions be set for transformation?

As student learners become an integral part of fieldwork and engage with the learning spaces, they find themselves sifting through new roles and tasks individually and collectively. When engaging with students, the facilitator educator found herself questioning herself and her student learners on the following:

1. What are the potential and personal values and social work values that are important for them during their fieldwork?

2. What are the potential personal and/or social work values that are contentious or in conflict with fieldwork?

3. What are the potential or desired vision(s) of change to be achieved within the next few months (as the semester draws to a close)? What are the opportunities to change? What are the barriers or challenges to change?

4. What are the potential or desired roles and /or responsibilities that students, as budding social workers, can undertake in the given circumstances?

5. What organizational structures and processes can facilitate and support such roles and/ or responsibilities?

4. Methodology

The ethnographic study revealed that the facilitators' educators' authentic and direct dialogs provided transparency and enabled students to build strengths-based perspectives in the course of their social work journey. The group laboratory exercises followed by fieldwork placements, interactions through formal and informal mechanisms, going at the pace of the student learner and empathizing with their circumstances, enabled the mentor to help link, bridge and facilitate creativity and innovation in resolving issues related to sustainability, well-being and mental health [9].

Well-being research and sustainable well-being were highlighted as essential for understanding the context while quoting from Sitra's second working paper [10] wherein six principles were developed that could help establish a new narrative about the future and initiate a transformation. These are:

a. Addressing quality life-management skills, holistic way of well-being and social inclusion wherein well-being is a priority requires personalized solutions that support physical and mental well-being and requires undertaking individual responsibility for the same.

b. Adjusting to planetary responsibilities: ecological sustainability elements such as de-carbonization, need to be implemented as the basis of policy-making in both public and private sectors.

c. Empowering individuals and communities: The public needs to express their voice on the issues/problems that affect them and must be treated as co-owners, while community-based solutions should be prioritized.

d. Moving to a reformative and collaborative economy: economic infrastructures need to be reformed to foster well-being and sharing economies to be part of the collaborative process.

e. Building competencies for a complex world requires new competencies to thrive in a complex, interconnected world where learning is lifelong.

f. Developing inclusive and adaptive governance: governance must evolve within government and communities.

Within this background and in the given context, subjective well-being can thus serve as a welfare indicator and has advantages over traditional measures of economic activity. It goes beyond measuring market transactions and includes non-market aspects such as welfare derived from cohesive social interactions, the practice of self-sufficiency and competence, the absence of insecurity or grievance from perceived inequality. While engaging with students learning in the course of the past year, mentors found themselves finding spaces wherein the multi-dimensional aspects of the concept of well-being found meaning. Kite and Davy identified multiple layers of indigenous well-being and quality of life, incorporating profound cultural perceptions of physical, emotional and spiritual well-being [11]. From social work perspective, when one examines the impact on mental health through the lens of a social model, it adds value to one's learning. Emphasizing the connections between societal injustices and personal pain, both individuals and communities becomes vital to this process and opens up spaces for teaching and learning.

Researchers, while reading and reflecting on students' records, got to appreciate that some students were effectively using the partnership process model called 'Shaping the Mental Health Needs of the Traveler Community', which primarily aims to [12]:

• Engage with the community in addressing issues of mental health.

• Share the responsibility of addressing issues of mental health.

• Engage families/communities that have been historically excluded.

• Increase cultural competency.

• Minimize the stigma and discrimination associated with mental illness.

• Promoting positive mental health among community people.

5. Analysis and discussion

Within the mandate, the researchers gave themselves resilience involved in how an actor/student learner influences their environment, copes with or adapts to adversity and experiences favorable outcomes. This active engagement includes a process of 'knowing, deciding and doing' and having attitudes and values that empower a person to believe that they can in some way influence their environment. 'Resilience is thus an adaptive potential that may be fostered and supported in a person, no matter what age or developmental phase' [13].

Additionally, when discussing multi-layered social resilience, it becomes essential to appreciate its influence on individuals, organizations and communities and how it can contribute to social research and development. By encouraging and strengthening the capacities and competencies of individuals, communities and organizations, one can support student learners and youth to become potential contributors to the development and advancement of social resilience in their communities and societies.

A potential source of conflict in collaboration for students' learning is conflict between borders can mentally strengthen communities through a common enemy or strengthen communities through integrating outsider perceptions to expand borders. The next element identified in Achinstein's study as under-represented in teacher collaboration literature is that of ideology. Every teacher possesses their own ideology regarding 'learning and teaching processes and these ideologies are the source for how teachers' make sense of their world and ultimately take action' [14, 15].

While students deal with conflict situations in their fieldwork spaces, it reminds one of Achinstein's study [14], which shows that the conflict associated with collaborative efforts could be a source of innovation, allowing new ideas to enter and creative problem-solving to be regarded as an opportunity for growth. There is not enough literature on interpersonal conflicts resulting from collaborative efforts, but the fact remains that individual and social resilience are interactive [16].

6. Learnings from case studies

In the last academic year, the students have been largely overwhelmed with classes and coursework within the fieldwork placement process. A key aspect of the support provided is identifying strategies that would enable students to take ownership of their own learning in the field. This includes the ability to translate feelings into creative solutions. Using an inquiry-based learning approach has triggered discussions among students who were working in partnership or independently. Listening to students' narratives and experiences, engaging with them online and offline, maintaining peace during some silent spells and understanding the cries and depressing moments have enabled the facilitator researcher to question one's own role and approach in these changing times.

While students aspired and struggled to meet deadlines related to assignments while remaining virtual with limited data back and sometimes poor network, besides sharing technology with other family members, they continued to aspire to make meaning of the new learning spaces. Through this process and as a result of their engagements with the supervisor, mentors and peers, besides communicating with their family and friends, they got to learn and unlearn a lot about each other, about themselves and their surroundings, which would have gone unnoticed in the 'normal times'. The 'increased maturity' displayed by students was seen to be more due to

experiences of interpersonal relationships with staff and outreach workers in the field, clients, agency personnel and peer group members.

With this background, Lewicki [17] discussed the concept of self-image as relating to the kind of person one would like to be. It is believed that the more significant the gap between one's self-image and what one believes one's self-image to be, the lower one's self-esteem. Students tend to derive their self-esteem from their academic achievements, where a culture of being the best is encouraged, and from their background, tend to be lower-to-middle class or middle-class.

While exploring the multi-layered influence of social resilience on youth, youngsters, student learners and facilitators, it is essential to consider the potential role of student learners themselves to begin with and in their efforts and search to contribute to social development. This is all the more important as more than 50 percent of the population of most countries is age 18 or younger. No doubt, youngsters have their own ideas and experiences to contribute in improving society [18].

6.1 Case study 1

In one of her detailed recordings, she wrote: 'being an *Adivasi* social work student, I was quite ignorant and alien to the concepts and issues of my own districts, my own people and my own surroundings. Being 24 years of age and not knowing my own history, not knowing the name of my *Adivasi* predecessors and freedom fighters or about the journey of their *ulgulan* (revolution) was a humbling experience in the field. The fight for *jal-jungle-zameen* and concepts like *abu dusum abu raj* (my land, my rules) made me question my own identity. It gave me an existential crisis and urgency to read, learn, and research about my state, people, and issues they faced for over 7 decades. ....the discussion with the agency personnel and advocates at the organization made me recall why I aspired to study at TISS first place....'.

Further, she adds, '.....the past two weeks and being part of the organization which has such a grounded approach, helped me by providing an exposure that I needed to get back on track. The day I went to the field the first day was a good start to my fieldwork learning experience. Followed by reading, researching, and participating in discussions and understanding the state's witch-hunting processes, which were merely haunting childhood stories which became problematic in the current context. From ignorance to the revenge of cases of land grabbing, witch-hunting covered them all, including women being burned alive, being raped, being murdered and even being forced to live outside the village .....a lot still needs to be done regarding awareness, providing security and legal aid to the women of our community while a few privileged ones like us can assert our independence and live lives on our own terms'. ......even when I am spending a lot of time, energy, and resources engaging proactively with the ground staff, advocates, and related personnel .....I feel challenged as I am not well informed about my culture, socio-political structure of the state, history, special laws, acts and politics. I need to read and research while being a part of the human rights law network and remain part of discussions and online seminars. I have now changed my Masters' research to witch-hunting and land acquisition'.

Three weeks later, she was invited by Adivasi Women's Network (AWN) to be part of the Rising Garden campaign, which is an inherent part of a global campaign to address the issue of gender-based violence. I learned that it began in 2012 as a part of the V-Day movement; the term 'billion' refers to the UN statistic that one out of three women will be raped or beaten during their lifetime. The world population of 7 billion adds up to more than one million women and girls. Additionally, the Convention and

the Elimination of all Forms of Discrimination against Women (CEDAW) expands the notion of equality for women beyond that which most national laws embrace. It needs to be mentioned here that across the planet, the majority of front-line workers, domestic workers and farmworkers are women. Needless to add, the current situation of the pandemic has blown open the destructive veins of neoliberalism, capitalism, racism, fascism and patriarchy, revealing violent and broken systems that have been forced upon all of us. With each day, we see that the majority of people who are dying have been historically exploited, oppressed, marginalized and discriminated against due to age, gender, caste and class. The sacred connection that indigenous communities had with their land has been violated through internal colonization, amendments in the laws and policies and the continuous human rights violations made against them.

6.2 Case study 2

Another student who is pursuing her fieldwork in Pune has a background of having graduated in Economics and is well-versed in three languages, namely Marathi, Hindi and English. She also has had earlier work experience as a fellow at Teach for India for a couple of years and has worked as a Teaching Assistant with an NGO before enrolling in the Master's Program of Social Work. She writes talking about the statistics department of government machinery, 'as concerned citizens one can approach the office and ask for data in accordance with transparency of operations which governments assure its people. …. In working around a Bus Campaign for commuters, I was engaged in explaining the need to fill out the Visibility Gap Funding to the transport manager, I appreciated the initiative and provided suggestions while presenting the limitations faced by the Municipal Corporation. Learning about an open day at a government office was an eye-opener. Seeing for myself where public busses are repaired and serviced was also a lifetime opportunity besides appreciating how much manpower goes into making one bus operational. The "Atal Bus Sewa" guarantees minimal pay for a 5 km ride to the ordinary commuter. Realizing the large dependence of students and elders on this mode of transport was essential for us……………… I learned of the challenges faced, the need to give hawkers and road sellers a designated space and the differences between traveling costs and revenue generated by the department. My biases about local governments, efficiency and dedication of officials and commitment of the organization to the cause enabled me to add value to my fieldwork learning'.

Max-Neef [19] had stated categorically, 'the most important contribution of a human scale economy is that it may allow for the transition from a paradigm based on greed, competition and accumulation to one based on solidarity, cooperation and compassion' (p. 204). While understanding the eco-social approach to well-being, it becomes essential to factor in Salonen and Konkka [20], who flagged non-material consumption, sharing and caring needs of future generations as crucial components of the same. In integrating cooperation, 'better' benefits to society, equality of opportunity and inter-generational equity, one referred to a rather mature student recording when she has been engaging with the tribals in the vicinity of her hometown and surprised herself when she wrote:

> It reveals when we fathom that transformational learning is about seeing our worldview from a reflective perspective. In fact, transformative learning for a sustainable future should be the core mission of education and learning needs to be focused on understanding the connections between humans, nature, society and the economy. A revolutionary approach that challenges the current education system may be needed to achieve true transformative learning [21].

7. Conclusion

In the twenty-first century and beyond, ethical dialog is tied to science, and social work continues to feel obliged to provide a voice to individuals and to communities. By remaining grounded in the profession's mission, values and ethics, social workers and health professionals can avoid losing focus. In these pandemic times, when front-line workers have been holding fort, public health social workers are engaged in community-based participatory research (CBPR), which is a collaborative process involving researchers and community representatives and community members; employs local knowledge in the understanding of the problems and the design of interventions and invests community members in the process of products of research ([22], p. 1).

Emerging research methods at the nexus of social work and public health include GIS, system dynamics and social network analysis. Hiller [23] highlighted that GIS strengthens social work by (a) providing a geographic framework for the study and understanding of human behavior, (b) spatially locating needs and assets within a community, (c) mapping and improving the delivery of services and (d) emphasizing social justice through the empowerment of communities. This aligns with the theme 'I am because we are' and helps strengthen solidarity and global connectedness.

It became evident throughout the year that a high level of facilitator engagement and support adds value to open and sincere communication. Even with an enhanced level of support, there are concerns about which students are unsure, for example, when there is poor communication, poor mentoring, personality clashes or inadequate support.

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Chapter 16

Humanitarian Action: A Necessity in the Academic Training of Health Professionals

Consuelo Giménez Pardo and José Félix Hoyo Jimenez

Abstract

In an increasingly complex world, many low and middle-income countries (LMIC) lack access to proper water and sanitation, have scarce economic resources, and have weak public health systems. With limited funds to cover this gap and day-by-day worsening panorama of day, international agencies need to meet aid projects with ever-increasing quality and efficiency requirements. Aside from the increasing budget, this implies the creation of quality training programs in universities that do not exist specifically. The need for theoretical-practical training on aspects related to global health problems, migratory movements, geopolitical world history, human rights, security, health care for vulnerable populations, and how to create specific health action plans to improve related outcomes, etc., makes unavoidable to improve necessary conscience and skills on this problem from the first steps of health science students' career to professional postgraduate teaching programs. The objective is to equip health workers with specific tools under a systematic wide approach to issues that, till now, have not been included in undergraduate studies of the health professions and constitute a complex framework of comprehensive knowledge.

Keywords: humanitarian action, academic training, health professionals, right to health, global health

1. Introduction

Today, the world—and the most vulnerable communities in particular faces increasing fragility and fragmentation due to the COVID-19 pandemic, extreme weather events, protracted conflicts, and an increase in migrants, both internally displaced, crossing borders every day.

The 76th World Health Assembly, held in Geneva (Switzerland) from May 21 to 30, 2023, constitutes a good example to allow us to summarize several relevant topics that were discussed, covering not only the rich countries but all humankind, even in difficult humanitarian situations. For this reason, the fundamental advances in the UHC (Universal Health Coverage), the pandemic treaty and the modification of the health regulations international law, the emergency fund, or the serious health situation in Palestine or Ukraine due to the occupation and increased hostilities. Other

topics covered have been the Health Initiative, Strategy for Peace, or the review of the Global Strategy for the Health of Women, Children, and the Adolescent (2016–2030), which are related to specific vulnerable population groups.

This year, several events with an important specific weight both from the point of view of climate change, United Nations Climate Change Conference 2023, COP28, which will take place from November 30 to December 12, 2023, in Dubai (UAE) as from the point of view of decisions or high-level meetings of the United Nations, including the pandemic preparedness and response plan, UHC and the high-level meeting on tuberculosis.

As the bigger threat to health and global warming, we are living in a history of unprecedented rise in the global temperature of more than 1.2°C since the Industrial Revolution. Various experts from the scientific community and United Nations agencies, such as intergovernmental panel on climate change (IPCC) or UN environment programme (UNEP), try to address this situation and warn about the need for stick to signed agreements to limit uncontrolled emissions. The consequences of this on ecosystems and health are evident. This increase in global temperature is responsible for the rise in sea level, the reduction in agricultural activity and the increase in droughts, among others. These situations have a real impact on health, increasing, for example, the distribution of infectious diseases such as malaria or worsening mental health or mortality due to heat waves.

Climate consequences are worse in low and middle-income countries (LIMC), which has contributed less to the emission of these sources of greenhouse gas emissions (GHGs). These countries, due to the interaction of climate change with other stressors, will be scenarios of conflicts, and millions of their inhabitants will be forced to immigrate to less affected areas, so the current political crisis, conflicts, and riots in many Middle Eastern and African countries have led to massive migration waves toward Europe [1]. In fact, the health crises related to climate change in African countries are predicted to get worse and more prevalent. The response to catastrophic events such as cyclones, flooding, and landslides must be rapid and well-coordinated. Slower adverse events such as droughts, heat stress, and food insecurity must similarly be anticipated, planned for, and resourced. There are lessons to be learned by the health system following the crisis created by Cyclone Idai in Zimbabwe in March 2019, which required a massive humanitarian response to mitigate the impact of torrential rainfall on lives and livelihoods [2].

The WHO Eastern Mediterranean Region, extending from Morocco in the west to Pakistan in the east, with a population exceeding 490 million, suffers a large proportion of both natural and man-made disasters. Humanitarian partners in the health sector have played a major role in averting excessive mortality and morbidity in response to previous emergencies; nevertheless, much remains to be done to provide evidence through rigorous research methods to standardize other essential elements of the health response to humanitarian emergencies. Strengthening academic institutions, prioritizing research, and utilizing financial resources and linkages with institutions in the developed world can ameliorate the situation in the region [3]. These responses may be professional and people from agencies must be properly trained.

The existence of vulnerable countries with poor health conditions, scarce resources, and deficient and/or unstructured health systems requires international agencies to comply with ever-increasing quality requirements. This implies the need to create training programs that do not exist specifically in universities without losing the momentum of applied research and knowledge transfer. Given the number of people affected annually and the likelihood of such events increasing in quantity and intensity, it is important that educational outcomes cover the needs of affected populations.

Reliable and timely information on the health status of and services provided to crisis-affected populations is crucial to establishing public health priorities, mobilizing funds, and monitoring the performance of humanitarian action [4]. Although the development of humanitarian action is rooted in historical events, the dynamics behind today's international relief organizations can only be understood within the context of the modern world. Relief organizations are currently confronted with major challenges and paradoxes. The challenges include the need to enhance professionalization and standardization of assistance operations and exposure to greater risks [5].

It is necessary to explore the case for professionalizing humanitarian action through an international professional association, the development of core competencies, and the creation of a universal certification system for aid workers. International humanitarian response to crises employs many people and accounts for billions in spending globally each year. Most action is carried out by not-for-profit organizations working with United Nations (UN) agencies, military organizations, and commercial entities. Training and research are needed. UN agencies employ many technical experts, but yet there is no international professional apparatus to promote the quality and integrity of this workforce [6]. The professionalization movement endorses a standard route to certification through the completion of a competency-based curriculum, demonstrating competency through examination or experience to produce learning. These programs devise certification criteria for entry, mid-level, and higher-level candidates who serve in domestic and global humanitarian crises [7]. Training and research are needed. Classical in the air message of "do not harm" message is not enough without a systematic background.

This implies the creation of quality training programs in universities that do not exist specifically. The need for theoretical-practical training on aspects related to global health problems, migratory movements, world history, geopolitics, rights, security, health care for vulnerable populations, and specific health action plans to improve related outcomes makes it necessary to consider providing professional postgraduate students with tools on issues that till now are not explained in undergraduate studies of the health professions.

Students, applicants to medical school often state that they are motivated by a desire to help others, despite the assessment of altruism is difficult and imprecise, in fact altruism is not an observable behavior that can be measured [8, 9]. Studies carried out in German reflect that altruism tends to increase for last year students who assist in clinical practice, is higher for females, and altruistic medical students are more likely to choose surgery and pediatrics as their preferred specialty [10]. Otherwise, the university student volunteer as a social change agent is in a period of transition. There is no returning to the idealism and activism of the 1960s. In view of the changing nature of today's students, the conventional definitions of volunteers must be reconsidered due to there is widespread disillusionment with "band-aid" approaches to solving enormous social problems, i.e., trying to help the few while some of society's most fundamental structures guarantee the perpetuation of poverty, crime, and general anomie. Altruism and volunteers are needed, but not only.

For teaching humanism and professionalism, the best is modeling it and the example of the Baylor College of Medicine (BCM), which "adopted" virtually all the medical students of Tulane University School of Medicine and continued their education for 8 months after most of New Orleans was flooded on August 29, 2005, after Hurricane Katrina, in which, after the BCM-Tulane experience, BCM developed a disaster-management plan that could help other schools as they plan for disasters [11].

Some authors have identified training programs, most of them available in few countries of the global North, and few qualified for a master's degree in humanitarian health using theoretical knowledge as the most common method used for teaching and assessment, but the duration of the training and tuition fees were different for different programs and qualifications, while target audience, prerequisite, and curriculum design were often vaguely described or missing [12].

Humanitarian action is developing in an increasingly changing and troubled world context. Organizations are subject to more and more complex requirements due to ethical, legal, technical, financial, media-related, and political considerations. They must deal with higher and higher stakes, such as the emergency-development trade-off, the need for professionalization, and the revival of governmental humanitarian action.

Non-governmental Organization (NGO) gives to the education of health staff on humanitarian aid interventions and educational activities that contribute to the quality of aid activities in situ and needs to be different totally for each of the association's standard forms of humanitarian interventions: urgency, post-urgency, development for technical assistance [13]. Examples in humanitarian teaching are, among others, the increased demand for humanitarian logisticians with a humanitarian logistics competency framework (HlCF) designed to support the human resource plans and practices of aid agencies, which will, in turn, facilitate workforce mobility and support the overall concept of a certified humanitarian logistics professional. Others are the competences required in the humanitarian context, whereas current occidental surgical training through courses addressing the specificities of surgery in the humanitarian setting and austere environment is aimed at trained surgeons and senior residents interested in participating in humanitarian missions. Teaching humanitarian surgery by joining academic and field actors seems to fill the gap between high-income country surgical practice and the needs of the humanitarian context [14]. Some other examples are the objectives of the CESHs (the European Center for Humanitarian Health Care) Educational Program that teaches the principles and methods necessary to integrate experienced teams already in the field. Courses including a three-week study program sanctioned by an Interuniversity Degree in Public Health and several 2-to-3-day training modules for humanitarian actors including field workers and decision-makers, health care professionals, and governmental or other administrative agents [15].

Given that the humanities and social sciences are underrepresented in the studies of the Degree in Medicine, it is necessary to cover these aspects at the postgraduate level [16]. As other authors have proposed, there is no agreement on core curriculum or pedagogy across humanitarian studies courses or consensus on what it means to hold a Master's in this field, so it is necessary to provide students of the health professions with tools of this type, training them in theoretical-practical content on global health problems, migratory movements, history, geopolitics, rights, security, health care in vulnerable populations, specific health plans for performance, etc. [17].

It is important that these courses further contribute to an improved humanitarian sector, and programs must include course entry requirements, flexibility, research, practical components, and academic foci. A second implication concerns pedagogy.

Health interventions have undergone changes, and the new situations that these professionals face make it necessary to pay attention to different issues without losing sight of the need for a good relationship between teaching and research. The Faculty of Medicine and Health Sciences of the University of Alcalá (UAH) shows off its involvement in social responsibility in the face of a changing world, and with this official postgraduate, it becomes the only Faculty of Medicine of a public university that offers a study of this type. So, since the 2017–2018 academic year,

offered between the UAH and the humanitarian action organization Doctors of the World, there is an official blended 90 ECTS master's degree that uses the Blackboard platform. A video on the essence of the study can be seen at the following link https://www.youtube.com/watch?time_continue=1&v=OJCqvXDoA0k.

Ahead, 2260 hours of training—spread over a year and a half—divided into ten modules (8 modules of 8ECTS with modular internships + a module of external internships in the field of 14ECTS+ a TFM module of 16ECTS) in which different entities collaborate. The study plan, teaching guides, evaluation of the contents, schedules, teachers, commissions, academic and quality, quality management, etc., appears in the link of the official page of the postgraduate Service regarding University Masters https://www.uah.es/es/estudios/estudios-oficiales/masteres-universitarios/Accion-Humanitaria-Sanitaria/. From the study we have also developed an external website that can be consulted at the following link https://master-universitario-en-accion-humanitaria-sanitaria-muahs8.webnode.es/.

1.1 The health humanitarian action master degree

The humanitarian sector has grown enormously over the past two decades, and some studies reflect (only those in the English language) an increase over the last 20 years in postgraduate studies in humanitarian action, called Masters of Humanitarian Assistance (MHA) that offers differences in coverage, but there is no agreement on core curriculum or pedagogy across humanitarian studies courses [17].

We offer a Master's program that supports the development of humanitarian action at the academic level with the intent of creating health workers with a high level of professionalism, ready to be deployed with governmental and non-governmental organizations. The educational structure is based on a multidisciplinary and competency-based approach. Learning takes place through a combination of traditional and innovative educational methods. The didactic approach utilizes a self-directed e-learning curriculum. In the e-learning phase, students are involved in virtual team-working exercises and learn at their own pace under the guidance of tutors. Students meet peers and faculty, attend lectures, participate in debates, and engage in complex simulations. One of the main strengths of our Master's program is the presence of members with field experience in humanitarian large-scale emergencies. The face-to-face practices that are carried out in each module work on and delve into various aspects of the reality that student will encounter when they carry out their external practices in the field. Students make their field practices in those countries in which Doctors of the World have active health programs. Finally, the Master's degree is awarded upon the successful completion of an online proctored examination and upon the defense of an original Master's thesis, with the expectation of publication in a peer-reviewed journal.

Specifically, we consider it necessary to dedicate a space to the description of the contents divided by three semesters:

- First semester: Module I–Module IV

- Second semester: Module V–Module VIII

- Third semester: Module IX–Module X

Module I: The basic principles of the bodies of law that are related to humanitarian action are discussed. In order to understand both the ultimate causes and the

consequences of emergencies, the international geopolitical situation in relation to conflicts and human crises is analyzed, and both causes and consequences are discussed. This module studies the different international organizations that act in a humanitarian crisis and how coordination occurs between them.

Module II: The basic minimum requirements are discussed to respect the right to human dignity in health and its determinants through the Sphere Project, the need for participation, and the principle of doing no harm with the Core Humanitarian Standard. Based on this concept, the fundamental contents of Public Health in Humanitarian Action are developed, both in relation to the study of the health context and common, acute, and chronic pathologies, which manifest themselves in an emergency context.

Module III: The fundamental contents of medical assistance in Humanitarian Action are developed, evaluating the existing local health system and intervening in its consolidation. It focuses on the different aspects related to primary, secondary, and tertiary specific processes for the management of nutrition problems, mental health and psychosocial well-being, sexual and reproductive health, emergency care in situations of multiple victims, and surgical interventions.

Module IV: The fundamental contents on epidemics are developed, both at a general level and those specific, in relation to interventions; everything that concerns the development of vaccination campaigns is studied, and the particularities of assistance in emergency situations caused by natural or anthroponotic catastrophes are focused.

Module V: The fundamental contents of the project cycle in emergency phases are developed, as well as the management and the different types of financing of the projects.

Module VI: The basic contents of logistics in a Humanitarian Action intervention are developed, framing them in three blocks: knowledge of the Security Management System and its components, the supply and supplies cycle, the different external communication strategies, and the internal necessary to work on emergency projects.

Module VII: The future perspectives of humanitarian action are discussed in terms of political implications and access to vulnerable populations, as well as the millennium development goals (MDGs) and their transition toward the sustainable development goals (SDGs) and the 2030 Agenda in terms of challenges in the health sector. A review of official development assistance (ODA) in health is carried out.

Module VIII: The fundamental contents are developed in relation to recovery, resilience, empowerment, participation, and post-emergence sustainability.

Module IX: External internships are carried out in the field in the camps for displaced persons, and for this, they have field tutors. In those years students have implemented their training in different countries in which work Doctors of the World.

Module X: It is dedicated to the development and defense of the Master thesis that consists of carrying out research work, writing a scientific report, and presenting it before a court. The Master's thesis is framed in the work topics of the different teachers participating in the Master's. The necessary means (space, instrumentation, materials, bibliography, and access to databases) and the advice of its director, doctors belonging to the academic staff of the Master are provided. Students will have an adequate, academic and professional supervision, and with the recognition and protection of the intellectual property of the Final Master's Project.

The work developed allows in the future to tackle more ambitious projects such as the doctoral thesis or developing professional activities in the academic, research, health, or humanitarian action field. The training activities and evaluation methodologies are appropriate for a Master's Degree with a humanitarian health profile, which has sufficient and adequate coordination mechanisms, and the admission criteria are adequately applied.

The degree has an Internal and External Quality Assurance System whose structure is effective and useful for promoting quality and allows for the identification of strengths and weaknesses, as well as proposing improvement actions to reduce or eliminate them. The resources of spaces and equipment are adapted to the number of students, the training activities, and the teaching organization. Mobility is guaranteed since the centers (Alcalá University and Doctors of the World) have the necessary infrastructures to eliminate architectural barriers. In addition, the necessary adaptations are carried out to favor the inclusion of enrolled students with disabilities. The Alcalá University Guidance Service offers students the necessary support and advice, both academic and work. Likewise, students have the necessary tools and infrastructures to achieve learning outcomes, both theoretical and practical.

The training activities, the teaching methodologies, and the evaluation systems and instruments are oriented toward the effective achievement of student learning results. The implemented study plan, with its corresponding subjects, adequately covers the competencies of Spain ministerial order CIN 352/2009, and the learning results satisfy the Spanish qualifications framework for higher education (SQFHE) Master's level.

Another important question is the evaluation of the teaching learned. There are very few examples of health training assessment in developing countries such an undertaking faces a number of difficulties concerning the problems inherent to assessment, the particular and unstable nature of the environment, and the problems associated with humanitarian action and development aid. It is difficult to choose between a formal and a natural approach. Indeed, a dual approach, combining quantitative and qualitative data, seems best suited to a variety of cultural contexts of variable stability. Faced with these difficulties, a criteria-based, formative, quality-oriented assessment aimed at improving teaching and learning methods should be able to satisfy the needs of training professionals [18].

Regarding the results of the subjects, they indicate a high performance by the students, who also value positively the usefulness of the subjects and the coherence of the evaluation systems. The performance, efficiency, and success rates in the subjects are very high, and the satisfaction of the students is very important in two very important areas: the teaching quality of the professors and the facilities and infrastructures for training and carrying out external practices. All the good results are reflected externally with the awarding of the prizes in 2019 for the best postgraduate study and the best TFM defended in gender violence.

Another question is that professionals carry out their humanitarian action work in the field is related to transparency in the aid impact assessment and evaluation: this requires serious thought because who is evaluated? Who evaluates? And how is it evaluated? In principle, organizations are evaluated by partners, not by beneficiaries, who are usually the poorest sectors of the population (war victims, refugees, etc.), people who are not satisfied with their conditions and may not agree with the help received, as well that then, can the evaluators ignore the opinion of those who receive help? [19].

As for who evaluates, many times they are specialists who try to develop general rules theoretically according to Western standards, not adapted to local contexts. Some organizations, since those organizations with bad practices, avoid being evaluated because they have something to hide. Obviously, it is more difficult to hide bad practices when working in democratic contexts [20].

In addition, everyone is interested in positive reviews of their activities. The aid agencies, for their image of efficiency, help a lot in recruitment campaigns of funds. Governments of donor countries because this allows them to validate the approval of

their projects. Evaluators for their self-evaluations. Some authors comment that when asking the aid workers themselves, it is not easy to get information on these issues; they are professionals and all know each other. Volunteers are afraid of reprisals or losing their jobs. If aid recipients are asked questions related to the corruption or misappropriation of funds, they speak little because of the discontinuation of programs, and if you ask aid funders because they do not want to hear talk too much about the failures of the programs they fund [21, 22].

Regarding how it is evaluated, the different professionals comment that the indicators of the evaluation forms are complex and do not capture all needs, so the organizations prefer to work with statistical data, which do not reflect the social impact of the help. Aid organizations usually promote qualitative analysis that pleases donors to insist on successes, hide failures, and exaggerate positive impacts on poverty [23].

Many issues still need to be improved but also many lessons learned. And perhaps, as always, the most important thing is the prevention mechanisms. so some authors propose to follow a series of steps that "a priori" seem interesting due to their simplicity in the prevention of these conflicts: (i) a public consultation, capable of identifying the needs of the population and what can be done at the governmental level or from the local administration of a country, (ii) a decision-making process based on the above reasons. In this sense, the author proposes the figure of an "ombudsman" capable of arbitrating and making final decisions, (iii) publicizing decisions, (iv) a constant review while working in the field and after completing the project, and (v) surveillance through regulatory systems that ensure that all conditions are respected [24]. For an appropriate evaluation, specific and quality training is needed.

In this sense, professional quality training in different skills related to the complex world of humanitarian action will position governmental and non-governmental agencies in the best possible scenario to cover a quality action. This is our greatest wish.

2. Conclusion

Humanitarian crises represent a significant public health risk factor for affected populations, exacerbating mortality, morbidity, and disabilities and reducing access to and quality of health care. The international humanitarian community, in responding to international calls for improved accountability, transparency, coordination, and a registry of professionalized international responders, has recently launched a call for further professionalization within the humanitarian assistance sector, especially among academic-affiliated education and training programs. So, in line with other authors, we argue for the professionalization of disaster medicine and public health as an essential discipline in support of global public health security, and we proposed a Master. The professionalization movement endorses a standard route to certification through the completion of a competency-based curriculum, demonstrating competency through examination or experience to produce learning. These programs devise certification criteria for entry, mid-level, and higher-level candidates who serve in domestic and global humanitarian crises. The development of a core curriculum that sets the basis for knowledge and capabilities is required by the increasingly complicated humanitarian world.

Conflict of interest

The authors declare no conflict of interest.

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Section 7

Environmental and EcoSocial Work

Nature as a Wellbeing Predictor: Perceptions and Guidelines to Enhance Ecosocial Intervention with Older People

Helena Luz and Vanessa Nunes

Abstract

Western societies are experiencing a reconfiguration of their demographics expressed in an increasingly aging population. A crucial element for one's well-being results from the interaction with multiple life events, suggesting that engagement with nature can stimulate well-being in older adults and that knowledge about interventions that enhance this relationship must be deepen. The study sought to understand the relationship between well-being and nature based on the perspective of older adults and to map strategies highlighted by experts and professionals in the field of aging, which facilitate the apprehension of nature's dimension for supporting ecosocial practices of social workers. For so, a qualitative exploratory study was developed based on 10 interviews with older people conducted in a "go along" format method and an online focus group with 8 participants (experts and professionals).

Keywords: well-being, nature, older adults, ecosocial work, practice

1. Introduction

Population aging is a megatrend in the twenty-first century, with societies on a global scale experiencing a Longevity Revolution [1]. Globally, the population aged 65 or over will tend to increase from 10% (771 M) in 2022 to 16% in 2050 (1.6 B) [2], being expected that several countries will assume characteristics of hyper aging, as is already the case of several European countries, including Portugal [3]. The accelerated pace of population aging as well as increased longevity configure crucial challenges that have been at the basis of proactive frameworks designed to enable older adults to remain independent and to sustain their quality of life. In 2020, the World Health Organization and the United Nations committed to the Decade of Healthy Aging (2021–2030), assuming that it is "the process of developing and maintaining functional capacity that enables well-being in old age" ([4], p. 10). Functional capacity results from the combination of the individual's intrinsic capacity with the environment (e.g., natural) in which they live and the way they interact with it. Natural (or physical) environment configures the space/habitat that human beings share and in which

they interact with other living beings (e.g., plants, animals). The relevance of nature to active and healthy aging has been stressed by research [5], pointing to studies that engagement with nature and spending time in natural surroundings has positive health outcomes regarding elders [6–9], producing wider gains in well-being [10].

As a broad concept, elders' well-being relates to multiple domains, such as mental and physical good health [11] and positive effects (e.g., cognitive, spiritual, emotional), resulting from the interaction with natural elements (e.g., plants, pets, animals) [12] or when one is surrounded by a natural environment [11, 13]. Also, the literature informs that participating in proximity activities to nature can influence autonomy, capacity, and a sense of belonging and of purpose [7] and that the natural environment can generate social interaction in adults [11, 14].

Despite the positive effects that nature has on well-being, knowledge about specific kinds of active interaction with nature and certain natural settings that are valued by elders must be deepened, mainly via a social work lens. As Heinsch pointed out, the importance of the physical environment/non-human nature to well-being has been under-researched and underutilized by social work. Over the years, the notion of environment in this field of knowledge focused only a social dimension, in which the individual(s) was/were inserted, namely aspects related to housing, finances, access to services, geographical location, health services, and cultural traditions [15], excluding the physical/natural environment [15–17]. However, it was with the influence of systemic thinking in social work and with the global visibility of the environmental problems/environmental crisis inherited from modern societies (1970s onwards) that the person-in-environment approach acquired renewed centrality [17], coming to encompass, taking into account the impacts of climate change, the physical/natural environment rather than focusing predominantly on its socio-cultural, economic, and/or political environments, which was the case in its more traditional form [16–24].

With the turn of the millennium, issues related to the physical/natural environment have gained renewed prominence within social work, due to the worsening climate crisis and the eco-vulnerabilities associated with it [16], which increased the number of scientific production and theoretical approaches [24–30] advocating the centrality of environmental/nature issues and sustainability (the search for a balance between the economic, social and environmental dimensions), as a guiding element for the profession's practice "confluent with social transformation, human rights and well-being, to be preserved in the present and ensured in the future" ([16], p. 51).

The discussions about nature, ecology, environment, and sustainable development have been the basis of a new direction for social work theory and practice [31]. In theory, ecosocial work emphasizes intersubjectivity and harmonious coexistence with nature. On the other hand, the sustainability of welfare open, in practice, a range of options for including nature into social work settings.

2. Method

A qualitative framework with an exploratory focus was adopted to understand the meaning that participants attribute to their lives in interaction with their world/wider environment [32, 33] and the significance that the (natural) environment has, related to well-being factors, for individuals as well as for a holistic intervention anchored to an ecosocial basis. For so, two approaches were favored, a mobile methodology, which better apprehend the relations and participants' engagement with place and the environment [34, 35], and an online focus group [36].

2.1 Study participants and sample

The study gathered a sample of 10 community-dwelling older people (aged 65–85 years) from the central region of Portugal, of which 70% live in a rural context (city surroundings) and 30% in an urban one. The participants were men and women in the same proportion (50% each), had mostly secondary education (50%), and lived off only their retirement (80%) and in two-person households (their own person and their spouse) (60%). Also, an online focus group was conducted with eight participants from scientific and professional fields, namely four participants with expertise in the study of aging and four participants belonging to the practice domain of social work. **Table 1** presents a more detailed characterization of the study groups.

2.2 Materials

Semi-structured interviews were carried out with community-dwelling older people. The interview schedule included open questions being asked participants about (a) the importance attributed to nature and the ways in which they relate to it and (b) their views on the benefits that nature provide to their well-being in a multidimensional sense. The questions were not set in order; instead they emerged naturally during the interview. Sociodemographic data were collected from participants to understand their profile.

A focus-group interview [36] took place via the Zoom platform, which enabled overcoming challenges related to costs and location, with technology being a facilitator of active participation. Questions were defined to facilitate the discussion on what experts and professionals: (a) perceive to be important with respect to environmental challenges (e.g., climate change) and nature in relation to well-being of older adults and (b) on what they consider that nature-based social work intervention should rely on to promote enhanced well-being among older adults.

2.3 Data collection

The criteria for inclusion in the study were that participants were chronologically aged 65 years or over, lived in the community, and did not present mental/cognitive impairment. The recruitment of participants was carried out through contact with several interlocutors, individual, and/or professionals and through snowball sampling, that is, the elderly were indicated through initial informants. Participants (n = 10) were accessed on a voluntary basis from September to November 2022. The go-along method was chosen as the strategy for data collection due to its innovative and flexible way to contextualize interviews [34]. It included on-site interviews, which in the study were conducted on foot—walk-along/walking interview—during which an accompaniment of the participant in their familiar environment existed, allowing to create place-bound narratives [34] and getting people's lived experiences [35, 37]. The interviews were recorded (audio) with consent from the participants.

The focus group was composed of participants (n = 8) that were chosen on a convenience basis, considering the knowledge of the authors related to participants that better fit the study goals, in the scientific (n = 4) and practice (n = 4) fields. Participants were invited to participate by e-mail, agreed to be part of the focus group, and provided informed consent. The focus group was conducted by a moderator that clearly stated the objectives of the research, the way the group functioned, and general rules. After the participants' presentations, the exploration of the study themes began, based on a question guide [38]. This approach occurred in November 2022.

Community dwelling participants

Code	Age	Gender	Residence	Civil status	Education	Source of income	Living arrangement
1	69	M	Rural	NMP*	High	Retirement; work income	Live with partner
2	65	M	Urban	Married	High	Retirement; work income	Live with family
3	66	M	Rural	Married	High	Retirement	Live with family
4	85	M	Rural	Married	High/equivalent	Retirement	Live with spouse
5	66	F	Rural	Divorced	Primary	Retirement	Live alone
6	67	F	Rural	NMP	Secondary	Retirement	Live with partner
7	69	M	Rural	NMP	Secondary	Retirement	Live with partner
8	66	F	Rural	Widow	Secondary	Retirement	Live alone
9	71	F	Urban	Married	Secondary	Retirement	Live with spouse
10	69	F	Urban	NMP	Secondary	Retirement	Live with partner

Focus group participants

Characteristics	Overall (n = 8)
Age (min/max)	
Professionals	27/32
Experts	37/57
Gender	
Professionals	Male = 1; female = 3
Experts	Female = 4
Job	
Professionals	Social workers = 4
Experts	College professors/researchers = 4
Work field	
Professionals	Private institutions and private institutions of social solidarity = 4
Experts	Universities and research centers = 4

NMP = non-marital partnership.

Table 1.
Characterization of participants.

2.4 Data analysis

A content analysis was followed, including both inductive (data driven) and deductive (theory driven) practices. The thematic categories followed the three successive phases described by Bardin [39]. In the first phase of pre-analysis, a floating reading of the interviews was carried out; the material was organized, that is, the interviews were transcribed and combined to form the corpus of the study. In a second phase, the material was explored, leading to coding (including cutting, enumeration, and categorization procedures). In phase three, the results were processed through inference and interpretation, to ultimately determine the themes that captured the essential elements of the data set.

3. Results

We structure our findings considering each group of participants. For the community-dwelling participants, we identified five overarching thematic categories: importance of the relationship with nature; mechanisms of interaction with natural elements (plants/trees); mechanisms of interaction with animals; social involvement and participation; physical and mental health *gains* of nature. From the focus group participants emerged three themes: challenges of climatic change in natural environments and related effects on health and well-being of the elderly; the importance of integrating nature into professional practice with the elderly; professional strategies for bringing nature to intervention with the elderly.

3.1 Key findings

The content analysis identified a structure of thematic categories, the main identified dimensions being the following:

3.1.1 Community-dwelling participants

3.1.1.1 Importance of the relationship with nature

This category indicates the importance that older people attach to natural environments, how they position themselves in relation to the natural world, and how it reinforces a positive attitude toward their lives.

3.1.1.1.1 Valorization of rural environment as opposed to urban environment

> *"There is no pollution, among the trees there is no pollution, whereas in a city there is pollution" [E9].*

> *"Between a city environment and nature, I prefer nature (…), seeing the green" [E4].*

3.1.1.1.2 Assumption of nature as the source of life and part of the life cycle

> *"The relationship with nature is essential because we are a product of nature, humans can't live without nature and nature has to be respected by humans and unfortunately this is not being done" [E2].*

"(...) it's a kind of return to the origins, for me personally it's a return to the origins, I was born in the countryside and now I've returned to the countryside and on the other hand I've learnt to live with the countryside (...) a kind of continuity" [E1].

3.1.1.1.3 Encouragement of a positive attitude toward life

"(...) seeing things being born and seeing life being generated, so nature generates life, that can carry over to people on a personal level, that gives a very healthy view of life" [E4].

3.1.1.2 Mechanisms of interaction with natural elements (plants/trees)

This category describes the ways in which the elderly interact with nature, regarding walk along, gardening, and farming food.

3.1.1.2.1 Walk along nature

"I walk a lot outdoors; I like to go to places where there is vegetation and trees" [E8].

"Contact with nature and walking and observing what nature offers us allows us, from my point of view, to analyze who we are, where we come from and what we want to be" [E4].

3.1.1.2.2 Gardening/ farming

"I also do gardening, because I like to put my hands in the soil and the smell of the soil makes me feel good, I feel good with the smell of the soil" [E6].

"Flowers are the colour of life (...) I'm always moving around (...) when to change the pot (...) the type of soil, we want the flowers to bloom, don't we, it's very beautiful (...) [E10].

"The only activity I do is farm a backyard, cultivate a small backyard where I have a subsistence economy" [E5].

"I have my own agricultural products: potatoes, onions, a variety of fruit depending on the season, aromatic herbs... I plant fruit trees, flowers (...)" [E1].

3.1.1.3 Mechanisms of interaction with animals

This category describes different forms associated with human-animal relationships.

3.1.1.3.1 Owning pets and/or domestic animals

"Pets, chickens, ducks, dogs, cats..." [E7].

"Pets, I have all those that life has disowned, I take care street cats, the so-called disowned cats (...) abandoned cats that live on the street" [E8].

3.1.1.3.2 Protection of animals

> *"I have enormous respect for animals, not protecting them is not protecting nature (…) because they are in fact much better than us, because they can preserve nature, they don't destroy nature, they follow their instincts although some may be considered predators, they can preserve nature better than humans, we are the real predators of both animals and nature itself" [E3].*

3.1.1.3.3 Animals as a source of companionship

> *"(…) they keep me company, they give me more well-being, I feel psychological comfort, I feel their affection for me too and I like that" [E10].*

> *"Animals establish a relationship of affection with me that is often far better than that of humans, they don't ask for anything, they don't demand anything, and they are always willing to say thank you for the little they are given" [E8].*

> *"Animals are able to give a lot to human beings with very little, in fact an animal that is part of a family is part of that family, in relationships of affection animals transmit, without speaking, much more than what humans transmit by speaking" [E3].*

3.1.1.4 Social involvement and participation

This category focuses on how relationship with nature promotes social contact and participation of older people in society, helping, also, to combat social isolation and loneliness.

> *"When I go for a walk, in public gardens, I find myself talking to people that I don't know and that makes me feel very good and part of my neighborhood" [E9].*

> *"I've been taking part in an urban garden with a friend. I'd never had any contact with farming, but I felt the need, after I retired, to occupy my time and be more in touch with the 'land'. In this garden I met many people who taught us how best to cultivate the food and we helped each other. I've ended up making many unexpected friendships that I never imagined I would make." [E10].*

3.1.1.5 Physical and mental health gains of nature

This category describes the positive influences on the physical and mental health of older people coming from nature.

3.1.1.5.1 Physical health: therapeutic effect

> *"I breathe much better in nature" [E1].*

> *"In a less active phase of life, it works as a therapy, it takes care of our health (…) the outdoors, taking care of animals give us an answer to the need we have to feel good about our surroundings" [E2].*

> *"I walk, I hike, it's healthy" [E6].*

3.1.1.5.2 Mental health benefits

> *"(...) it gives me tranquility" [E5].*

> *"It helps to calm down, reduce the stress" [E9].*

> *"For me, contact with nature is very important for my head" [E6].*

> *"When I "fulfil" myself, it's mostly because it satisfies and fulfils me" [E5].*

> *"It's obvious that a forest gives a sign of peace, it's obvious that a forest transmits what interior calm is (...) they give to man the interior strength that he lacks" [E2].*

> *"Our forests, our trees, our rivers, our lakes, our natural springs, everything that surrounds man, as I've already said, without water there is no life and without nature, without trees, it creates an artificial environment and the artificiality of the environment in fact generates psychological and health problems, illnesses and difficulties for human beings to fit into the earth (...) so it [nature] brings well-being" [E2].*

3.1.2 Focus group participants

3.1.2.1 Challenges of climatic change in natural environments and related effects on health and well-being of the elderly

This category emphasizes the impacts that environmental problems have on elders' physical/mental health well-being.

> *"Climate change is a great problem that perturbs nature (...) affects any age group, but has a more negative impact on this age group because of the associated biological characteristics" (professional participant).*

> *"Climate change will have a major impact on the health, well-being and quality of life of elderly people" (expert participant).*

> *"Affects the elderly person in a holistic way" (professional participant).*

> *"For the elderly, it has an impact not only on physical health, but also on mental health and the rights of the older person. Associated with extreme temperatures, for example, we have the influence on chronic diseases and/or increased mortality" (expert participant).*

3.1.2.2 The importance of integrating nature into professional practice with the elderly

This category distinguishes the opportunity dimensions that nature has for practicing interventions with the elderly.

> *"(...) it's up to us social professionals to introduce the environmental issue as part of people's holistic well-being. (...) we are very accustomed to looking at well-being in terms of subsistence, physical integrity, health, and we forget that the environmental issue should be highly valued in terms of holistic well-being." [Expert participant].*

> *"Several activities can be promoted taking nature into account that contributes to their active aging"* [professional participant].

> *"Nature is embedded in life experiences of old people (...) they felt positive emotions when they are in contact with"* [professional participant].

3.1.2.3 Professional strategies for bringing nature to intervention with the elderly

This category reports a set of strategies, from an ecosocial diagnostic assessment to nature-based socio-therapeutic interventions, for integrating nature into social interventions with elderly people, which promote their health and well-being.

> *"This means that we must integrate into our practices new modalities or new tools for relating to people, new therapies, and new ways of intervening with people, and this starts with the way we get to know people; the diagnoses themselves have to integrate nature dimensions, the so-called Eco diagnosis (...)this can then be worked on in the individual plans in the institutions.* [Expert participant].

> *"My institution has a therapeutic garden. I have a habit of talking to the users in this space"* [Professional Participant].

> *"We often organize walks and picnics in green spaces for the elderly of our community."* [Professional Participant].

> *"We have been promoting therapies that allow contact with nature, for instance, contact with animals, walks in green spaces, community gardens, and we have seen that in the case of older people it is extremely beneficial in terms of their physical and mental health and to combat social isolation."* [Professional Participant].

> *"(...) everything from horticultural therapies (...) to holistic therapies (some people adopt yoga) (...)"* [Expert participant].

> *"The bonds with animals can mitigate problems like loneliness (...) have a stimulation effect (...) enhances communication, improve social functioning* [Expert participant].

4. Discussion

This study offers an understanding on how community-dwelling older people conceive their lives in interaction with nature and its connection with their holistic well-being. The findings reveal that the importance of elders' relationship with nature relies on the valorization of rural environment, on the assumption of nature as a source of life and as part of the life cycle, and on the encouragement of a positive attitude toward life. As it was examined, preferring a country life and having preferences for nature (e.g., forests) seem to be shared by elderly people [40], suggesting that living close to large green spaces reflects an important issue of general perceived health [41]. Thinking about nature's importance might have a strong correlation with past life, reinforcing studies [40] that natural experience in childhood affects the perception of returning to nature by old age and that exposure to natural environments,

such as gardening, besides its psychological, physical, and social benefits, favors an attitude of reminiscence about the past and can evoke memories of childhood [42]. Regarding attitudes toward life, contact with nature leads to a better response to stressful life events and nature relatedness can predict happiness indicators, as Freeman and colleagues [5] informed in their discussion.

Complementarily, the present research indicates that walks along nature are an enabling mechanism for interaction with natural elements (plants/trees), which is in line with studies [7, 11, 43] that signalize the advantages of walking and its benefits for physical activity and cognitive function.

It was found that nature-based interaction also occurs by considering animals as part of the natural system. In this sense, pet and/or domestic animal's owners have a concern for the protection of animals and benefit from them as a source of companionship, representing ways for improving the lives and well-being of old people, as studies argue [11, 12, 44].

Our results evidenced that social involvement and participation can be enhanced by engagement with nature, assuming a preventive effect to minimize social isolation and loneliness. At this point, several studies can be found about the positive influence of nature/green spaces in mitigating loneliness, which come from time spent visiting green spaces [45]; Astell-Burt and colleagues also reported [46] in their systematic review that various studies established a positive association between green space exposure or experience and less loneliness. In what concerns social isolation, nature engagement that occurs through community gardens enhance experiences that lead to multiple outcomes such as reduced social isolation [7].

The study intended also to map strategies that incorporate a nature's dimension to distinguish ecosocial practices of social workers. At this level, experts and professionals pointed out that natural environments have been challenged by effects of climate change, which influences the health and well-being of the elderly. Indeed, it is recognized that changing climate is not only a major problem that affects human health, especially the most vulnerable, namely the elderly [16, 47], but also, it can deteriorate the human-nature relationship [25, 48], penalizing this group. Additionally, these participants stress that the importance of integrating nature into professional practice with the elderly relies on the assumptions that it contributes to holistic well-being [7, 9, 10, 49], to active aging [5, 6] and to supporting positive emotions [11, 13], which configure outcomes to which research has been giving increasing attention. Regarding professional nature-based strategies, experts and professionals highlighted those related to: (a) eco diagnosis (diagnoses that integrate nature dimensions), (b) organizational nature environments (therapeutic garden, picnics in green spaces), and (c) *therapies* (horticulture, yoga, community gardens, walks in green spaces).

As research suggests, it is crucial that social workers can deeply acknowledge nature as a predictor of elders' well-being, integrating nature into their daily practice in its different procedures, such as eco assessment/eco diagnosis and developing interventions based on nature [11, 16, 22, 23, 43]. At the level of social work practice, settings can be enabling places to improve contact with nature, either organizational or community ones, both reflecting challenges that are of the utmost importance to ecosocial work commitments and that future research should embrace.

Although the study contributes to emphasize nature-based approach in social work that benefits from "walk-along" methodology, allowing a better understanding of places and lived experiences, this being a strength of our research, we believe that if two focus groups would have been constituted, with more homogeneous

participants, it would have allowed more oriented reflections/discussions on issues related either to knowledge for its better use in public policies or to discuss priorities and innovations in social intervention domains.

5. Conclusions

Population aging is currently one of the biggest social and economic challenges, so we need to understand how we can best promote healthy and active aging as a response to these challenges. An integrative approach to the natural dimension, as demonstrated in the study, reveals broad benefits for the elder population. The importance of the relationship with nature, in its different expressions (e.g., walking along, gardening/farming, interacting with animals), for health (physical/mental) and for wellbeing of the elderly, in a holistic understanding is recognized both by community-dwelling participants as well as by experts and professionals. The integration of nature into social interventions with the elderly shows to be highly opportune and relevant, as it seems to be a predictor of their well-being from an integral and global perspective, fostering healthy and active aging. Strategies for nature-based interventions with the elderly, revealed by experts and professionals, denote the growing importance of an ecosocial perspective in social work practice, which calls for deeper research.

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Chapter 18

Cultural Competence in Social Work Practice: Navigating Diversity and Context in South Africa

Livhuwani Bethuel Ramphabana and Selelo Frank Rapholo

Abstract

Although it is a collective effort to promote and preserve the social welfare of societies, social work has been at the forefront in fulfilling such intentions in a more coordinated and structured fashion across the globe. The process of providing social services is far more complex than it is often imagined as the 'context' of indigenous communities should be an avenue through which social issues are acknowledged and understood before determining frameworks and methods to which appropriate interventions may be employed. Just like many other countries in the global south, South Africa is still in the process of reforming its social work approaches to ensure that they are appropriate and responsive to the human needs of the South Africans, without separating them from their histories, cultures, practices, and beliefs. The reformation is narrowly straightforward as social work education and practices have largely been influenced and informed by Western scholarships due to colonisation. As such, decolonisation of the social work education and practice in South Africa remains a mountain that should be belligerently climbed. Guided by the Afrocentric perspective, this chapter discusses cultural competence as a special flavour to strengthening interventions that reverberate and resonate with the South African context. Recommendations to the social work education, research, and practice are made.

Keywords: cultural competence, social work practice, south African context, Afrocentric, indigenous communities

1. Introduction

Social work plays a crucial role in promoting social welfare by addressing the multifaceted challenges individuals, families, and communities face. The purpose of the social work profession is to assist individuals, groups, and communities to address life's challenges and enhance wellbeing [1–5]. Social work goes beyond just addressing individual challenges; it seeks to transform communities and societies for the better. Its significance lies in the professional commitment to improving the quality of life for vulnerable and marginalised populations, advocating for social justice, and fostering

positive change in society. One key aspect of effective social work is the need for a deep contextual understanding of the complex factors influencing people's lives. In other words, the effectiveness of social work interventions heavily relies on a deep understanding of the specific contexts in which people live. Without recognising the unique dynamics of each situation and context, interventions might miss the mark or unintentionally perpetuate harm [6–9]. This is why contextual understanding is vital - it allows social workers to tailor their strategies, respect cultural nuances, and create meaningful change that truly uplifts and empowers individuals and communities.

Although the Afrocentric perspective recognises and advocates for centering stories, histories, cultures and practices of Africans, traditional social work models and approaches often originate from Western perspectives, which may not always reverberate and resonate with the cultural realities of Africa. The legacy of imported theories and concepts from the West continues to have a significant impact on social work education and practice in the contemporary era, and these imported models and approaches neither adequately address the socio-cultural realities of the African contexts nor provide adequate responses to current societal challenges [10–13]. The study conducted by Mabeyo, Ndung'u and Riedl [14] in Tanzania found that 85.7% of 99 social work students reported that the majority of the study materials, as part of the syllabus, were based on the Western contexts. Moreover, most of social issues have not been addressed mainly because the social work curriculum has been designed using western perspectives and contexts which present a mismatch with those of Africans [15]. In the South African context, Turton and Schmid [13] aver that social work interventions are often ineffective because they are culturally inappropriate and are not aligned with the local needs.

This concerning gap highlights the significant need to incorporate local perspectives, empowering communities to define their own needs, and advocating for more inclusive and context-sensitive approaches in the social work practice, education, and research. Hence there is a need for decolonisation in social work practice, education, and research as it helps to ensure that interventions are respectful, relevant, and responsive to the complex challenges of the contemporary realities. Decolonisation seeks to incorporate indigenous knowledge, practices, and worldviews into social work education and practice, making interventions more culturally relevant and effective [16–18]. Decolonising social work education and practice aligns with the broader goals of social justice, human rights, and cultural sensitivity.

In the center of the determination and fortitude to decolonise social work, exists cultural competence which embraces and acknowledges diversity and human rights of the citizens from different contexts. Cultural diversity in South Africa is a defining characteristic of the nation, stemming from its complex history, multicultural society, and the coexistence of numerous ethnic groups, languages, and traditions. South Africa is home to a multitude of cultural identities, including but not limited to Venda, Tsonga, Pedi, Zulu, Xhosa, Sotho, Tswana, Afrikaans, and Indian. Each of these cultural groups has its own unique norms, values, languages, and worldviews. This diversity carries profound implications for the need for cultural competence in social work practice. Cultural competence refers to the ability of social workers to effectively understand, respect, and respond to the cultural beliefs, values, practices, and needs of individuals, families, and communities they serve [19–22]. It involves developing a set of knowledge, skills, and attitudes that enable social workers to work sensitively and respectfully with people from diverse cultural backgrounds.

Cultural competence is a foundational and ethical aspect of social work practice in South Africa. It enhances the effectiveness of interventions, promotes social

justice, and ensures that social workers can meet the diverse and complex needs of their clients while respecting their cultural identities and contexts [23, 24]. Cultural competence seeks to locate practice within local culture, privileging local languages, knowledges and helping strategies [25–27]. It is against the above background that this chapter discusses cultural competence as a special flavour to strengthening interventions that reverberate and resonate with the South African context.

2. Historical context of social work in South Africa

The historical development of social work in South Africa is closely intertwined with the country's colonial history and subsequent struggles for social justice and equality [28–30]. Social work was introduced in Africa by colonial administrators, missionaries and industrialists, who had little concern for the wellbeing of the indigenous people [31–34]. The impact of colonisation on social work education and practice has left a lasting imprint on how the field has evolved. Before the arrival of European settlers (before 1652), indigenous societies in South Africa had their own systems of communal support and care. These societies practiced forms of social welfare based on kinship and community networks, addressing the needs of their members. These indigenous practices were deeply connected to cultural and spiritual beliefs.

The arrival of Dutch settlers (1652–1806) marked the beginning of European colonisation in South Africa. During this period, social welfare efforts were minimal, and assistance was often provided through religious institutions. The Dutch East India Company established a colony at Cape Town, and religious entities took the lead in providing charitable services. The British takeover (1806–1961) brought about significant changes to the social landscape. The emergence of industrialisation, urbanisation, and racial segregation resulted in the deepening of social inequalities. Missionary societies, influenced by British philanthropy, played a role in providing welfare services, especially for white populations [35, 36]. The apartheid regime (1948–1994), officially established in 1948, institutionalised racial segregation and oppression. The impact on social work was profound. Apartheid policies created deep divides among different racial groups, with limited social services for non-white populations [37, 38]. Social workers were often complicit in implementing these unjust policies. This was contrary to the prescripts of the International Federation of Social Workers (IFSW) that social work should be aligned with its human rights foundation that offers people security and development while upholding their dignity [39]. Understanding the historical background and transitioning footprint of the profession is important in this chapter in that it offers a foundation on which one can reflect on how culture and traditions of the indigenous communities, more especially in South Africa, dissipated and got camouflaged. Such understanding offers a framework for decoloniality in the South African cultural contexts.

3. The nexus between decolonisation and cultural competence

Decolonisation in social work is about reimagining and transforming the field to be more inclusive, equitable, and respectful of diverse perspectives. Decolonisation in social work involves a multifaceted process of challenging, transforming, and reshaping the field to address the historical, cultural, and systemic legacies of colonisation [40–43]. It seeks to address the historical and ongoing impacts of colonisation on

social work education, practice, and policy. It aims to shift the dominant paradigms, narratives, and practices in social work towards a more inclusive, equitable, and culturally relevant approach [41, 44, 45]. Decolonisation is a continuous and dynamic process that challenges social work practitioners, educators, and researchers to actively confront the historical and contemporary impacts of colonisation.

By adopting a decolonial lens, social work can better contribute to a more just, equitable, and culturally sensitive approach to addressing complex social issues. Decolonisation encourages social workers to approach their practice with cultural humility and sensitivity. This means recognising that their own perspectives might be limited and that there is always more to learn from the cultural contexts they engage with. Social work education and practice in South Africa often reflected Western colonial paradigms and perspectives. Imported models and theories, often Eurocentric, were emphasised in training programs, potentially ignoring local context and cultural realities. Thus, it is the authors view that cultural competence should be appreciated as the tool to decolonise the profession so that it renders and respond to the local issues, informed by local events, experiences, cultures, traditions, and perspectives. In a study by Prinsloo [46], social work students in some South African universities are provided the opportunity to gain knowledge regarding rituals and practices such as, but not limited to, relationship building rituals, funeral rituals, methods of communication, management of marital conflicts in traditional families, the use of eye contact in relation to respect, and norms around speaking with older people. Furthermore, incorporating Ubuntu as a philosophical and ethical concept in social curricula could provide students with a more holistic understanding of human behaviour, community dynamics, and social justice.

4. Zooming into the value of cultural competence in social work

Cultural competence in social work practice is not just a skill but a fundamental necessity in the diverse cultural landscape of South Africa. It enables social workers to provide effective, ethical, and respectful services that honour the cultural identities and contexts of clients, ultimately contributing to positive social change and improved well-being [47–49]. There are ways in which cultural competence can be used to add value to the social work practice in order to meet the needs of the South African clients. These ways are expounded below.

4.1 Nurturing cultural rights as recognised in the constitution

The South Africa's post-apartheid Constitution, adopted in 1996, recognises cultural rights as fundamental human rights. These rights are enshrined in the Bill of Rights, which is a cornerstone of the Constitution. The Constitution acknowledges the importance of respecting, protecting, and promoting the rights of diverse cultural communities, including indigenous groups. It explicitly protects and promotes cultural diversity within the country. The recognition of cultural rights as fundamental human rights in South Africa's Constitution highlights the country's commitment to respecting and preserving the cultural diversities [50]. As such, cultural competence aligns with these legal and ethical principles by ensuring that social workers respect and uphold clients' cultural rights.

South Africa's diverse population, with various ethnicities, languages, and cultural practices, makes it essential for social workers to be culturally competent. This may

involve advocating for cultural recognition and sensitivity within social policies and practices. Cultural competence promotes inclusivity and equity by ensuring that social services are accessible and beneficial to all, regardless of their cultural or racial background [51, 52]. In other words, it is important to note that cultural competence in social work is not a passive acknowledgment of cultural rights but an active, ethical, and practical commitment to upholding the constitutional rights in everyday practice. The importance of cultural sensitivity, competence, and respect for diversity is a central topic in social work practice as expressed in international conventions of social work [39]. As such, social workers should vehemently play a role in translating the constitutional ideals of cultural recognition and respect into tangible benefits for the diverse communities they serve.

4.2 Respecting cultural diversity: consider internal dimensions

Even within cultural groups, there can be significant diversity. Cultural competence enables social workers to respect and address these internal diversities, avoiding stereotypes and assumptions. Recognising and embracing the internal diversity within cultural groups is an integral facet of cultural competence in the realm of social work. While cultural competence traditionally focuses on understanding and respecting the customs, values, and perspectives of distinct cultural groups, it goes a step further by acknowledging that no culture is monolithic [53–55]. Even within a seemingly homogenous cultural group, such as the Venda community in South Africa, variations abound based on factors like geography, age, and socioeconomic status. This acknowledgment challenges social workers to transcend simplistic stereotypes and assumptions that can arise when working with clients from a specific cultural background. For instance, within the Zulu culture, which is historically rooted in the province of KwaZulu-Natal but has a diaspora throughout South Africa, variations may be significant. Clients from rural Zulu communities might have different life experiences, values, and needs compared to those living in urban areas. Likewise, a young Zulu-speaking professional in a city may have vastly different priorities and challenges than an older Zulu-speaking individual residing in a rural village. It is important to understand that clients have the right to define their own cultural identities and preferences; therefore, social workers should not impose a blanket or one-size-fits-all approach. Allowing clients to exercise their rights does not only honours the individuality of each client but also builds trust and rapport, ultimately leading to more meaningful and successful interventions within the diverse cultural landscape of South Africa.

4.3 Exercising cultural sensitivity

South Africa's cultural diversity extends beyond language to encompass various traditions, rituals, and customs. Cultural competence involves being sensitive to these cultural nuances [27, 56]. Social workers need to understand the cultural significance of events such as initiation ceremonies, ancestral rites, and traditional healing practices to provide appropriate support and respect for clients' choices. Social workers operate within a context where these cultural nuances play a pivotal role in the lives of their clients. Therefore, they need to be attuned to the significance of events like initiation ceremonies, which mark important transitions in the lives of many South Africans, or ancestral rites, which are deeply rooted in honouring and connecting with one's heritage [57]. One cannot underestimate the importance of understanding traditional healing practices within the context of cultural competence. For many

South Africans, these practices are not just alternative forms of healthcare but profound expressions of cultural identity and spirituality. Thus, it is important to understand that clients may choose to engage in traditional healing alongside conventional healthcare, or they may opt for modern interventions. Cultural competence enables social workers to facilitate informed decision-making while upholding the dignity and choice of their clients.

4.4 Strengthening effective assessment for appropriate interventions

Cultural competence is vital for conducting culturally sensitive assessments and developing culturally appropriate intervention plans. It ensures that assessments consider the unique cultural factors that influence clients' lives. Culturally sensitive assessments are the first crucial step in understanding a client's reality [22]. It means going beyond the surface and delving into the cultural factors that influence their lives. These assessments recognise that cultural backgrounds impact not only how individuals perceive their issues but also how they conceptualise solutions. A culturally competent social worker should understand that what might be seen as a problem or challenge in one cultural context might be viewed entirely differently in another. For example, concepts of mental health and well-being can vary significantly across cultures, impacting how individuals express their distress and their willingness to seek help. Moreover, culturally sensitive assessments acknowledge that individuals may not always conform to cultural stereotypes. Culture is dynamic, and people often blend aspects of their cultural identities with contemporary influences. This complexity demands a nuanced understanding of cultural factors that can shape a person's identity and needs. By recognising this, social workers avoid making sweeping assumptions about clients based on their cultural backgrounds, thereby providing more accurate and respectful assessments.

Once the culturally sensitive assessment is complete, the next crucial step is developing culturally appropriate intervention plans. This means tailoring interventions to align with a client's cultural values, beliefs, and preferences. It respects the notion that interventions that work in one cultural context may not be effective or acceptable in another. For instance, a Western-centric therapeutic approach might prioritise individualism and self-expression, but this might not resonate with a client from a collectivist culture where community and family harmony are paramount. Cultural competence in intervention planning also recognises the importance of involving the client and their community in the decision-making process [58]. Clients are not passive recipients of services; they are active agents in their own well-being. Culturally competent social workers engage in open dialogues with clients, seeking their perspectives on what interventions align with their cultural values and aspirations. This collaborative approach fosters a sense of ownership and empowerment, critical components in achieving positive outcomes. Furthermore, this approach increases the likelihood of interventions being successful and sustainable.

5. The role of afrocentric perspective in social work decolonisation

The Afrocentric perspective plays a pivotal role in advancing decolonisation efforts and promoting culturally responsive interventions within social work practice [59–61]. This assertion is deeply rooted in its transformative potential and critical relevance, especially in the context of South Africa. This perspective fundamentally challenges

the pervasive colonial and Eurocentric ideologies that have historically dominated social work and various academic fields. It serves as a counter-narrative to colonial epistemologies, dismantling the Eurocentric frameworks that have shaped knowledge production within social work. By doing so, it empowers indigenous voices and narratives, actively contesting the systemic biases ingrained in colonial knowledge systems.

In a South African context, where the legacy of apartheid and colonialism is still deeply felt, this perspective offers a much-needed pathway to healing and transformation [11, 27, 62, 63]. The Afrocentric perspective places a strong emphasis on centering indigenous knowledge, cultural practices, and traditions. It recognises these elements as invaluable sources of wisdom and solutions to contemporary social challenges [64]. By foregrounding indigenous perspectives and experiences, this perspective reaffirms the dignity and agency of marginalised communities, giving them a voice and agency in shaping their own destinies. In South Africa, with its diversity of cultures and traditions, this recognition is essential for decolonising social work, as it positions indigenous perspectives at the heart of interventions. As such, it is the authors that the Afrocentric perspective stands as a powerful force in advancing decolonisation efforts and promoting culturally responsive interventions within social work practice.

6. Recommendations

Based on the discussions in this chapter, the importance of cultural competence and its dynamics were evidenced – and therefore, leading to the recommendations for the social work education, research, and practice. The recommendations are explicated immediately below.

- A reformed curriculum must provide students with a comprehensive understanding of the diverse cultural groups in South Africa and their unique needs. Curriculum reform and a continued commitment to promoting inclusivity and cultural diversity are essential for creating an equitable and culturally responsive social work education in South Africa.

- Incorporating local case studies and examples into the curriculum is essential. Students need exposure to real-world scenarios that reflect the complex sociopolitical, economic, and cultural issues that communities face in South Africa. For instance, using case studies and examples of recent disasters such as, but not limited to, floods in KwaZulu Natal (KZN) Province of South Africa, Covid-19, earth tremor in Johannesburg, pit bulls attack, and gender-based violence cases could help students assimilate and situate learning into local contexts.

- Cultural competence training is indispensable in helping social workers develop cultural sensitivity and awareness. It equips them with the skills to interact respectfully and effectively with clients from diverse cultural backgrounds.

- Conducting cross-cultural comparative studies harbours the potential to allow researchers to identify cultural variations and commonalities, helping to inform culturally sensitive interventions and practices.

- Participatory action research needs to be embraced as such research approach encourages participation from community members, which in turn, helps to

understand their issues and how they relate to such issues – and develop responsive and appropriate interventions. As such, there should be an appreciation of appropriate theoretical frameworks, both traditional social work theories and inter-cultural theories, in developing research methodologies that are relevant in achieving and advocating for the culturally sensitive and competence practice.

7. Conclusion

The discussions in this chapter emphases the importance of understanding the unique contexts of indigenous communities before implementing social work interventions. South Africa, like many other countries in the global south, is undergoing a necessary reform of its social work approaches to better meet the diverse and culturally rich needs of its people. The chapter also highlighted the challenges posed by the historical influence of Western scholarship on South African social work education and practice, stemming from the legacy of colonisation. The call for the decolonisation of social work education and practice is a compelling one, recognising that a more inclusive and culturally sensitive approach is essential for addressing the human needs of South Africans while preserving their histories, cultures, practices, and beliefs. Guided by the Afrocentric perspective, the chapter suggests that cultural competence is a valuable and necessary tool to strengthen social work interventions in South Africa. It calls for a deliberate and determined effort to bridge the gap between Western-informed practices and the rich South African context. By embracing cultural competence and tailoring interventions to resonate with the South African context, social workers can play a pivotal role in promoting social justice, equity, and well-being for all South Africans, ensuring that their cultural rights are recognised, respected, and upheld.

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Section 8

Community-Based Practices

Perspective Chapter: Structures of Thinking in Community-Based Working Culture – Renewing Social Work Practices

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Abstract

In this article, a community-based working culture is introduced, and the development of social work orientations within a socially and culturally diverse community in Finland is examined through a case study. The objective is to expand understanding of the evolution of social work, grounding it in its ethical foundations. Two authors have previously synthesized competences of community social work; here, these competences are revisited in the context of recent practice development, with a focus on deconstructing power and knowledge. The assertion is that structures of thinking are a requisite to translate competencies into action, while moral courage and a tangible scope for action are essential to transforming practices. Tailoring social work to the lived experiences and contexts of those in need is imperative to effectively respond to evolving social challenges, some of which emanate from structural injustices.

Keywords: community social work, community-based working culture, developing social work practices, deconstructing power and knowledge, structures of thinking

1. Introduction

Social work (SW) with communities is gaining importance in our individualized societies, where communal bonds have weakened [1], and not all existing communities serve as places of empowerment [2]. In Finland, community social work (CSW) was recently incorporated into the Social Welfare Act [3], with the section concerning this area taking effect in July 2023. This regulation signifies a paradigm shift in the social work discourse. On one side, community-based social work addresses the need to engage with hard-to-reach individuals and acknowledges that many social support needs are communal [4]. Conversely, community social work can also be interpreted as a response to the fluctuating legitimacy of the Nordic welfare state.

Leppänen and colleagues [4] assessed community social work competencies based on a pilot study in which a drop-in community center Kototori was established in Tampere. This pilot was part of a project titled "Enhancing Two-Way Integration through Community Work" (abbreviated as TEKO), conducted from 2016 to 2019. The researchers identified competencies such as relationship-based social work, fostering a sense of community, joint action for social change, creativity, analytical thinking, and close collaboration. They concluded that community and structural social work are intertwined; community social work necessitates moral courage to advocate for changes in existing structures when necessary [4, 5]. We build upon and deepen this discourse, investigating how the adoption of these competencies influenced community social work practices in Tampere and the wellbeing services county of Pirkanmaa.

In many Western societies, including Finland, discourses and terminologies rooted in psychology dominate both institutional practices and the broader cultural landscape [6]. Therapeutic solutions are proposed for a wide range of issues, some of which are fundamentally structural, not stemming from individual vulnerabilities [6–8]. Community social work can counterbalance the potentially harmful focus on "repairing" the individual. As Leppänen et al. [4] note, community social work operates at individual, organizational, and community levels, collectively facilitating broader structural change. Thus, community belonging and participation can be as healing and transformative as therapeutic interventions, benefiting both social service users and practitioners.

Community social work also challenges the established knowledge base of social work. Historically, in Finnish social work, the focus has been on official social work managed by municipalities and, later, welfare service counties. NGOs and other informal entities have augmented these official services, even in the Nordic countries [9]. Equipped with the competencies delineated by Leppänen et al. [4], there is potential to reshape the traditional roles and hierarchies between statutory social services, NGOs, and community members, transforming the dynamics between social work professionals and service users.

In this chapter, we delve into the practices of community center L8 and the subsequent evolution of community social work in Tampere and the welfare services county of Pirkanmaa. We outline the community social work development in the given case and also briefly discuss our data and analysis methods. We argue that beyond competencies, reimagined thought structures are crucial in forging a mutual understanding of development trajectories and rejuvenating practices rooted in the ethical foundations of social work.

2. Steps of development: community social work within challenging communities

2.1 A new vision for community social work

In 2020, a project focused on the development of multilingual guidance and counseling was launched. The COVID-19 pandemic highlighted the need for a new location for Kototori, as it was not safe for a large number of visitors to congregate in a densely packed drop-in community center. By the end of 2020, a new space was secured, prompting social work practitioners to reopen Kototori there. This new location was more spacious and presented greater potential than its predecessor,

leading to the concept of a new community social work center. The vision was for Kototori to become an integral part of this space, emphasizing multilingual guidance and counseling, while still being a component of the larger community social work center. This shift would broaden the scope of social work to cater to the entire region's requirements, transcending linguistic barriers, as the evolving social and structural contexts necessitated a more expansive community-oriented approach to social work [5, 10].

The foundational meeting for the new community social work center took place in January 2021. Having been engaged in the area since 2017, the social work practitioners from Kototori had a deep understanding of local organizations and their operations, as well as the challenges and needs of the community. In this inaugural meeting, the term "community center" was coined to refer to the collaborative space encompassing public social services, the municipality, the third sector, and the local residents.

For the progression of community social work, practitioners aspired to establish shared principles, values, structures, and operational methods from the outset. They aimed to diverge from conventional practices typically seen in hierarchical and conservative public entities. There was a collective ambition to deconstruct power dynamics, particularly those manifesting within statutory social work, local organizations, in the minds of residents, and potential service beneficiaries. It was also decided that all information would remain transparent and accessible and that collective decision-making would be prioritized. The shared values were sculpted through multiple workshops, guided by community social work lecturers from Tampere University. Some values were communal in nature, but not all. The core values identified were:

- communality,

- localness,

- actual equality,

- shared agency,

- topicality,

- social tranquility,

- absolute and indivisible client orientation,

- commitment and perseverance,

- critical knowledge production,

- trust,

- experimentality,

- accessibility,

- low threshold,

- respecting experience-based knowledge

Guiding principles for the community center's activities centered around shared values, resident engagement, social innovations, and collaborative growth. Monthly house meetings were instituted as a framework for these principles, serving as a recurrent platform to collaboratively address observations, experiences, suggestions, and arising issues.

Given the community center's emphasis on collaborative development, it was deemed crucial to foster a unified identity, not bound by any single entity or targeting a specific visitor group but welcoming all community members. The center's name became symbolically significant, inspired by its location at Lindforsinkatu 8, it was entitled "L8"—a name that resonated widely within the community. An early foundational decision was that neither organizations nor residents would incur rental charges, enabling them to direct funds toward activities rather than infrastructure. Furthermore, rent was not linked to project-specific funding, ensuring the community center's immediate integration into statutory social work structures.

The initial year emphasized a collective learning approach for the newly introduced form of social work at community center L8. This process encouraged all involved parties to evolve from their traditional methods, co-creating innovative, region-specific community social work practices. Collaboration was prioritized over rigid planning or target setting. Over time, this collaborative ethos fostered a shared vision, reinforced trust, and introduced innovative partnerships. Collective ownership of community center L8 facilitated a shift from mere participation to a profound sense of belonging.

Reflecting on 2023, the community center L8's pivotal role in advancing community social work is evident. Its inception ignited a recognition of the significance and efficacy of community social work across Pirkanmaa and Finland, challenging the traditional, individual-focused approach of Finnish social work, which often limited initiatives to short-term projects [5, 11]. Notably, the Social Welfare Act [3] of July 2023 included community and outreach social work, emphasizing the national subtle shift toward community-centric social work.

The legacy of community social work in the Pirkanmaa region endures. The pioneering social work practitioner behind Kototori and the TEKO project now holds a supervisory role in the community social work unit of Pirkanmaa welfare services county. In Pirkanmaa, four distinct institutional frameworks for community social work are in place, resonating with Jack Rothman's conceptualization [12, 13] encompassing social planning, community development, and social advocacy, all underscored by participatory practices. These frameworks include community centers, community counseling, outreach social work, and drop-in centers, which will be elaborated upon subsequently.

2.2 Community centers, drop-in centers, community counseling, and outreach work in the continuum of social work beyond individual casework

The community center amalgamates the low-threshold services of the municipality, social work, and the third sector. It provides advice, guidance, and activities to community members while fostering the collaboration and development of public social services, association members, and local residents. This center

emerges from the community social work paradigm, which envisions social work as a multifaceted discipline, capable of transforming structures and introducing new functions. Ideally, public social work shifts from being a mere subject of administrative reforms to an active catalyst for change. A hallmark of this center is the pronounced presence of the public sector, wielding its power to continuously create participation avenues for both local organizations and local residents.

Community counseling embodies a low-threshold approach to community social work, maturing into a professional model. For instance, a social work "client" or a local resident can evolve into a community advisor, leveraging their personal experiences to guide peers. This transformation hinges on an individual's willingness to aid others, recognizing and valuing the advisor's expertise, and fostering their growth. Community counseling not only empowers individuals but also enhances employability and augments professional skills. With the foundation of community social work, community counselors independently guide community members, often in tandem with professional experts, in settings like social security or community centers. These counselors have the bandwidth to support clients in handling matters autonomously and most importantly, to lend a listening ear. Their guidance covers areas that do not necessitate a formal qualification in social care, bridging a critical gap in social services. They might assist in navigating e-services, serve as interpreters, mediate between clients and professionals, or provide advice on benefits.

Outreach social work sees practitioners engaging with community members in streets, malls, neighborhoods, and other public spaces. These practitioners advise and assist those needing help and guide them toward appropriate services when needed. The target audience primarily comprises individuals outside of traditional services or those who have disengaged from the services. On-the-spot evaluations are conducted in these settings, and client interactions help prioritize issues. A significant aspect of this outreach is ensuring clients can voice their needs, receive appropriate support, and access necessary services rightfully. Outreach work also offers anonymity.

Drop-in centers, or daytime activity hubs, cater to individuals grappling with substance misuse challenges. Access is not bound by sobriety conditions. These centers extend basic needs support and opportunities to consult with social work professionals. Moreover, visitors can avail of these services anonymously. The centers emphasize harm reduction, safeguarding basic rights, preventing homelessness, and countering the detrimental effects of substance misuse, all while upholding inherent human dignity. In essence, the facets of community social work (community centers, community counseling, outreach social work, and drop-in centers) are tailored to match unique societal and local contexts. They are shaped by the legal provisions of the Social Welfare Act, adapted to meet local necessities (see also [5]).

3. Conducting the study

We explore the core elements embedded in the recent evolution of community social work, based on the competences outlined by Leppänen and colleagues [4]. We examined the progression of community social work within a specific setting, focusing on the process of its development post the TEKO project. This research was undertaken collaboratively by four researchers, each offering a unique perspective on the topic: The first author had served in a managerial role and later as a developer. The second author had been involved in the evolution of community social work from the TEKO project to the present and had also contributed to the study of the

competencies in community social work. The third author was a social advisor student reflecting the development and conceptualization from a student's perspective. The fourth author was a dedicated researcher who also had contributed to the study on the competencies in community social work and participated in the TEKO project in several other capacities as well, serving, for example, as an instructor of further education, a member of the project group, and a supervisor of theses. Our perspectives were deeply personal, necessitating consideration and reflection [4].

We acknowledge the complexity inherent in the theoretical nature of the concept "community" [14–16]. In this chapter, we adopt a socio-political perspective to explore communities, discussing their significance to the Nordic welfare state while also recognizing that society itself acts as an environment of communities, rather than simply understanding communities as empirical, unique small groups [14]. Here, we conceptualize communities as being constructed on the foundations of interaction and reciprocity, drawing insights from social pedagogy [15].

Our dataset comprises 28 documents tied to the developmental trajectory of community social work in this particular setting, grounded in the foundational work of the TEKO project. The data is diverse, encompassing presentations, statistics, annual reports, and information gleaned from work orientations—such as reports on structural barriers impinging upon the rights of individuals in vulnerable communities. These documents span a three-year period, starting in the fall of 2020 and concluding in the summer of 2023. They can be viewed as indicative of developmental trends. Given the nature of our research, we also had considerable prior knowledge about the progression of community social work in the case under study. Hence, while these documents offer valuable insights into the evolution of the field, they are not exhaustive.

The majority of our data originates from documents authored by two of us. This study falls under practice research, denoting a collective journey of learning and knowledge production, where the impetus for both research and development stems from the needs identified in social work practices. Through this research, we aim to conceptualize and systematize the practical evolution of community social work within the specified context. This study represents a dual approach: firstly, as practice research, embodying a collaborative synergy between practical application and academic inquiry; and secondly, as practitioner research, highlighting the research initiatives driven by practitioners themselves [17, 18].

We embraced a constructivist paradigm, as it underscores the potential for myriad interpretations of reality [17] and democratizes the rapport between the researcher and the research. This positions the researcher as an active participant in knowledge construction, rather than a seemingly detached observer [19, 20]. This framework allows us to discern and elucidate a reality shaped by its contextual origins and the interactions within which it was forged [21].

For our analysis, first, we employed thematic reading. We meticulously assessed the selected documents, categorizing preliminary themes and insights into more refined themes related to the growth of community social work. Our analytical approach was introspective, characterized by flexibility in its depth, scrutiny levels, and overarching objectives [22]. Owing to this reflective analysis, we abstained from using pre-established concepts at this juncture. Instead, we engaged in theoretical sampling, molding theoretical thematic units from the sharpened themes (akin to the approach in [20–23]). We used the research on the competences of community social work [4] as a reference point, juxtaposing our central themes against these competences to determine if they enriched or redirected our focus to alternative thematic

domains [21]. This was further mapped onto existing literature. Ultimately, we discerned three pivotal theoretical constructs: (1) committing to change, (2) balance of control, and (3) social closeness—all of which epitomize structures of thinking. To elucidate the essence of these constructs, we have incorporated vignettes at the outset of each subsection.

4. Thought structures complementing the competences of community social work

Psychologist Lev Vygotsky [24] contended that structures of thinking are shaped when individuals are systematically influenced by a specific community. According to Vygotsky, thinking evolves in accordance with external rules, yet the rules of collaboration also develop through association with other community members. Drawing from this, we posit that thought structures are constructed within social contexts and shape the thinking of the individual. However, these contextual structures are also perpetually shifting due to transformations at the individual level, since we belong to various communities, whether in a loose or tightly-knit manner.

4.1 Committing to change

Vignette: In Tampere and subsequently in the welfare services county of Pirkanmaa, there was a dedicated commitment to develop community social work. Unlike a rigid strategy, the developmental approach was receptive, originating from the understanding of the need for CSW in the contemporary societal landscape. This approach evolved through engagement and reflection with stakeholders such as service users and collaborators. While the objective was to enhance practices in line with the ethical foundations of social work, adaptability was the key. Changes were constantly evaluated against their foundational intentions, leading to an agile yet purpose-driven approach to CSW. Importantly, these reforms were rooted in the primary ethos of social services and not contingent on ephemeral project funding, ensuring the evolution and continuity of CSW.

This dedication to CSW and low-threshold services illustrates a multi-layered commitment to change amidst the tumultuous environment of social work, shaped by factors such as digitalization, globalization, neoliberal economic policies, and the wavering base of the Nordic welfare state [25, 26]. In operational terms, when CSW confronted pressures primarily centered on reducing public service costs, the response was discerning. Changes were made if they resonated with the ethics of social work. Proposals motivated by a narrower service scope or placing undue responsibility on individuals for systemic issues were discarded.

Such discernment was crucial, especially given arguments that political directions are becoming excessively economized, thereby diminishing the societal essence, even though social capital can bolster financial well-being [27]. The ethos of CSW, particularly its focus on democratic knowledge production and meaningful participation, intersects with structural social work [4, 5, 9]. In contrast to individually centered social work, CSW illuminates systemic injustices more vividly due to its foundational logic.

The commitment to change transcends mere structural modifications to address the inherent reflexivity of social work. Dimitris Michailakis and Werner Schirmer [28] posit that social work's identity is intricately tied to societal problems. As social work

grapples with context-specific constructions of what is socially problematic, Finnish discourse has been punctuated with discussions on subjectively constructed concerns that can be used as a justification for intervention [29].

In the examined case, the commitment to change encompasses a dimension characterized by a critical and reflective examination of both practices and developmental trajectories. This commitment manifests when collaborating with community members, as it involves a deconstruction of expertise from various agents and institutional actors. It acknowledges the diverse social contexts and emphasizes co-produced knowledge. Such shared knowledge facilitates a collective understanding of potential structural oppressions or community ties leading to individual deprivation. Within this framework, the expertise of social workers is not seen as superior to other stakeholders, including NGOs, volunteers, or community members actively engaged in community social work.

In the analyzed case, a dedication to change encapsulated this multi-dimensional critique, fostering shared knowledge production with diverse stakeholders. A defining principle was the belief that transformation should not rely solely on fleeting project funding from potentially incongruent initiatives. In a Finnish context where societal foundations appear ever-fluid and devoid of history [27], the commitment to change in CSW is grounded in understanding historical continuities. It refrains from seeking instant gratifications, recognizing that enduring change necessitates patience, resilience, and an appreciation of the intricate dance of intersecting interests and challenges. Thus, true evolution embeds itself within history, drawing from the past to understand and shape the present [27].

4.2 Balance of control

Vignette: The community center L8 emerged from a realization: individual-focused social work often falls short in addressing broader social challenges, especially within complex community settings. The root of many challenges is not always the individual; sometimes systemic issues manifest themselves at a personal level. Unlike traditional centers with predefined objectives and methods, L8 aimed to empower community-driven social initiatives. Its foundation was trust: a belief that providing a platform for committed social actors would spark meaningful change.

In its inaugural year, L8 hosted workshops for interested collaborators. These sessions helped establish a common set of values and principles. Participants pledged to innovate collectively. As a result, L8 evolved into a comprehensive hub, pooling varied expertise. This wasn't merely a gathering spot for assorted professionals; it became a nucleus for defining and implementing community-based social work innovations. Initial steps were taken with an open mind, as free from preconceptions as possible.

L8's journey underscores the importance of embracing uncertainty in fostering an experimental and transformative culture. Collaborative knowledge production was at its core. While the city provided the venue, they refrained from dictating the center's activities. This ethos extended to interactions with visitors. Rather than assuming or imposing definitions of social problems, L8's personnel approached community members with humility, striving to understand and respect their lived experiences.

The balance of control involves shifting the exclusive ownership of social work's expertise and defining power to a broader community. This community views social work from diverse perspectives, including those of volunteers, NGOs, and lived-experience experts. This shift necessitates recognizing the limitations of traditional

social work perspectives and the intricate nature of social problems. By deconstructing these power dynamics and knowledge bases, a more open dialog and egalitarian relationship between experts and clients or service users can emerge. Yet, this transfer and balance of expertise and control are inherently challenging. It aligns with the portrayal of social work as the "Other" and the ongoing debates around the delineation and evolution of expertise within the field [30].

As outlined by Matthies [30, 31], social work grapples with diminishing the sense of "otherness" while simultaneously performing institutional roles that draw boundaries between "them" or "the Others" and "us." Societies seem to necessitate this dichotomy: without these defined margins, the central "us" becomes indefinable. The evolution of community center L8 critically examines this inherent tendency toward marginalization and "Otherness." Institutionalized social work has increasingly aimed to be more inclusive, particularly in the face of societal challenges and the complex landscapes within which social work operates.

By distributing control among the diverse actors in the community center, L8 actively challenges the typical "us" and "others" categorization, fostering democratization and a breakdown of entrenched power dynamics. Activities within L8 are driven by collective decision-making and embrace a multitude of voices, promoting a sense of unity even in professional practices. For instance, house meetings at L8, where communal decisions are determined, exemplify these inclusive, multi-perspective approaches. Furthermore, L8 features a community panel comprised of community members. This panel holds equal influence in bringing issues to these house meetings, matching the influence of professional practitioners within the center.

Information sharing at L8 is equitable: all parties, irrespective of their role, have equal access to knowledge about the space and its functions. No entity, including statutory social work, has a monopoly on information. This balanced control is evident in daily routines: every entity at L8 has a dedicated space and keys that access all areas of the community center. At L8, there is not a distant administrative entity; instead, those with administrative responsibilities are as integral to the community as any other practitioners. They are not mere visitors. The term "dismounting" is not employed at L8 because every entity, whether representing statutory social work or informal community work, forms part of a collective ecosystem where functions, operations, and practices are collaboratively owned and operated.

Community members are pivotal to this environment, allowing community social work to function without resorting to normative power dynamics or the "Othering" process, thus facilitating inventive partnerships that acknowledge the comprehensive nature of daily life. In practice, unity is promoted through activities that champion diversity over reinforcing dichotomies like marginalized vs. not marginalized, vulnerable vs. not vulnerable, and included vs. excluded (similarly discussed by Ref. [30]). The limitations of institutional expertise are recognized: community members aren't just subjects of interventions but co-creators of knowledge and functions. Their suggestions are valued and championed.

For instance, a community member, who was unemployed and faced financial constraints, practiced photography. Despite these limitations, they were eager to share their expertise and proposed the formation of a photography group. A CSW practitioner seized this idea, reaching out to the library manager who generously offered space and materials for the group. The CSW practitioners assisted in creating an advertisement for the group. Cautiously, the community member inquired whether it was possible to receive a small compensation for tutoring the group, to which the CSW practitioner facilitated a financial reward. In conclusion, an exhibition was organized.

Ultimately, the group was coordinated through a collaboration among the community members, the library, and community center L8.

Services provided at L8—ranging from adult social work, substance abuse interventions, health counseling, church-related social work, immigrant assistance, to financial counseling—target the community at large rather than specific problem categories. The diverse array of social circumstances is represented in L8's daily operations, allowing individuals from varied backgrounds to interact, fostering inclusion and balanced interactions.

Dialog is pivotal for fostering mutual and equal exchanges. L8 has emphasized practices responsive to challenges and social issues shaped by contemporary temporal, spatial, and structural conditions. Yet, dialog goes beyond mere conversation; it signifies action. This is manifested in the endeavors to craft an environment conducive to safety and tolerance for mistakes, rooted in the belief that dialogic actions are developmental and accumulate over time. At L8, perfection is not the immediate goal; innovation requires embracing risk, an idea supported by prior research (see, for instance, [32]).

4.3 Social closeness

Vignette: The community advisor model evolved from the TEKO project, which aimed to shift power dynamics by transforming community members into practitioners. The community advisors are individuals from the community keen on guiding others based on their unique expertise, passions, and abilities. They can work independently or in tandem with professionals, offering their time to listen, foster the autonomy of other community members, and provide encouragement. Community advising is versatile; it can be approached as volunteer work, internship, rehabilitative work, or even a formal job. Moreover, community advisors receive guidance and support in their work, and their subsequent paths into education, employment, or other pursuits are encouraged.

This model hinges on the recognition that community members possess insights and knowledge that may elude both statutory social work and unofficial community work. Rather than predetermining required skills, the model acknowledges the diverse competencies each advisor brings. In practice, they can have included fluency in foreign languages, firsthand experience with social welfare services, or other kinds of expertise.

Social closeness characterizes the day-to-day and contextual activities of community social work. It embodies the pursuit of genuine connections with community members encountered in these settings. Both statutory social work and unofficial community work foster closeness, not just with each other but also with the people they engage with. This is evident in subtle practices, like the shared coffee policy at community center L8. Finnish coffee culture, steeped in unique traditions, becomes an emblem of this closeness at L8. Unlike conventional institutional settings, both practitioners and community members at L8 partake from the same coffee thermos. Though it might seem inconsequential, this act symbolizes the horizontal relationships nurtured through such contextual practices. Social closeness is, therefore, not just a lofty ideal but is deeply woven into daily actions.

The vignette discussed earlier emphasizes the necessity of power deconstruction and redistribution in the community advisor policy. Echoing the insights of Hekkala and colleagues [33], who explored social inclusion work, knowledge is recognized in CSW practices as a fundamental tool to combat epistemic injustice. Various and

intersecting forms of knowledge are acknowledged, without placing institutional knowledge on a pedestal above other types of knowledge. Alongside specialized skills (like fluency in another language), experiential insights and an understanding of societal functions are considered as invaluable as formal professional knowledge. Institutional practices can inadvertently perpetuate social injustice by prioritizing formal over experiential and practical knowledge. CSW counters this by promoting a pluralistic view of knowledge and championing democratic knowledge generation.

In CSW practices, the recognition of practical and experiential knowledge extends beyond the role of community advisors to daily operations. Roles are fluid, and boundaries between them often blur. For instance, during one visit to the community center, a community member observed an acquaintance seeking advice from a community advisor. When the advisor hesitated, unsure of the best course of action, another community visitor stepped in to assist. This incident underscores the non-hierarchical approach of the center, illustrating that beneficial knowledge is embraced irrespective of its origin.

In a study into the competencies of community-based social work, two of the authors identified that relationship-focused social work operates on three tiers: individual, organizational, and community [4]. Conceptualized as a mindset, social closeness is about forging trust-based relationships across these layers. Hence, trust holds equal importance in community and organizational contexts as it does in individual social work practices. These layers are intrinsically linked, with the principle of relationship-building emanating from individual interactions and cascading to encompass organizational and community realms. From this perspective, relationships rooted in trust fundamentally hinge on human connections. Such relationships initiate a positive feedback loop, fostering further trust, which in turn creates opportunities for transformative actions and addressing challenges framed as societal issues.

A tangible example illustrating the trust spiral across both organizational and community tiers is evident in the following scenario: Two practitioners from separate NGOs collaborating within the community center L8 began working closely during the planning phase of the center's opening ceremony. One was involved in substance misuse work, while the other was dedicated to combatting loneliness. This personal rapport led to a functional partnership between the two distinct NGOs, broadening the scope of trust from the individual to the organizational domain. This community dimension manifested when the NGO centered on substance misuse work and recommended one of their consistent visitors to volunteer for the NGO to address loneliness. This individual began assisting elderly residents with tasks such as doctor visits. Without the foundational trust at an individual level, the partnership between these NGOs might never have emerged. Furthermore, without the ripple effect of trust, one NGO would not have referred its visitor to the other. In a competitive environment, where NGOs vie for funding and clientele, it is noteworthy that an organization focused on alleviating loneliness would embrace a recovering addict as a volunteer.

As previously mentioned, social closeness, alongside other structures of thinking, manifests in multifaceted dimensions. This is evident when formal authorities engage in unofficial capacities. For instance, an NGO community worker's evaluation might be the basis for granting supplementary or preventive social assistance. Rather than wading through bureaucratic red tape during crises, immediate necessities can be addressed promptly, rooted in the trust placed in community members and the informal assessments. However, there is caution to ensure this approach does not

overshadow the primary goals of CSW by predominantly focusing on urgent financial issues. To date, this trust-based approach has yielded positive outcomes.

The situation with supplementary and preventive social assistance exemplifies how trust, cultivated through social closeness, can dismantle unnecessary hierarchies and red tape. In settings where both statutory SW and informal community work coexist, there is a commitment to transparency. The intent is not to artificially distance formal from informal practices. Rather, the goal is to ensure that the CSW framework is inherently supportive of the communities and demographics it serves. This is a delicate balance given the intricate nature of SW, which is often caught between exerting control over certain populations while also upholding its ethical foundation of championing social justice (for example, [30]).

Thus, social closeness is actualized *via* critical and structural social work. In the realm of CSW, it is acknowledged that social work can actively oppose the remedial tendencies of a neoliberal society manifested in therapeutic power dynamics, pathologization, and the push for individual adaptation (about therapy culture, see [6–8]). By emphasizing belonging and community, social work can prioritize social justice, acknowledging oppressive structures and advocating for and alongside those in vulnerable circumstances. A prime example of structural social work in action can be seen in the general practice of community advising. Through the adoption of the community advising model, positions for multilingual advisors were established. These advisors, engaging with individuals who speak foreign languages, provided guidance about Finnish society and performed cultural interpretation. The incorporation of multilingual advisors signifies a shift toward recognizing immigrants as citizens who are entitled to services, regardless of their proficiency in Finnish. Resources were not solely allocated to language training but also to enhancing accessibility, contemplating how services can be tailored to meet the needs of the clientele.

5. Discussion: transforming knowledge production into action through community-based working culture

In this chapter, we explore the progression of community social work influenced by the TEKO project, basing our analysis on the foundational principles presented in the article that examines the competences intrinsic to community-based social work. We propose that these "structures of thinking" are dynamic and evolving frameworks that shape practitioners' thought processes. Such structures, we believe, are deeply contextual and rooted in social constructs [24]. We have discerned three pivotal thinking structures—commitment to change, balance of control, and social closeness. These intertwine with competences like forming relationship-centric social work, fostering a sense of community, encouraging experimentation, collective action for societal change, creativity, and analytical thinking [4].

These thinking structures and competences are interdependent: specific competences do not materialize without the corresponding structures of thought and vice versa. We posit that it's the production of knowledge that morphs these elements into a distinctive working culture. We see this knowledge production as a dynamic interplay [34]. Thus, to truly grasp the practices of CSW within this context, our analysis delves deeper into the foundational aspects of these practices, rather than just their surface features. As stated by Georg Walls [35], knowledge production encapsulates processes of absorption, assimilation, interpretation, and the subsequent conveyance of these interpretations. We believe that competences and thinking structures

materialize as practices through the lens of knowledge production, as described by Walls [35]. Central to knowledge production and practices is the working culture, which, in this case, is based on communities.

Terhi Myller [36] undertook a qualitative examination of professional cultures within social work, situating her study within a Finnish paradigm across both rural and urban environments. Through her research, she integrated discussions on social work, particularly focusing on the professional working culture across Nordic nations. She deduced that the working culture of social work comprises organizational methodologies, the tangible practices of social workers, reinforcement of service users' agency in professional contexts, and political backdrops. Organizational methodologies encompass the significance of contexts, overarching processes, and governance. The professional practices touch upon roles social workers assume, ethical challenges faced, the crafting of professional identities, and the weightage given to the organizational structure. Strengthening the agency of service users hinges on bolstering the client's active participation. The political milieu as extracted from literature epitomizes neoliberal tendencies and societal progression [36].

Based on interviews, Myller [36] found that, in Finnish contexts, professional working cultures can be categorized into three types: (1) the professional working culture formed by organizational preconditions, (2) the professional working culture constructed through social relationships, and (3) the professional working culture built within cultural and situational practices.

Employing Myller's [36] theoretical architecture, we argue that the community-based working culture is evident in community social work's professional practices. Such practices incorporate the dismantling of hierarchical structures, non-bureaucratic stances, and the fundamental adoption of community as the essence of social work. Moreover, when discussing the agency of community members, practices span a variety of temporal and spatial scopes. People encountered in CSW settings are perceived as members of the community rather than mere clients. The emphasis is strongly on fostering equitable, mutual relationships. Yet, we further enrich this community-based working culture paradigm by infusing it with nuanced, context-driven practices. These practices render palpable the production of knowledge, subsequent professional methodologies, and practices related to community members' agency in CSW's daily operations.

Viewed from this vantage point, practices ingrained in the community-based working culture, as contextualized in CSW, are a harmonious blend of foundational principles and routine norms. Hence, these practices transcend mere rhetoric to become transformative actions. As highlighted by Myller [36], social work's operational cultures are influenced by political dynamics. A community-based working culture within CSW is no exception. While it crafts its own unique ecosystem, given the societal obligations bestowed upon social work, CSW cannot operate in isolation. Drawing from our research, themes of neoliberalism, contemporary public governance, and the erosion of the welfare state interplay with the conceived working culture. This interaction is not a straightforward pathway from political contexts to the working culture and its methodologies. Critical and structural aspects of social work intersect with CSW's practices, leading to a pursuit of structural alterations advocating social justice across multiple CSW layers (see [4, 5]). The interplay between knowledge production, competences, and structures of thinking that converge to form working culture that stems from communities is encapsulated in **Figure 1**.

In her 2022 research concerning community social work and structural social work, Aila-Leena Matthies [5] analyzed project plans crafted by Finnish social work
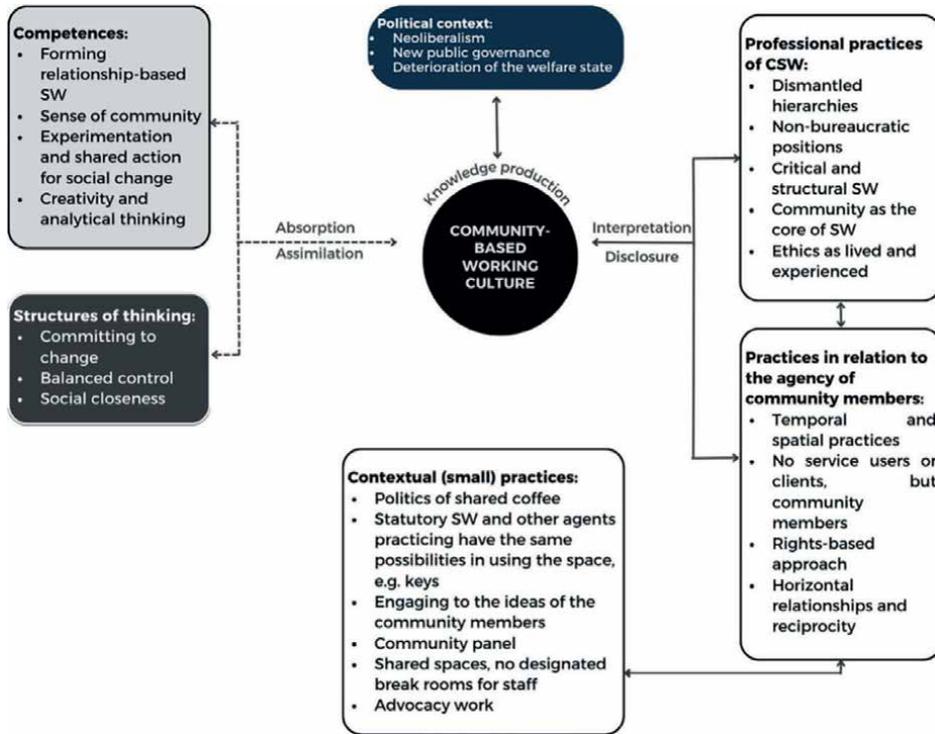
Figure 1.
Community-based working culture and the process of knowledge production.

students as applications for funding. These students broadly represented early-career social work practitioners from diverse Finnish regions, spanning rural to urban contexts. Notably, the central practice models Matthies [5] identified closely mirrored those in the CSW practices we examined. The key models she pinpointed included community meeting points and houses, extensive networking between professional agencies and target groups, tangible alterations and innovations in service systems, ecosocial approaches fostering alternative services and novel paradigms, and political and/or economic shifts. Interestingly, the ecosocial models were the only ones absent from the CSW orientations in our specific study. Given this, Matthies' [5] catego-rization aligns seamlessly with emerging CSW practices in the Pirkanmaa region. Additionally, our case study introduced complementary core practice models, such as (1) deconstruction of knowledge and power emphasizing community members' agency, and (2) viewing community as a tool for social empowerment and justice.

The notion of "ethics as lived" emerged in the realm of ethnographic research [37, 38]. This concept underscores ethical decision-making during practical engagements, going beyond mere adherence to ethical protocols. It is not strictly anchored in the ethics of care or researcher empathy. Instead, "lived ethics" is con-ceived as a blend of actual practices, ethical tenets, and emotional underpinnings [37]. It prioritizes reflective thinking as the foundation for data generation and interpretation [38], portraying the researcher as deeply embedded in the research milieu [37, 38].

Such a representation of "lived ethics" aptly characterizes ethical dimensions within CSW settings. Practices hinge on active community presence and upholding

community members' agency. Nevertheless, neither statutory social work nor informal community work can evade the inherent power dynamics. Statutory SW wields authority over informal community initiatives, and concurrently, both realms exert influence over community members. Efforts are made to dismantle these power hierarchies and distribute power as equitably as feasible. The essence of "ethics as lived and experienced" encapsulates this ethical decision-making approach, recognizing the ethically significant elements unique to each context. Compassion, emotions, and ethical mandates, rooted in principles, steer ethical judgments.

Embracing such lived and experienced ethics necessitates moral fortitude, challenging conventional stances held by social work professionals and their typical ethical decision-making processes. While the term "moral courage" may be nebulous, we interpret it here as risking external disapproval in pursuit of righteous action [39] (see also [40]), particularly upholding the ethical pillars of social work and the values underpinning the CSW framework for Pirkanmaa. Eyal Press [39] contends that peers sharing similar perspectives significantly influence acts of moral courage. Likewise, a study on moral courage within social work suggests a collective character. Ethical dilemmas were navigated either in collaboration with peers or through introspective dialogs. Social workers reliant on internal deliberations described experiences of moral courage as more emotionally taxing compared to those engaging with like-minded colleagues sharing foundational ethical convictions [41]. In our case, CSW's evolution began with introspection but rapidly expanded, fueled by trust and cooperative efforts. This evolution illustrates that moral courage can be communal, embodying an act of structural social work.

6. Conclusions

In this chapter, we have illustrated the recent development of CSW in a specific context. The results are not generalizable, but our conceptualization might provide insight into the dimensions of development and the foundations upon which SW practices are built. In the Finnish context, the emergence of new public governance and a therapy-centric culture has shifted the focus of social work toward individual responsibility. Contrasting with the prevailing trend of individualization in social work practices, our discussion has centered on CSW and its emphasis on the structural dimensions of phenomena that are perceived or constructed as social problems. This shift in focus toward structural considerations is notably significant.

The development of CSW in the Pirkanmaa region has been progressing for nearly 8 years, which represents the gradual shifts in professional working culture. Moreover, the theoretical framework outlined in previous research concerning the competencies of CSW has been meaningful and may have facilitated cultural change. Therefore, the dialog between practice and theory has been of significance.

In this chapter, we have detailed the fundamental characteristics of a community-based working culture. However, there remains a need for thorough examination of how these features collectively manifest, potentially effecting a shift in the prevailing professional working culture. Therefore, it is imperative for future research and development to concentrate on examining the mechanisms underlying the working cultures in social work.

The central thesis of this chapter underscores the notion that practices are constructed on a foundation of thought structures intertwined with competencies. Consequently, structural social work must initiate the transformation of these

structures of thinking. The concept of thought structures can be further elucidated by, for instance, analyzing contemporary structural issues recognized as social problems, like mental health concerns or matters related to street gangs. Consequently, it is our hope that this chapter can be situated within the continuum of theory of practice and motivate future research and development of SW.

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Working with Gun Violence Survivors: The Social Worker's Role in Crisis Intervention and Prevention

Mitchell Alan Kaplan

Abstract

The United States is experiencing one of the most unprecedented upticks in gun violence in our nation's history. National statistics indicate that the number of mass murders committed by violent assailants possessing guns is rising at an alarming rate nationwide, placing the safety of American families at risk. Researchers at The Centers for Disease Control and Prevention assert that the deregulation of gun control laws by conservative lawmakers represents a substantial threat to public safety that undermines basic security at the community level. A review of published data from the National Gun Violence Archive in 2021 reveals that twenty thousand murders and twenty-four thousand suicides in the U.S. are attributable to gun violence each year. This chapter will examine how social workers can provide clinical services that help survivors overcome the traumatic effects of gun violence and implement programs to prevent these tragedies from reoccurring in communities at risk.

Keywords: gun violence, community safety, social work, crisis intervention, public policy

1. Introduction

The United States is one of only three countries in the international community where the right to own firearms is protected constitutionally with few restrictions [1]. The U.S. has become one of a handful of nations where the national figures for dangerous weapons held by private citizens exceed those of all other countries in both per capita gun ownership and the absolute number of firearms available. According to an article in the Washington Post on October 5, 2015, there are more than now enough guns available in the United States to arm everyone in the general population with a deadly weapon. National statistics indicate that gun manufacturers have distributed more than three hundred fifty million firearms to gun dealers across America, with approximately 30% of these weapons ending up in the hands of private U.S. citizens [2, 3].

The staggering increase in gun ownership has precipitated one of the worst epidemics of violence in American history. Daily reports of mass shootings that

disrupt the lives of hundreds of Americans and compromise the safety and stability of local communities have become commonplace in recent years, coinciding with the rapid expansion of gun ownership by private citizens across the country. National surveys by federal agencies and nonprofit organizations provide substantive evidence that rising incidence rates for severe violence in American cities are closely tied to the nationwide expansion of gun ownership. Results of national tracking polls by the U.S. Centers for Disease Control and Prevention, the Federal Bureau of Investigation, and other public health agencies have determined that gun violence is one of the nation's leading contributors to the increase in preventable death and injuries resulting in severe life-long disability. An analysis of C.D.C. tracking data by John Gramlich, the Pew Research Center associate director, supports this contention. Findings reveal that 48,830 Americans lost their lives to injuries sustained from gunshot wounds in 2021. Of those fatalities, 26,328 (54%) were identified as suicides, 20,958 (43%) were classified as homicides or accidental deaths, and the remaining 1544 (3%) were said to be of undetermined origin. National statistics indicate that from 2019 to 2021, the average number of gun-related murders reported to law enforcement agencies rose by 45%, and the nationwide death toll attributed to firearm-related suicide increased by 10% in the general U.S. population. The investigation also underscores the fact that serious injuries related to firearms are fast becoming one of the more frequent causes of mortality reported on death certificates across the country. This was especially the case during the high point of the COVID-19 pandemic when law enforcement agencies determined eight out of ten gun-related murders and more than half of all suicides involving firearms reported were attributable to social hysteria associated with the spread of viral infection [4]. A study published in the *Morbidity and Mortality Weekly Report* in May 2022 supports this contention. Findings show that during the pandemic, firearm-related homicide rates in the United States rose to one of the highest levels since the mid-1990s, with the most significant disproportionate increases occurring among young African American males aged 10 to 44 and indigenous males of American Indian and Alaska Native descent aged 25 to 44 two subgroups with the most substantial vulnerability to this form of violence [5]. The research provides further evidence documenting the significant relationship between the pandemic and the nationwide increase in gun-related fatalities.

2. The impact of gun violence on children and adolescents

A more recent analysis of C.D.C. mortality data by Pew Research Center investigators in April of 2023 shows that children and adolescents are disproportionally affected by gun violence. Data analysis indicates that the annual figures for gun-related deaths among children and adolescents under the age of 18 reported by federal agencies rose from 1732 in 2019 to 2590 in 2021, an increase of 50% within 2 years [6]. Evidence confirming the national increase in child and adolescent mortality related to firearms is revealed in the results of a joint investigation conducted by researchers at the Peterson-KFF Health Tracking Project. Findings show that between 2020 and 2021, gun violence contributed to the death of more children in this country than any other cause of disease, disability, or severe injury. Statistics also indicate that the nation's child mortality rate related to firearms has doubled over time. C.D.C. health tracking data provides substantial evidence that child and adolescent mortality caused by firearms increased significantly between 2013 an 2021. National figures show that the average number of gun-related deaths among children and adolescents

reported rose from an historic low of 1.8 to an unprecedented high of 3.7 per 100,000 in this subsection of the U.S. population. Based on these figures, investigators confirm that the nationwide death rate for children and adolescents killed in gun-related incidents of violence has risen substantially. Data analysis reveals a 68% escalation in the number of child and adolescent gun-related deaths since the year 2000 with an additional 107% uptick in firearm fatalities recorded since the national decline in 2013. When investigators compared the international data for firearm-related deaths from all known causes among children and adolescents in the United States with peer industrialized nations, the U.S. ranked number one in every category of increased mortality. For example, researchers noted a significant link between the dramatic spike in the child and adolescent mortality rate and the nationwide expansion of firearm-related assault in 2021. Data analysis corroborates this assertion by revealing that the mortality rate for children and adolescents who died in gun-related assaults reached a national high of 3.9 fatalities per 100,000 in the general population of the United States. A figure indicating a 7% increase in deadly firearm assaults against children and teenagers since 2020 and a 50% jump in these types of attacks since 2019. The national data also suggests that the firearm suicide mortality rate among children and adolescents rose significantly, to an average rate of 21% between 2019 and 2021, further substantiating the disproportionate impact of gun violence on America's children, particularly those of color living in urban areas where poverty and crime are highly concentrated [7].

3. The effects of gun violence on the U.S. healthcare system

Research by investigators at the U.S. General Accounting Office provides additional evidence that supports the assertion by Pew Research Center investigators that the rising tide of gun violence is having a significant adverse effect on America's most vulnerable social institutions, particularly the healthcare system. Public health data shows that in 2019, an estimated 40,000 Americans died of life-threatening injuries caused by guns, and twice as many were hospitalized with non-fatal medical injuries associated with the use of firearms. The study revealed that the physical and emotional harm caused by gun violence is responsible for 30,000 inpatient hospitalizations and 50,000 emergency room visits each year, raising the financial bar of treatment services for health-related incidents of this type to new heights. G.A.O. investigators analyzed available hospital data for 2016 and 2017, further substantiating this claim. The review determined that the financial burden of firearm-related injuries costs the healthcare industry more than one billion dollars a year in treatment and aftercare services to help patients reestablish stability in their lives following a gun violence incident. They assert that serious injuries caused by guns have contributed significantly to the 20% price hike in physician fees across the spectrum of clinical services rendered by medical institutions. The investigation also identified other economic factors influencing the rising cost of in-house care for patients injured by gunfire. Central among them is the fact that a considerable share of patients treated for gunshot injuries at healthcare facilities across the country are on Medicaid, a federally funded health insurance program for people experiencing poverty that tends to offer a lower level of financial reimbursement for clinical services rendered than private health insurance companies, an economic factor that researchers contend makes a substantial contribution to the more than 60% rise in medical costs for treatment services administered to firearm survivors. In addition, G.A.O. findings disclosed that

the rate of first-year readmission for the treatment of medical complications following initial hospitalization is considerably higher for gun violence survivors than it is for patients receiving follow-up care for other severe medical conditions, an economic factor that is further exacerbating the financial cost aftercare services for gunshot survivors. Data analysis indicates that 16% of patients who survive initial gunshot-related injuries reenter the hospital at least once within the first year after discharge for follow-up care related to complications from their original injury—with an average cost of 8000 to 11,000 dollars per patient. Finally, G.A.O. investigators assert that patients who survive traumatic injuries caused by gun violence are more likely to have significant difficulty adjusting to the physical, behavioral, and economic challenges that accompany their changing healthcare needs post-hospitalization, many of which will require continuous lifetime monitoring by medical professionals. They conclude that the adjustment problems experienced by gun violence survivors after discharge create substantial socioeconomic barriers that prohibit them from accessing adequate follow-up services designed to help them cope with their emerging health issues, greatly enhancing the financial burden of post-hospitalization care.

On the clinical side, in addition to the prohibitive economic burden of in-house aftercare services, the G.A.O. study points to subsequent clinical and institutional factors that compromise gun violence survivors' chances of receiving appropriate follow-up treatment for their physical injuries after hospitalization. These include pre-existing conditions like high blood pressure, obesity, diabetes, and asthma that cause medical complications that can lead to unforeseen clinical procedures such as limb amputation, which extend the recovery period for gun violence survivors significantly. Clinicians also note that gun violence survivors who sustain multiple physical injuries generally require healthcare services for a more extended period because medical professionals must separate treatment options for each injury. For example, physicians contend that a gun violence survivor sustaining a spinal cord injury in conjunction with an upper-body fracture resulting from a firearm assault requires two separate rehabilitation periods to allow the patient to recover from each injury fully. They further contend that gun violence survivors who remain in intensive care units for extended periods are at higher risk of developing other physical, cognitive, and psychiatric symptoms that increase the need for extensive healthcare services after discharge. Medical experts also informed G.A.O. investigators that survivors of firearm injuries experience mental health conditions such as clinical depression and post-traumatic stress disorder (PTSD) after firearm injuries that require clinical intervention by mental health professionals trained to administer behavioral healthcare services after leaving the hospital. Mental health professionals stress that the type and duration of behavioral healthcare services survivors need post-hospitalization primarily depend on the circumstances under which the firearm injury occurred. They contend that a patient whose gun-related injuries were a direct consequence of interpersonal violence will require treatment with a support strategy that is clinically different than the one used for patients whose firearm injuries have been determined to stem from self-infliction. They also maintain that a gun violence survivor with a severe physical injury that leads to permanent disability is more likely to require inpatient psychiatric care and extended mental health services after discharge to achieve a complete and successful recovery. For example, clinicians have observed gunshot survivors who sustain brain damage resulting from the physical trauma of a gunshot incident require extensive psychotherapy both in-house and after discharge to assist the patient in adjusting to the physical limitations of their impaired neurological function.

Clinical experts interviewed informed G.A.O. researchers that many of the physical and psychological disabilities inflicted on gun violence survivors are not well-managed or understood by the medical professionals providing their care, constituting another social barrier that slows the rehabilitation process and dramatically impedes patient recovery. The clinicians also told the investigators that along with the economic, medical, and psychological obstacles that firearm injury survivors encounter when they seek post-hospitalization care, the institutional policies and available resources of the healthcare facilities that admit them play a critical role in influencing their ability to access follow-up care after discharge. Two classic illustrations of this type of policy-driven inhibitor to the delivery of care that providers touched upon in their interviews with G.A.O. investigators are documented by the fact that post-acute rehabilitation facilities such as nursing homes often provide gun violence survivors with a lower standard of aftercare services because of a reduction in the rate of financial reimbursement they receive from the patient's health insurance plan. In addition, medical experts in the study described other institutional barriers that prohibit gun violence survivors from accessing necessary care after discharge, such as restrictions on prescriptions issued by medical professionals that do not allow service providers to implement rehabilitation services to firearm injury survivors from communities of color because of racial bias subsequently raising the bar of patient mistrust in the healthcare system further disrupting their recovery from their injuries [8].

Results of a public health tracking poll focusing on the adverse impact of gun violence on the general population in the United States by researchers at the K.F.F. Public Opinion Survey Organization in 2023 support many of the clinical findings of the G.A.O. study 2 years earlier. The investigation compiled data from a nationwide sample of 1271 adults through online and phone interviews between March 14th and 23rd' 2023. Data analysis revealed:

- Experience with gun-related incidents is a multifaceted phenomenon that is shared throughout the U.S. adult population. One in five American adults surveyed, 21%, reported that they have personally had their lives threatened with a firearm. A similar percentage, 19%, say that a gun played a pivotal role in the death of a family member, either through a self-inflicted gunshot wound or through direct contact with an assailant. Almost as many, 17%, disclosed having personally witnessed a shooting. Two smaller segments of adult respondents revealed that they had either used a gun in self-defense 4% or had sustained a personal injury caused by a firearm 4%. In total, the researchers determined that over half of adults in the United States, 54%, have experienced one or more of these traumatic events related to violence associated with a gun.

- The incidence of gun-related injuries and death, as well as worries about gun violence, are disproportionately more prevalent among U.S. adults living in communities of racial diversity. Three in ten Black adults, 31%, and one-fifth of Hispanic adults, 22%, surveyed proclaimed that they have personally witnessed someone shot by a gun. Survey data further revealed one-third of Black adults, 34%, reported that they had a family member who was killed by a gun, twice the share of White adults, 17% in the investigation issuing the same disclosure. In addition, survey results indicated that one-third of Black adults, 32%, and Hispanic adults, 33%, said they worry every day or almost every day about the possibility of a loved one becoming the victim of gun violence compared to just one in ten White adults, voicing the same concern.

- When researchers asked participants of color in the survey to describe their personal feelings about safety and security in their local communities related to firearms, one in five Black adults 20% and Hispanic adults 18% said they had persistent feelings of insecurity in their local communities associated with gun-related crimes, injuries, and death that place a consistent risk to their safety. More than double the share of White adults 8% expressing the same views about violence in their communities linked to guns.

- When investigators asked respondents to describe preventive measures taken to increase safety in the wake of gun violence, 84% of U.S. adults interviewed said they initiated at least one preventive strategy to protect themselves and their families from the possibility of death or injury associated with a firearm. Data analysis revealed that over half of the adults surveyed, 58%, reported having one or more open discussions with their children and other family members about gun safety, and more than 44% admitted purchasing another type of defensive weapon, such as a knife or pepper spray, to ward off assaults by gun perpetrators. More than 40% of adult respondents surveyed indicated that they have attended a gun safety class or gone to a structured firing range to practice shooting a gun.

- When asked to disclose specific changes in their daily interaction with other people implemented to reduce the risk of gun violence, about a third of adults surveyed 35% reported that they avoid going to crowded public places like music festivals, bars, and nightclubs as a risk reduction strategy for gun violence against them and their families from the possibility of gun violence. Three in ten adults, 29%, surveyed responded the main reason they purchased a firearm was self-defense against perpetrators who might harm them or their families with a gun. A minor portion of the sample responded they had taken other precautions to protect themselves and their families from the harm associated with firearms. These strategies include avoiding using public transportation 23%, changing the school their child attends 20%, nonattendance at religious services and cultural celebrations 15%, and relocating their family to a residential neighborhood where violent crime rates are low 15%.

- The investigation also revealed data that highlighted the significance of service provider intervention in gun violence prevention. Data analysis indicated one in seven adults, 14% surveyed, reported that a doctor or another health professional had inquired if they owned a gun or if one or more firearms were present in their home. One in four parents, 26% with children under age 18, reported that their child's pediatrician inquired about guns in their home. Less than 5% of adults in the survey said that a health service provider had spoken to them about gun safety.

- Finally, when the researchers asked participants about firearm safety in their homes, more than half the adults sampled 52% responded that the gun in their home is stored in the exact location as the ammunition, 44% replied that the gun in their home was held in an unlocked place, and 36% said that the firearm stored in their home was loaded. The percentage of adults with children giving responses about gun safety was similar. About four in ten adults with children below 18, 44%, stated that a gun is present in their household. One-third of those parents, 32%, further responded that a loaded firearm is kept in the home,

and an additional 32% answered that the gun inside their home is held in a place that is not secured by a lock. More than half of the parents, 61%, also stated that the gun present in their home is in the same location as the ammunition [9].

4. Social factors contributing to the risk of gun violence

An analysis of data from a national tracking poll of 5115 adults conducted by investigators at the Pew Research Center in June of 2023 corroborates the results of the gun violence research by Dr. Schumacher and her colleagues. The study identified a variety of social factors contributing to the rise of gun violence in American culture. Survey data revealed that four in ten U.S. adults live in households where a firearm is present, and 32% say they own one. National tracking data indicates factors like party affiliation, gender, community of residence, and race play a crucial role in influencing favorable attitudes among specific segments of the American population toward owning a gun. Findings show that 45% of Republican and Republican-leaning independents say they own a gun, compared to 20% of Democratic or Democrat-leaning independents making the same claim. Men are more likely to be gun owners than women. Polling data reveals that 40% of men surveyed admitted to firearm ownership, compared to just 25% of women making the same admission.

The investigation also noted a close association between gun ownership and the type of community setting respondents lived in. When researchers interviewed adults in rural areas about gun ownership, 47% said they owned a firearm, compared to a lower share of suburban and urban dwellers making the same pronouncement. The research disclosed that 30% of suburban and 20% of urban adults said they were gun owners. The study further noted significant differences in the percentage of gun owners by race. Pew polling data revealed that 38% of gun owners in the U.S. are White, 24% are Black, 20% are Hispanic, and 10% are Asian. When researchers asked adults surveyed to disclose their reasons for owning a firearm, more than three-quarters of those responding, 72%, said self-protection was the primary reason for gun ownership. Secondary reasons for owning a firearm that emerged from the analysis include hunting at 32%, sport shooting at 30%, gun collecting at 15%, and part of their job at 7%.

Pew investigators proclaim that American attitudes toward gun ownership had only undergone a modest change from those revealed in an earlier survey in 2017 when 67% of respondents reported self-protection as the main reason for owning a firearm. Data compiled in the June 2023 survey were further indicative that gun owners tend to have more positive feelings about having a firearm in the home than the non-owners they live with. For example, 71% of gun owners stated they enjoy owning a gun, compared to 31% of non-owners living in households where a firearm is present, who expressed the same positive feelings toward gun ownership. A significant proportion of gun owners sampled, 81%, proclaimed that having a gun in the house enhanced their feelings of safety and security. In contrast, a more narrow margin of non-owners, 57%, held the same sentiments about having a firearm in their home.

Additionally, the study disclosed that non-owners of guns tended to be more likely to have substantially higher levels of worry about the presence of a firearm in the home than owners. Statistical analysis of the Pew data revealed a 27–12% respective split between non-gun owners and owners supporting this assertion. The investigation determined that social forces substantially influence the split reaction linked to emotional sentiments about gun ownership. For instance, researchers noted that Republican respondents were likelier to reveal positive feelings of enjoyment and

safety in connection to gun ownership. Democrats, on the other hand, were more likely to express deep feelings of concern about the prospect of having a firearm located within the home. A similar split reaction was elicited when investigators asked non-owners about their intention of becoming gun owners in the future. Results of the Pew study revealed that more than half of adult respondents, 52% identifying as non-owners, said they could never see themselves owning one. A lesser share, 47%, responded that they could picture themselves owning a firearm at a future date. The investigators further noted transparent differences in reactionary responses from non-owners of guns based on gender, political affiliation, and race. Findings reveal that 56% of men surveyed said they could envision themselves as gun owners 1 day, in contrast to just 40% of women issuing the same response. Among non-owners holding, 61% of Republican-affiliated respondents said they could conceive of themselves as gun owners in the future, compared to only 40% of non-owners with Democratic alliances, which gave the same response.

A similar split on this question was noted among respondents from diverse races and ethnic backgrounds. Analysis of Pew data reveals that more than half of all Black adults 56% who identified as non-owners of a gun responded they could see themselves owning a firearm 1 day, in comparison to lower percentages of White 48%, Hispanic 40%, and Asian 38% non-owners responding the same. The study also indicates that views about safety enhancement through gun ownership are evenly split among American adults surveyed. Empirical evidence of the split opinion on this issue is revealed in the data analysis, showing that almost half of the adults surveyed, 49%, say owning a gun increases safety because the weapon protects them from the harm caused by assailants. In contrast, an equal share of participants also replied that giving too many people access to firearms leads to a reduction in safety by increasing the potential for violence.

Additionally, the investigation revealed residential and political factors play a significant role in influencing the intensity of split opinions about gun safety. For example, data analysis shows that 79% of Republican respondents believe that ownership of a gun does more to increase the safety and overall security of individuals and communities at risk of violence than other protective measures. An almost identical proportion of Democratic respondents, 78%, say they believe gun ownership reduces public safety by raising the potential risk of violence. Respondents residing in urban and rural parts of the country also noted sharp differences in views about public safety related to gun ownership. Findings show that among adults living in urban areas, 64% say owning a gun reduces public safety. In comparison, 34% replied possessing a firearm increases safety and security in urban communities. Among adults living in rural areas, 65% of those responding said owning a gun increases safety in their community, compared to 33% replying the opposite was the case.

When researchers asked participants to disclose their perceptions about the magnitude of the gun violence problem in American culture at present, six in ten adults replied that the growth of violent incidents related to firearms represents one of the most monumental social concerns facing our society today. Data analysis indicates that 23% of adults surveyed perceive the size of the gun violence problem in the United States as moderate; in contrast to two in ten, 13% said they view it as small or nonexistent, 4%. Furthermore, when investigators asked respondents to give their opinion about whether they expect the level of gun violence in America to increase, decrease, or remain the same within the next 5 years, 62% replied they expect the current level of firearm-related violence to increase significantly. Double the share of the 31% of respondents answering they expect the present level of gun violence in

America to remain stagnant. In comparison, only 7% of those responding expressed optimism about the national level of gun violence declining during that period. Researchers noted the majority of Americans held widely different views on issues related to gun control. Analysis of national data indicates that 61% of respondents surveyed said that it is far too easy to gain access to a gun in this country legally.

In contrast, 30% replied that the ease with which an individual can obtain a firearm legally is entirely acceptable under present gun control laws. Another 9% claim that gaining legal access to a deadly weapon is extremely difficult because of restrictive gun control policies administered by the federal government. The survey further indicated that the consensus of public opinion on regulatory policy is significantly divided among Americans who do and do not own a gun. Nationwide data reveals a 73–38% favorability split between gun owners and non-owners on this issue. Findings show that respondents who were non-owners of firearms were twice as likely to say that federal regulations related to gun ownership are too lenient compared to owners. Researchers also noted a similar split reaction of 48–20% between gun owners and non-owners on the issue of acceptable government standards that regulate firearm acquisition.

Results show that gun owners were two times more likely to rate the current level of government regulation that pertains to gun acquisition as favorable in comparison to non-owners. Findings further indicated the national consensus among gun owners and non-owners on issues related to federal standards that control access to firearms is influenced significantly by political ideology and the demographic stratification of respondents surveyed. The national data shows that 86% of Democrats polled said it is far too easy to gain legal access to a firearm in America, in contrast to only 34% of Republicans who gave the same response. Demographic analysis indicates the vast majority of urban dwellers, 72%, and those living in suburban communities, 63% said accessing a gun legally in this country is much too easy. On the other hand, rural residents were much more divided on this issue. The national data shows that 47% of rural residents surveyed said restrictions governing access to firearms are too lenient under current gun control laws.

In comparison, 41% said current legal limits on firearm access are acceptable, and 11% claimed that getting such weapons under restricted ownership is challenging. When investigators asked adults surveyed about the favorability of stricter gun laws, six in ten 58% responded that they were in favor of tighter regulations. In contrast, 26% replied that the laws are acceptable the way they are and that no further restrictions are necessary. The remaining 15% responded that they favored fewer restrictions on owning this type of weapon.

The investigation also reveals that while American views on firearms control substantially influence gun ownership in our nation, some federal proposals to reduce access to these weapons have met with consistent controversy and storch debate along partisan lines. National polling data generated from surveys by investigators at the Pew Research Center suggest robust to moderate support among the majority of U.S. adults in both political parties regarding two gun control policies that restrict access to firearms by persons with a history of mental health disorders and those below the age of 21. Data analysis indicates that 88% of Republicans and 89% of Democrats surveyed said they are in favor of placing substantial restrictions on firearm purchases by those with mental illness. Nationwide polls further disclose that 69% of Republicans and 90% of Democrats favor raising the minimum age requirement to 21 to purchase a gun legally. The study also revealed a considerable share of partisan agreement on restrictions that disallow people to carry concealed weapons without a permit. Pew

polling data shows that 60% of Republicans and 91% of Democrats are in opposition to this gun control policy.

In contrast, the national polls show a lower share of bipartisan agreement on gun control policy proposals banning assault weapons. Data analysis indicates 85% of Democrats or Democrat-leaning independents say they support proposed federal legislation that places a national ban on assault weapons, compared to just 45% of Republicans or Republican-leaning independents who replied they would back such controversial restrictions. The polls further indicate that most Republicans are in favor of federal legislation that increases the number of teachers and school officials who carry firearms in public school facilities legally. Pew Research Center results reveal that close to three-quarters of Republicans, 74%, favorably support the implementation of such legislative action in local school districts nationwide. They also disclose that more than 70% of Republicans favor legislation allowing individuals to carry concealed weapons in public places legitimately [10].

Substantive evidence supporting Schaeffer's analysis is documented in a previous Pew Research Center survey of 3757 U.S. adults in the fall of 2022. The study highlights ongoing concerns about school shootings among a national sample of parents with at least one child in the kindergarten through the twelfth-grade school system. Results show a definitive relationship between parents' economic status and level of apprehension about the possibility of a school shooting incident. Findings reveal that 49% of low-income parents surveyed said they felt very apprehensive about the prospect of gun violence at their child's school. Compared to lower shares of 26% of middle and 19% of upper-income parents expressing similar levels of concern about in-house violence connected to a firearms incident at school. The analysis also indicated other social factors such as race and ethnicity, gender, residential status, and political affiliation play a vital role in fueling parental concerns about gun violence in school. For example, the national data reveals mothers were considerably more likely than fathers to report extreme levels of worry about the potential for gun violence in their school district. Statistical analysis shows that 39% of mothers surveyed reported having severe concerns about the possibility of their child being killed or injured by gun violence at school. A lower share of mothers, 23%, said they were not overly worried about this prospect. Among fathers in the Pew survey, results indicated that 24% reported that they were very apprehensive about the possibility of their child being harmed by a firearm at school. While a higher proportion, 41%, said they were not very worried about a violent incident related to guns in their child's school. Survey results also indicate similar levels of varying concern about school shootings among different racial and ethnic groups. National polling data shows that 50% of Hispanic parents of kindergarten through twelfth-grade students said they were very apprehensive about the prospect of a shooting at their children's school.

In contrast, 20% of Hispanic parents surveyed said this issue does not greatly concern them. Nationwide data suggests similar divisive views about school shootings among Black, Asian, and White parents of K12 students. Statistics indicate that 40% of Black, 35% of Asian, and 22% of White parents surveyed say they are highly concerned about the potential for gun violence in school. Compared to 27% of Black, 19% of Asian, and 39% of White parents who say that they are not profoundly apprehensive about a violent gun-related incident of this kind happening at school. Additionally, the investigation noted that parents' residential status and political affiliation had a decisive impact on their views of gun violence in the public school system. The national data reveals that 46% of parents residing in urban areas said they

were extremely apprehensive about school shootings in their communities compared to lower shares of suburban, 28%, and rural, 25% parents with the same concern. Results also show that Democratic and Democrat-leaning parents of K-12 students were more concerned about the prospect of a school shooting than their Republican and GOP-leaning counterparts. Data analysis indicates that 40% of parents surveyed affiliated with the Democratic party said they were highly concerned about gun violence in their school district compared to just 22% of parents with G.O.P. connections expressing the same level of concern tied to this problem.

In terms of developing concrete strategies to combat gun violence in the public education system, the findings of the 2022 Pew Research Center survey indicate there is considerable agreement among majorities in both political parties that implementing improved mental health screenings and more effective methods of psychiatric treatment would be an effectively prevent school shootings. Data analysis reveals that 63% of parents with children under 18 believe initiating the utilization of better mental health practices on a national scale would constitute a highly effective approach to preventing death and serious injuries caused by gun violence in school. The results also point to other practical strategies that parents view as possible solutions for preventing gun violence in school. These include having more police or armed security guards stationed in and around school buildings. The analysis indicates that close to half of the parents surveyed, 49%, stated they view this strategy as an efficient method of eliminating the potential for violent firearms incidents at school. Findings also reveal that 45% of parents favor a national ban on assault weapons as a significant deterrent to gun-related violence in school. Another 41% proclaim they prefer placing metal detectors at strategic locations inside school facilities to route out violent assailants carrying concealed firearms into the classroom. A comparatively smaller share of parents surveyed, 24%, strongly support the recommendation that teachers and administrators be allowed to bring guns into school as a practical approach to ending the traumatic violence tied to firearms.

Amid the staggering uptick in gun violence incidents in public schools and on college campuses across the country in recent years, there has been widespread discussion among Democrats and Republicans on Capital Hill about the adoption of effective policies and enhanced security procedures that can put an end to such tragic incidents. Even though the empirical evidence from the research discussed thus far in this chapter demonstrates that gun violence in the American education system has become a significant national crisis that compromises the health and safety of our nation's children. Congressional leaders have yet to advocate for the development of legislative proposals that adequately address this critical issue. National polling data from the Pew Research Center suggests that the lack of a unified commitment by the Republican and Democratic lawmakers to adopt specific gun control policies to end school shootings has led to conflicting views internally among parents in both parties regarding which approach to firearms prevention to support. Polling results indicate varied internal support for specific gun violence prevention policies by parents in both parties. The survey revealed Republican and Republican-leaning mothers are more likely than G.O.P. fathers to have robust support for policies that improve mental health screening and treatment to prevent school shootings. Data analysis shows a 59–49% split between G.O.P. mothers and fathers who said they would back this prevention policy to elevate gun violence in school. A similar internal division among G.O.P. parents is also reflected in varied support for other controversial policies related to preventing gun violence in school, such as assault weapons bans and installing metal detection devices to identify those

who might attempt to bring concealed weapons into school facilities. Findings show that 25% of Republican mothers surveyed reported they support bans on assault weapons because they perceive it as a practical approach to preventing school shootings in comparison to just 12% of G.O.P. fathers who replied they have the same supportive views of this type of prevention policy.

Regarding the utilization of metal detection devices in school as a deterrent to gun violence, the investigator noted a similar supportive division on the effectiveness of this prevention strategy among G.O.P. parents. Data analysis indicates that 43% of Republican mothers surveyed said they think the use of metal detectors in school is an exceptionally effective method of preventing gun violence in school and would support it, as opposed to only 30% of G.O.P. fathers who responded they felt the same way.

In addition, the national data indicated Republican fathers were more likely than G.O.P. mothers to support a proposed firearms prevention policy that allows teachers and administrators to carry guns in school. Results show that 46% of Republican fathers reported they would advocate for implementing this strategic approach to eliminating gun violence in the classroom as compared to 37% of G.O.P. mothers who said they would favorably back such a policy decision.

On the other end of the political spectrum, the national data indicated that parents of both genders who identified as either Democrats or Democratic-leaning independents were more likely to have positive opinions about the effectiveness of most of the practical approaches to gun violence prevention in educational institutions previously discussed, except for having police officers or armed security guards stationed inside school facilities. Statistical analysis shows that 41% of Democratic mothers and 35% of Democratic fathers reported they are in agreement that proposed strategies for gun violence prevention in school are very effective and would support the implementation of these policies. The analysis also showed that the attitudes of Democratic parents toward assault weapons bans varied by the community of residence. An estimated 72% of Democratic mothers and 68% of Democratic fathers surveyed living in urban and suburban communities responded banning assault weapons has a very beneficial effect on preventing incidents of gun violence in public schools, compared to 54% of Democratic parents in rural communities who responded the same way [11].

5. The mental health of gun violence survivors

The research findings reviewed document the fact that gun violence presents a significant threat to the mental health of the American public. Scholars studying the complex social factors that contribute to mental health problems associated with violence linked to firearms assert that despite mounting evidence from studies in the social science literature that highlight the presumptive causes of these incidents, it remains a challenge for researchers and clinicians to make definitive determinations about the exact number of Americans whose psychological functioning has been severely harmed by the multilevel exposure to the consequences this type of violence. Mental health professionals assert that recent surveys of gunshot survivors indicate that individuals who receive multiple exposures to violent episodes connected to firearms experience significant long-term post-effects of emotional trauma that require psychiatric intervention. Clinical evidence supporting this assertion is provided by the results of a 2022 survey of 650 gun violence survivors conducted by the research and policy program of the Everytown for Gun Safety Support Fund. One of the main findings of the investigation was that 90% of survivors surveyed reported

struggling with one or more symptoms of psychological stress after exposure to gun violence that necessitated the need to seek crisis intervention services from a trained trauma specialist. Investigators note the most frequent trauma-related symptoms that gun violence survivors reported struggling with were clinical depression, severe anxiety, sleep disorders, post-traumatic stress syndrome (PTSD), physical illness, and enhanced substance abuse. The study disclosed that more than half of the survivors surveyed who experienced gun violence within the last year said the impact of the trauma harmed their sense of emotional well-being and significantly compromised their cognitive ability to perform mental tasks effectively. Results further indicate that two-thirds of survivors injured by gunfire expressed a need for psychotherapy and other types of supportive services to help them restore stability to their lives.

Data analysis shows that in addition to mental health support, 49% of survivors reported that they need the legal services of an attorney to advocate in court for monetary damages, which compensate them financially for the harm caused by their gunshot injury. In addition, 40% told investigators that they needed financial assistance to help them cover the cost of medical services and equipment associated with the physical harm caused by their firearm-related injuries. Another 25% of survivors surveyed said they needed homecare services because the gunshot injuries they sustained hurt their physical functioning, making it more challenging for them to perform tasks of daily living independently, and 7% said they required financial assistance to cover funeral expenses for their deceased loved ones. Researchers assert that survivors who seek mental health services to manage their symptoms after exposure to gun violence face psychological and social barriers to care that can complicate their recovery. Among them are:

- Complex feelings of sadness, bereavement, and extended grief associated with firearm deaths caused by homicide and suicide.

- Trauma-related feelings of anger, fear, and intimidation connected to membership in racial, ethnic, or religious minority groups at risk of being targeted for hate crimes involving gun violence in the community.

- Mental health professionals assert that a critical contributor to firearm injury and death in Black communities is the rising rate of police violence against people of color that exacerbates the collective trauma in these vulnerable communities, leaving survivors feeling unsafe and insecure in their homes and elsewhere. Statistics show that police officers shoot and kill Black Americans at three times the rate of White Americans, and unarmed Black men are four times more likely to die at the hands of law enforcement officials than their unarmed White peers. A social deterrent that inhibits many Black survivors of gun violence from seeking specialized trauma-centered services that could help them recover [12, 13].

In addition to the traumatic outcomes of gun violence for America's adult population, a significant share of service providers recognize that this kind of trauma can have a profound impact on the mental health of children and adolescents in the United States. According to a meta-analysis studies documented in a 2022 article in the New England Journal of Medicine, significant exposure to the aftereffects of gun violence, whether it be through a one-time occurrence or multiple incidents documented on social media platforms, has considerable long-term consequences for the emotional stability of children and teenagers that can harm their overall health. Findings point

out that direct exposure to gun violence contaminates the consciousness of young people, particularly those with underlying severe mental health issues. They highlight the contention that, like their adult counterparts, young people who witness incidents of mass shootings are more likely to develop symptoms of post-traumatic stress disorder (PTSD), which can interfere with their psychological and social development substantially. The study revealed that depending on the circumstances coinciding with the shooting, a single incident of firearm-connected violence can leave emotional scars on youth, which can do severe psychological damage to their behavior in the long term. The results of the studies reviewed further demonstrate the chronic trauma of gun violence that children and adolescents living in war zone neighborhoods where crime is high regularly experience has a direct impact on their social interaction with the adult world. Research has shown that young men exposed to multiple episodes of violence related to firearms are more likely to develop feelings of low self-esteem, interpersonal distrust, shame, and dependency that can severely compromise their ability to have meaningful social relationships with those outside their peer group. Investigators further assert that the normalization of firearm incidents in many at-risk communities of color causes many young people to become what scholars call child soldiers, subsequently organizing themselves into gangs to protect their neighborhoods from the violence caused by assailants. This situation, many academics say, raises the potential for these gang members to engage in gun violence themselves, further highlighting the necessity for clinical intervention to help survivors rebuild their lives through the implementation of specific types of social services [14].

6. Treatment interventions

As advocates for social justice, social workers are aware of their professional responsibility to address the traumatizing effects of gun violence in American society, which is jeopardizing the mental health of individuals and the collective safety and stability of communities. Social work educators contend the response of the profession to the gun violence crisis involves a multifaceted approach to finding practical solutions to the problem. According to a social justice brief issued by the National Association of Social Workers, addressing public health problems that significantly affect the well-being of individuals, families, and communities through evidence-based approaches to clinical intervention and prevention has been a long-standing tradition in the social work profession for over a century. Public health social workers typically utilize the interdisciplinary connection between social work and public health theories, research, and practice to develop effective social frameworks that encourage community resilience at the macro level through strategic approaches to organizing, policy transformation, and public advocacy that facilitate necessary action to resolve critical issues associated with crises [15]. Such is the case of mental health problems experienced by gun violence survivors. Social work professionals working with clients affected by gun violence can use a variety of trauma-centered interventions to help them cope with the emotional effects of the incident. The most common methods of clinical intervention used by social workers in these types of cases are:

- Trauma-focused cognitive behavioral therapy (TFCBT): an evidence-based counseling technique designed to help gun violence survivors understand the connections between their thoughts, feelings, and behaviors related to the incident.

- Eye movement desensitization and reprocessing (EMDR): an NASW-endorsed counseling technique used for the treatment of trauma that involves having the gun violence survivor recall painful memories of the incident while undergoing a form of bilateral sensory stimulation such as eye movements. Based on the theory that the human mind can heal from the adverse effects of psychological trauma much the same way as the human body recovers from physical trauma. Social workers with specialized training in EDMR have found it a valuable tool that enables survivors to reduce the psychological intensity of unwanted repeated recollections of traumatic events and other distressing symptoms of PTSD associated with the original gun violence incident.

- Narrative exposure therapy (N.E.T.): a therapeutic technique that social workers can implement to teach survivors how to integrate and process the traumatic events surrounding their experience of the gun violence incident into the larger context of their own life story. Studies have shown that N.E.T. is a very effective method of reducing PTSD symptoms in gun violence survivors, particularly in communities of race and ethnic diversity, where cultural sensitivity is an essential therapeutic goal of the process of clinical intervention.

- Group therapy: a therapeutic technique that social workers can use to create a supportive environment where gun violence survivors can feel safe to share the traumatic effects of the incident with others going through the same experience. The efficacy of this approach is backed up by clinical evidence that suggests social support is an essential element of the recovery process for those who are survivors of this type of violence.

- Play therapy and Art therapy: these are two age-appropriate therapeutic techniques that social workers can use with young children affected by gun violence to help them communicate their feelings connected to this type of traumatic experience more effectively than other, more traditional forms of verbal interaction between the clinician and the survivor. In both cases, social workers utilize various toys and other play materials as therapeutic tools to develop a safe place where children can talk about their innermost thoughts and emotions tied to gun violence incidents. Social workers note that these methods have shown clinical evidence of being effective ways of helping children impacted by gun violence to make sense of their experience and develop healthy coping mechanisms that build the resilience needed to enable them to recover.

7. Community-based strategies for gun violence prevention

In addition to providing crisis intervention services in the form of individual and group counseling to promote psychological healing among gun violence survivors, social workers can also use their professional community organizing skills to enhance understanding of the broader social determinants of the epidemic through education and the provision of tangible resources containing information outlining preventive measures residents in high-risk urban areas can implement to reduce the devastating consequences of this type of violence. To accomplish this goal, social workers must develop partnerships with local law enforcement agencies, political officials, and other stakeholders in the community to facilitate their engagement in grassroots action to

address this critical problem effectively. Some of the evidence-based measures that social workers can introduce to motivate stakeholder engagement in grassroots actions to reduce the potential for gun violence at the community level are the following:

- Work with community-based organizations to promote the establishment of a variety of firearm prevention programs that foster resilience and support networks that mitigate the traumatic effects of gun violence.

- Work collaboratively with stakeholders in communities impacted by high numbers of gun violence incidents as advocates for the introduction of policy measures, such as stricter gun control laws and improved access to mental health services for those individuals identified as being at increased risk of using guns to commit acts of violence.

- Work to engage stakeholders in research projects focused on developing a greater understanding of the social factors that motivate gun violence. Then, use that knowledge to educate the general public and policymakers about the most effective prevention strategies to reduce and eliminate such incidents.

- Work to establish education and training programs in high-risk communities to teach other healthcare professionals, law enforcement officials, and the general public about the adverse effects of gun violence and the importance of implementing trauma-informed care for survivors.

- Work to establish partnerships with local institutions in the community, such as schools and religious houses of worship, which have recently become more vulnerable to mass shooting incidents, to sponsor gun safety presentations focused on responsible firearm use and storage. They can also supply informational resources that residents can use if they encounter someone in their neighborhood who is at risk of misusing a gun.

- Work with community leaders to increase public funding for the implementation of enhanced prevention services that address the specialized needs of individuals and communities affected by the burden of poverty and social inequality that place them at higher risk for the onset of gun violence [16].

8. Recommendations and conclusions

The research findings reviewed document the social determinants of the uptick in gun violence in American society. The treatment methods discussed emphasize the critical importance of building a trusting relationship between social workers and clients to support the process of healing following episodes of violence related to firearms. The strategic methods of intervention described demonstrate how social workers utilize their organizing skills at the community level to educate and engage stakeholders in grassroots action to facilitate the reduction of incidents of violence related to guns in their neighborhoods and prevent future occurrences through the elimination of risk factors for this behavior.

In the aftermath of several high-profile mass shootings across the nation, such as the one at the Robb Elementary School in Uvalde, Texas, where the assailant,

18-year-old Salvador Ramos, used a military-grade AR-15 firearm to kill 19 fourth-grade children and two teachers while severely injuring 17 others in a brutal attack on May 24, 2022 [17]. The National Association of Social Workers called upon congressional leaders to take immediate action to pass federal legislation to end the epidemic of these terrible acts, which have devastated so many innocent lives. Three pieces of proposed federal legislation in 2021 representing significant steps toward curbing the gun violence crisis in this country that has received the backing of the NASW are the Bipartisan Background. Checks Acts (H.R. 8), the Enhanced Background Checks Act (H.R. 1446), and the Extreme Risk Protection Order Act (S. 1819/H.R. 3480), which are designed to expand and strengthen background checks for Americans who want to purchase a gun and restrict access to firearms to those individuals at-risk of harming themselves or others with a weapon.

In a public statement, the association's president, Dr. Mildred Joyner, remarked thoughts and prayers are a wonderful sentiment in the wake of such tragic events as school shootings. However, they do not resolve critical issues related to gun violence without implementing effective government legislation focused on firearm prevention. With this in mind, she recommends that social workers support the election of political officials who focus on finding legislative solutions to the gun violence epidemic [18].

The Prevention Institute offers similar recommendations for the reduction of gun violence in vulnerable communities that coincide with those suggested by the NASW. Using a public health approach to gun violence reduction to promote public safety, the institute makes the following recommendations to improve gun control laws in communities at risk for firearm violence. They recommend the adoption of the following evidence-based strategies for the reduction of violence associated with firearms:

- Implement sensible gun laws to reduce access to dangerous weapons by those at risk for violence.

- Expand the use of universal background checks for every American who wants to purchase a gun from local dealers that do not contain loopholes to keep firearms out of the hands of those with the potential to commit violence.

- Implement sufficient waiting periods that require a certain amount of days between when individuals purchase a firearm and when they can take formal possession of the weapon to prevent impulsive acts of gun violence like homicides and suicides.

- Establish a culture of gun safety to stabilize communities at high risk for firearm violence.

- Reduce firearm access by youth with a previous history of domestic violence, substance abuse, criminal conviction, and mental health problems through support for federal legislation such as domestic violence prevention bills and court-sanctioned gun violence restraining orders.

- Hold the gun industry accountable for ensuring adequate oversight of the marketing and sale of firearms and ammunition.

- Engage responsible gun dealers and owners in developing practical solutions to combat gun violence through the establishment of community-based firearm prevention measures.

- Support government legislation mandating nationwide training and licensing of gun owners.

- Develop safeguards for gun violence prevention at the community level through the implementation of public health initiatives such as Lock-It-Up, which teaches neighborhood residents how to store their guns safely [19].

Besides, the recommended guidelines for gun violence prevention put forward by the NASW and the Prevention Institute studies by researchers at the Johns Hopkins Center for Gun Violence Solutions show that several types of violence intervention programs can reduce acts of violence related to firearms in high-risk communities. Two conceptual models of service implementation that have made substantial strides in the battle to reduce the risk of gun violence in vulnerable communities of color nationwide are street outreach and violence interruption programs and hospital-based violence intervention programs. Street outreach and violence interruption programs use several types of evidence-based behavior modification techniques to reduce the potential for gun violence among high-risk individuals. These techniques include:

- Individual intervention sessions in which two or more community residents engaged in a dispute use a mediator to settle their differences without the potential risk of violence that could result in a shooting incident.

- The promotion of non-violent alternative responses to conflict situations that can trigger. A potential assailant to engage in acts of gun violence.

- The provision of social service support and coaching to individuals in the community with a previous history of engaging in high-risk behaviors that predispose them to episodes of violence involving the use of firearms.

Similar outcomes were also reported among high-risk patients receiving social services from hospital-based violence intervention programs, revealing a significant decrease in episodes of retaliatory behavior among patients previously injured in gun violence attacks and a substantial decline in engagement in future acts of victimization and violence related to guns. Clinical assessment of intervention programs such as these provides conclusive evidence that they are highly successful in reducing acts of gun-related violence among those at risk [20].

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Social Responsibility, Organisational Support, and Identification: An Approach to Non-profit Organisations

Elsa Justino and Gina Santos

Abstract

In an era where social responsibility is increasingly embedded in organisational strategy, this study scrutinises the infusion of social responsibility into the strategic underpinnings of non-profit organisations. Specifically, it aims to assess the influence of social responsibility initiatives on the organisational support and organisational identification of NGO employees to verify the impact of social responsibility initiatives on the organisational identification of NGO employees mediated by organisational support and to analyse the influence of organisational support on the organisational identification of NGO employees. Using a quantitative methodology, this study analyses the responses of 103 non-profit employees, focusing on the interplay between social responsibility, organisational support, and organisational identification. The research employs structural equation modelling to investigate these relationships, revealing a significant positive correlation between social responsibility initiatives and perceptions of organisational support. Furthermore, the findings suggest that organisational support serves as a pivotal mediator between social responsibility practices and employees' identification with their organisation. These insights offer profound implications for non-profits striving to amplify their societal impact, contributing to the broader discourse on organisational management and sustainability. A dynamic interplay wherein robust organisational support enhances employees' alignment with their organisation's social objectives, thereby reinforcing the commitment to social responsibility.

Keywords: social work, social responsibility, non-profit organisations, organisational identification, organisational support

1. Introduction

In the modern era of heightened social consciousness, the imperative of social responsibility (SR) has become a cornerstone in organisational management, particularly within non-profit entities. As society confronts a myriad of pressing challenges, ranging from environmental crises to social inequalities, the role of organisations in actively addressing these issues has never been more critical. Historically esteemed

as vanguards of societal and ecological welfare, non-profit organisations are increasingly recognised as critical players in this evolving landscape. However, the effectiveness of these organisations in championing and integrating SR hinges fundamentally on an in-depth understanding of the internal mechanisms that drive the adoption and practical implementation of SR initiatives.

As so, it is imperative to promote perceived organisational support (POS) [1, 2] for those who support people, as it fosters a conducive environment for implementing social responsibility strategies, particularly in non-profit settings. The concept of organisational identification [3] is equally critical, as it encompasses the alignment of individual and organisational values, a phenomenon especially pertinent in the non-profit sector.

The effectiveness of social workers is significantly enhanced by organisational support [4–6] and corporate social responsibility (CSR) initiatives, which are crucial for engagement with and identification of organisations [3]. This backing facilitates the formation of more robust collaborative networks and the implementation of more efficient strategies to reach those in need. Moreover, integrating social responsibility practices within organisations benefits the community. It strengthens employee identification and commitment to the organisation's mission and values, creating a more cohesive and impact-oriented work environment.

With their unique mission-driven focus, non-profit organisations represent a distinct context where social responsibility, POS, and identification can be profoundly influential. A significant research gap exists in analysing how these elements interact within non-profit environments, particularly considering their unique operational dynamics. The primary objectives of this research are to investigate the extent to which social responsibility initiatives influence organisational support and identification within non-profit organisations and to explore the mediating role of organisational support in this relationship.

The main objectives of this research are (1) to assess the influence of social responsibility initiatives on the organisational support and organisational identification of NGO employees in Northern Portugal; (2) to verify the impact of social responsibility initiatives on the organisational identification of NGO employees in Northern Portugal, mediated by organisational support; and (3) to analyse the influence of organisational support on the organisational identification of NGO employees in Northern Portugal.

This study, grounded in an extensive literature review, aims to shed light on the crucial role of organisational support in non-profit environments. By exploring the interconnections between social responsibility, organisational support, and organisational identification, this research seeks to unravel the intricate dynamics that shape the culture and guiding principles of non-profit entities in Northern Portugal. In doing so, the study offers valuable perspectives that could empower non-profit organisations to enhance their societal impact and pave the way towards a more sustainable and inclusive future.

2. Literature review background

2.1 Corporate social responsibility

Corporate Social Responsibility (CSR) intersects historically with the development of social responsibility in a multidisciplinary context. CSR embodies scenarios where corporations adopt an expansive business perspective, acknowledging their societal impact. Carroll [7] formulated a comprehensive CSR model that encapsulates

economic, legal, ethical, and philanthropic responsibilities, all aimed at wholly embracing societal roles.

In terms of economic responsibilities, companies are required to align their operations with profit maximisation goals while ensuring high operational efficiency. This alignment involves commitments to productivity and profitability [8]. Concurrently, adherence to legal standards is imperative, reflecting companies' obligation to operate within the legal frameworks that govern their economic activities [7]. Beyond legal compliance and profit generation, ethical and philanthropic responsibilities compel companies to operate by ethical standards, minimising harm to stakeholders and positively influencing the community, enhancing stakeholders' quality of life [8–10].

CSR has been integrated into the broader discourse on competitiveness and sustainability as an operational and multidisciplinary domain, particularly in globalisation. It promotes shared values and reinforces solidarity and cohesion [11]. In recent years, social responsibility has become a central concern for organisations, with political leaders recognising the societal responsibilities that extend beyond profit-oriented motives [12, 13]. CSR has evolved as a strategy for enhancing service quality and boosting employee satisfaction, which, in turn, positively influences the quality of services provided to external customers [14, 15]. The synergy between CSR and service quality is evident, with CSR addressing both the practical needs of customers and their social and environmental concerns [16].

In the non-profit sector, the adoption of social responsibility strategies has been increasing in response to various social, environmental, and economic pressures. Environmental strategies tackle global challenges such as climate change, resource scarcity, and pollution, while socio-economic strategies [17] address issues like poor working conditions and human rights violations. The proactive measures of these organisations in implementing community engagement programmes, environmental sustainability efforts, ethical sourcing practices, and transparency and accountability initiatives demonstrate their commitment to addressing these multifaceted societal, environmental, and economic challenges, fulfilling their overarching mission [18–21].

In conclusion, the importance of CSR in both the corporate and non-profit sectors underscores its relevance in contemporary society. As organisations continue to navigate the complexities of global challenges, the role of CSR in shaping sustainable and ethical business practices remains a critical area for ongoing research and application.

2.2 Organisational support

In non-profit organisations, organisational support is indispensable for their effective functioning. This element is particularly crucial in non-profits, where resource constraints are typical, and the commitment of employees and volunteers is a critical factor in achieving organisational goals.

POS is determined by the frequency, intensity, and authenticity of organisational recognition, commendations, and the provision of both material and social rewards to staff. The foundations laid by [4–6] highlight that when staff feel their contributions are valued and their welfare is cared for, there is a notable increase in their engagement and commitment. This commitment translates into tangible organisational benefits, including enhanced collaboration, increased job satisfaction, and stronger organisational loyalty, reducing turnover and absenteeism, culminating in improved overall performance [22, 23].

In the unique context of non-profit organisations, where the emphasis is more on societal impact than profit generation, the significance of POS becomes even more

pronounced. Challenges such as limited funding and a reliance on volunteerism underscore the importance of fostering an environment that promotes solidarity and mutual support. When employees and volunteers feel acknowledged and valued, their commitment intensifies, driving them to invest additional effort in achieving the organisation's objectives [4, 24]. In such settings, supportive leadership that endorses innovation and provides constructive feedback is crucial. The role of management in nurturing POS and fostering a culture of innovation and trust is vital [25].

POS initiates a cycle of social exchange where employees feel obligated to assist the organisation in achieving its goals, expecting their heightened efforts to reciprocate with greater rewards. This process meets socio-emotional needs and leads to a more robust identification with and dedication to the organisation, enhancing the desire to contribute to its success and improving psychological well-being [26].

The work of Glavas and Kelley [27] highlights that perceptions of CSR are positively related to organisational commitment, mediated by work meaningfulness, and POS. This aligns with [28, 29], who underscored the pivotal role of CSR in shaping employees' perceptions of organisational support and identity.

Eisenberger et al. [4] posited that employees who perceive care, support, and a sense of attachment from their organisation would likely exhibit better performance. Firms prioritising employee well-being tend to enhance the overall perception of support [30]. Consistent with the reciprocity principle of social exchange theory [4, 31], organisational support encourages employees to reciprocate with improved performance [32], a finding supported by research from Armeli et al. [33], which indicates a significant increase in employee performance linked to organisational support [34].

Drawing from social exchange theory [31], high POS is expected to invoke reciprocity norms, motivating employees to contribute more effectively to organisational goals and anticipating adequate recognition and rewards for their efforts [26]. In conclusion, the role of organisational support in non-profit organisations extends well beyond theoretical concepts, profoundly impacting their operational outcomes [1]. By creating and maintaining a supportive environment [2], non-profits can ensure that their staff and volunteers are committed, creative, and innovative, all vital for successfully achieving their mission. As non-profits play a crucial role in addressing societal challenges, understanding and enhancing organisational support is paramount.

H_1: Social responsibility directly influences POS.

2.3 Organisational identification

Organisational identification (OID) is critical in organisational psychology and management, particularly within non-profit organisations. It defines an individual's profound connection with an organisation, resulting in a merger of personal and organisational identities, as Mael and Ashforth [3] described. This deep connection often leads individuals to internalise the organisation's achievements and setbacks as their experiences. In non-profit environments, OID mainly reflects the strong alignment of individuals with the organisation's mission and values.

Our study, grounded in organisational support theory (OST) [4], reveals that the perception of organisational support significantly influences OID. OST posits a reciprocity-driven dynamic: Employees who perceive their organisation as supportive tend to experience increased feelings of obligation, trust, and expectation of recognition for their efforts. This dynamic fosters a profound dedication to the organisation. In non-profit settings, individuals are more likely to develop a heightened sense of

responsibility and trust when they sense concrete organisational support, anticipating their contributions to be acknowledged and valued. This perceived support ignites a deep commitment to the organisation's core mission.

Additionally, the relationship between organisational support and identification, as observed by Chen et al. [35], further substantiates the importance of these dynamics across diverse sectors, including healthcare.

Beyond the principles of reciprocity, the satisfaction of socio-emotional needs is critical in strengthening OID and affective loyalty to the organisation. Mael and Ashforth [3] observed that individuals with strong organisational identification perceive the organisation's successes and challenges as personally impactful. Similarly, Turban and Greening [36] found that an organisation's social performance significantly influences its attractiveness to potential employees, further highlighting the connection between CSR initiatives and organisational identification. This enhanced sense of identification is fuelled by the organisation's ability to meet employees' socio-emotional needs, including esteem, approval, affiliation, and emotional support [33].

The perception of organisational support thus catalyses OID, meeting these socio-emotional needs and providing employees with comfort, purpose, and meaning in their roles. OID is fundamentally linked to employees' overall perceptions of well-being concerning organisational support, shaping their loyalty and identification with the organisation. In the non-profit sector, the essence of OID lies in how individuals perceive and value the organisation's acknowledgement of their emotional and dedicated engagement with its cause, which significantly influences their loyalty and alignment with the organisation's vision. This perceived support ignites a deep commitment to the organisation's core mission. Additionally, the research by Galvin et al. [37] reinforces the multi-dimensional nature of organisational identification, highlighting how an organisation's social responsibilities externally influence and shape internal perceptions and identification. Their insights contribute to a broader understanding of how non-profit organisations' actions in the social realm impact the OID of their employees and volunteers.

In conclusion, a comprehensive understanding of OID within non-profit institutions underscores how closely individuals align with the ethos and goals of the organisation. Analysing OID through the prism of POS offers invaluable insights for non-profit organisations, aiding them in bolstering affiliation and commitment among their staff and volunteers. This, in turn, enhances the organisation's effectiveness in achieving its mission and goals.

H_2: Social responsibility promotes organisational identification.

H_3: When mediated by organisational support, social responsibility influences organisational identification.

2.4 Non-profit organisations

Defining a country's social, political, and economic landscape often involves categorising its organisational structures into three broad sectors: public, private, and third. The "third sector", commonly referring to non-profit organisations and a wide array of social initiatives within civil society, remains a term with varied interpretations both in Portugal and internationally. This sector, enveloping a diverse range of organisations, lacks a universally agreed-upon definition, leading to challenges in acknowledging its distinct yet parallel importance to the first and second sectors [38].

Third-sector organisations are primarily distinguished from traditional businesses by their mission-driven focus, including cultural, educational, research, recreational,

social service, philanthropic, or environmental advocacy activities. Despite their entrepreneurial capabilities, these organisations are unique in that profits are not distributed among employees but reinvested into mission-related activities [39].

These organisations frequently face funding challenges, leading them to engage in for-profit activities alongside their non-profit mission. The profits from these activities are funnelled back into supporting their overarching mission. This introduces a business aspect to many third-sector organisations, necessitating the application of CSR principles. The quality of services and employee satisfaction become strategic priorities, because these organisations not only address gaps left by the state or market but also due to the nature of their mission [40, 41]. A deeper understanding of organisational support, identification, and social responsibility becomes essential.

We use "non-profit organisations" for this discussion to clarify and avoid the broader definitional ambiguities associated with the term "third sector". This choice allows for a more focused examination of these entities, their operational challenges, and their critical role in addressing societal needs and contributing to the social fabric.

In summary, non-profit organisations play a unique role in our society as critical components of the third sector. Their mission-driven approach, combined with the necessity to engage in entrepreneurial activities for sustainability, underscores the importance of understanding their dynamics and their crucial role in bridging societal gaps.

2.5 Social responsibility and social work: An overview

The interwoven history of social responsibility and social work is a testament to their concurrent evolution over time, dating back to the origins of social work [42]. This evolution was propelled by a growing commitment to societal welfare and justice, with issues like poverty, child labour, and poor working conditions igniting numerous social reform movements.

Pioneers such as Jane Addams and the establishment of Hull House in Chicago, the Charities Organisation Societies (COS) in the United States and England, and the Women's University Settlements, were instrumental in the early development of social work [43]. Their efforts, aimed at improving the lives of immigrants and the urban poor, reflected a commitment to societal responsibility. They played a pivotal role in shaping modern social work, marking a significant shift towards addressing broader societal issues [44].

Throughout the 20th century, social work became increasingly integrated with government policies and social welfare programs. This period saw governments globally acknowledging the importance of social responsibility, with social workers emerging as critical players in implementing and advocating these programs, exemplified by initiatives like the National Health Service in the United Kingdom [45].

In recent decades, the scope of social work has broadened beyond traditional social services to encompass advocacy, policy analysis, and community development, intersecting significantly with the concept of CSR. CSR, which calls for businesses and corporations to be accountable for their societal impact, aligns closely with the principles of modern social work. This alignment has led to social workers advocating for responsible corporate practices and encouraging corporate contributions to social projects and community causes.

Today, social workers collaborate with various stakeholders, including businesses, government agencies, and non-profit organisations, to tackle complex social issues.

This collaboration is underpinned by a mutual recognition of social responsibility and a shared commitment to improving the well-being of individuals and communities.

In conclusion, the historical nexus between social responsibility and social work has significantly influenced the evolution of both fields. Social work has transitioned from philanthropic acts and early reform efforts to a formalised profession actively addressing contemporary social challenges. Simultaneously, social responsibility has broadened to encompass governmental actions and corporate and organisational roles in promoting societal well-being. As society continues to evolve and confront new challenges, the interplay between social responsibility and social work is expected to be a driving force in shaping the future trajectory of social work. This evolving relationship highlights the importance of continued collaboration and innovation in both fields to effectively address the ever-changing landscape of social needs.

2.6 Conceptual research model

As depicted in **Figure 1**, the conceptual research model intricately maps the relationships among three critical constructs within the scope of non-profit organisations in Northern Portugal: CSR, organisational support, and organisational identification. Central to our study, this model elucidates the dynamic interplay between these essential themes.

At its core, CSR is hypothesised as a key influencer, potentially shaping both organisational support (H1) and organisational identification (H2). Organisational support is anticipated to have a multifaceted role, directly affecting organisational identification (H3) and acting as a conduit linking CSR to organisational identification (H4).

Our conceptualisation draws upon a rich bedrock of prior research, integrating insights from diverse scholarly contributions. It reflects dimensions from seminal works, such as Glavas and Kelly's [27] exploration of CSR's organisational impacts, Maignan and Ferrell's [46] insights on corporate citizenship, Mueller et al.'s [47] discussions on organisational support, and the foundational theories of Turker [48, 49], Eisenberger et al. [4], and Mael and Ashforth [3]. This eclectic integration ensures our
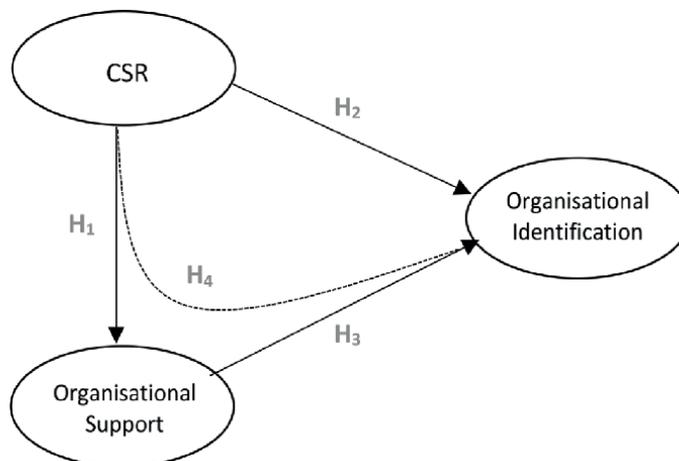

Figure 1.
Conceptual research model.

framework's comprehensiveness and robustness, providing a nuanced understanding of the constructs at play.

In the forthcoming sections, we will explore the methodology designed to test our model empirically. This exploration aims to illuminate the nuanced dynamics of social responsibility and its subsequent influences on the behaviours and identities of individuals within non-profit organisations in Northern Portugal, thereby contributing a new dimension to the existing body of knowledge in this field.

3. Methodology

3.1 Sample and procedure

This research embarked on a quantitative exploration to examine the potential relationships between social responsibility, organisational support, and organisational identification among employees in non-profit organisations in Northern Portugal. Adopting both exploratory and descriptive approaches, the study used a custom-designed questionnaire, distributed in 2018 to employees of non-profit organisations in Northern Portugal.

The questionnaire comprised two main sections: the first focused on social responsibility, organisational support, and organisational identification, while the second part gathered sociodemographic data, including gender, age, and education level. The sample encompassed 103 employees, predominantly female (87%), aged 22 to 59. Educational backgrounds varied, with 38.8% holding higher education degrees, 25.24% completing secondary education, and 26.21% finishing obligatory education. Notably, 24.27% were professionals in the social work field.

Structural equation modelling using the Partial Least Squares (PLS-SEM) approach was applied for data analysis, enabling a rigorous evaluation of the hypothesised relationships within the research model.

3.2 Scales

To ensure the study's validity and contextual relevance, the questionnaire items were carefully translated and adapted from established scales used in prior research. These instruments were selected for their proven effectiveness in capturing specific organisational perspectives relevant to this study:

Employees' Perception of CSR Activities: Adapted from the works of Glavas and Kelly [27], Maignan and Ferrell [46], Mueller et al. [47], and Turker [48, 49], this 12-item scale measures employees' views on CSR initiatives in their organisations.

Perceived Organisational Support: Comprising eight items, this scale is based on Eisenberger et al. [4]. It aims to comprehensively assess employees' perceptions of the support they receive from their organisations.

Organisational Identification: Employing a six-item scale adapted from Mael and Ashforth [3], this measure explores how employees identify with their organisations.

A consistent seven-point Likert scale, ranging from 1 ("strongly disagree") to 7 ("strongly agree"), was used for all measures to maintain uniformity in responses. Sociodemographic variables were also included to control for potential confounding effects.

In summary, the methodology of this study was meticulously crafted to explore the intricate dynamics of social responsibility, organisational support, and

organisational identification in the non-profit sector. The chosen instruments and analytical techniques were tailored to comprehensively address the study's objectives, ensuring the investigation's depth and rigour.

4. Results

4.1 Results of analysis

In evaluating the measurement model, initial steps involved elucidating some of the psychometric properties of the three constructs integral to the proposed model, namely, *social responsibility* (12 items), *organisational identification* (6 items), and *organisational support* (8 items). Additionally, the definitions adopted for these constructs were expounded upon.

To estimate the proposed model, Partial Least Squares Structural Equation Modelling (PLS-SEM) was employed, as per the methodologies articulated by Lohmöller [50] and Wold [51]. PLS-SEM was favoured due to its less stringent requirements concerning the underlying data distribution and sample size, in contrast to covariance-based structural equation modelling (CB-SEM). The latter imposes constraints related to distributional properties (multivariate normality), measurement level, sample size, model complexity, identification, and factor indeterminacy [52, 53]. The analysis was conducted utilising the SmartPLS 4 software [54].

The PLS algorithm employed the Path Weighting Scheme as the weighting scheme. The initial values assigned for the outer model relationships were set at 1.0, and the data underwent standardisation, characterised by a mean of 0 and a variance of 1. The algorithm was configured to a maximum of 3000 iterations with an abort criterion set at 10^{-7}.

Evaluation of the PLS-SEM model is contingent upon bootstrapping, a resampling procedure. The specific bootstrapping settings implemented utilised cases equivalent to the sample size (103), with 10,000 replications.

4.2 Results presentation and analysis

4.2.1 Outer model (measurement model)

For the evaluation of the outer model, the study followed the guidelines and recommendations presented by [53, 55, 56]. This involved assessing indicator reliability [57], internal consistency reliability [58], and convergent validity [58].

In an initial assessment of the model, four items from the *organisational support* construct displayed factor loadings below 0.4. As a result, they were removed, leaving the *organisational support* construct with just four items.

To ascertain reliability, two measures were presented in **Table 1**: Composite Reliability (CR) and Cronbach's Alpha (α). The values for Cronbach α ranged from 0.932 to 0.976, and the CR values varied between 0.940 and 0.977, all exceeding the threshold of 0.70, thereby confirming internal consistency reliability.

Validity pertains to the attribute of a measuring instrument that assesses its capability to measure the intended construct accurately. For each latent variable within the model, three forms of validity were scrutinised: factorial, convergent, and discriminant.

Construct	CR	*Cronbachs α*	AVE
Social Responsibility	0.977	0.976	0.791
Organisational Support	0.948	0.948	0.865
Organisational Identification	0.940	0.932	0.752

Table 1.
Assessment of construct reliability (CR and Cronbach's α) and convergent validity (AVE) within the model.

Factorial validity is established when the specification of items within a specific construct is accurate, meaning the items effectively assess the factor intended to be measured. This form of validity is typically evaluated by examining standardised factorial loadings. In the context of PLS-SEM analyses, the construct is generally posited to possess factorial validity if the standardised factorial values of all items are 0.7 or higher [52]. In this study, all remaining items across the various constructs exhibited factorial loadings exceeding 0.7 (Appendix A, **Table A1**), confirming factorial validity.

Convergent validity is assessed through the average variance extracted (AVE) and is established when items that reflect a specific factor exhibit strong saturation with that factor. This implies that the behaviour of these items is predominantly explained by the intended factor [59]. An AVE value exceeding 0.5 is indicative of satisfactory convergent validity. As depicted in **Table 1**, the AVE values in this study ranged from 0.752 to 0.865, surpassing the 0.5 threshold, thereby affirming convergent validity as per the criteria set by [58].

It can be conclusively asserted that all constructs demonstrate commendable psychometric properties in terms of both reliability and validity.

In social responsibility, the study pinpointed three pivotal dimensions indicative of an organisation's commitment to ethical conduct and societal welfare. "*The organisation takes great care to ensure that our work does not harm the environment*" registered a substantial factor loading of 0.940, signifying a conscientious approach to environmental sustainability. Additionally, "*The organisation provides its students with complete and accurate information about its services*" demonstrated a strong commitment to transparency, with a factor loading of 0.921. Lastly, "*The organisation aims for sustainable growth that takes future generations into account*" encapsulated a forward-looking perspective on social responsibility, endorsed by a commendable factor loading of 0.914.

Within the construct of organisational support, two paramount items emerged, underscored by their hefty factor loadings. "*The organisation takes pride in my accomplishments at work*" stood out as a compelling indicator with a factor loading of 0.963, underscoring the profound recognition and value employees feel from their organisation. Similarly, "*The organisation cares about my general satisfaction at work*" resonated deeply, with a factor loading of 0.947. This heightened the organisation's concern for employee well-being, which is intrinsically tied to its overarching sense of support. With their significant loadings, both items illuminate the core tenets of POS, shedding light on the pivotal area's organisations should address to bolster this perception.

Turning our focus to organisational identification, we identified three relevant items marked by substantial factor loadings. "*When someone praises this institution, for me, it's like a personal compliment*" emerged as a potent indicator with a factor loading of 0.946, highlighting employees' deep-rooted emotional connection with their organisation. "*The successes of this institution are my successes*", echoed this sentiment,

with a factor loading of 0.919, underlining the alignment of personal achievements with organisational triumphs. Furthermore, "*If a media report criticised this institution, I would feel embarrassed*" emphasised the vulnerability of organisational identity, boasting a noteworthy factor loading of 0.901.

Crucially, this study elucidates the pivotal role of organisational support, both as a direct influencer and mediating force through organisational identification, in shaping an organisation's commitment to social responsibility. The findings underscore the intricate web of relationships that bind these latent constructs, shedding light on the nuanced mechanisms through which they collectively impact organisational outcomes.

4.2.2 Inner model (structural model)

PLS-SEM diverges from CB-SEM because it does not yield fit indices such as CFI or RMSEA. Instead, the evaluation of a PLS model hinges on prediction-oriented, non-parametric measures [60]. The assessment of the PLS structural model primarily involves the R^2 of the endogenous latent variable [60], effect size f^2 [61], and the Stone-Geisser Q^2 test for predictive relevance [62, 63]. The model's predictive power was scrutinised utilising R^2. Through the PLS algorithm function in SmartPLS 4, the R^2 of the endogenous latent variables in the model were computed, revealing values ranging from 68.4% for the organisational support construct to 68.8% for the organisational identification construct. Notably, all values surpassed the acceptable threshold of 10% [64], indicating substantial explanatory power.

The effect size (f^2) is a complementary measure to R^2, evaluating the relative impact of a specific exogenous latent variable on an endogenous latent variable through alterations in the R^2 value [61]. This was calculated utilising Cohen's [61] formula $f^2 = (R^2_{included} - R^2_{excluded})/(1 - R^2_{included})$, which designates f^2 values of 0.02, 0.15, and 0.35 as indicative of small, medium, and large effect sizes, respectively, for the predictive variables. Within the scope of our study, a large effect size was observed for social responsibility on Org. Support (f^2 = 2.168), alongside medium effect sizes for social responsibility on organisational identification (f^2 = 0.226) and organisational support on organisational identification (f^2 = 0.158). The effect sizes of the latent variables at the structural level are delineated in **Table 2**.

The predictive relevance of the endogenous latent variables— Organisational identification and social responsibility—was scrutinised by utilising Stone-Geisser's Q^2 statistic [62, 63]. Employing the blindfolding resampling approach with an omission distance set at 7, the model's predictive power was examined by applying Stone-Geisser's Q^2, a cross-validated index [65, 66]. The obtained Q^2 values for organisational identification (Q^2_{OI} = 0.626) and organisational support (Q^2_{OS} = 0.672) constructs exceeded zero, thereby indicating the model's predictive relevance [60].

Paths	R^2	f^2	f^2 effect
Social Responsibility → Org. Support	0.684	2.168	Large
Social Responsibility → Org. Identification	0.688	0.226	Medium
Org. Support → Org. Identification	0.688	0.158	Medium

Table 2.
Effect sizes of latent variables within the structural model.

4.3 Hypothesis testing

The hypotheses were evaluated by scrutinising the significance of the path coefficient estimates across the three paths in the inner model. A bootstrap technique was employed to yield more credible standard error estimates, as Tenenhaus et al. [65] recommended. In alignment with the methodology outlined by Hair et al. [52], 10,000 resamplings with replacement were conducted, with the number of bootstrap cases equivalent to the original 103 observations, to generate standard errors and compute t-statistics.

Figure 2 presents the results derived from the *SmartPLS* analysis, emphasising the R^2 values associated with each latent endogenous variable. Additionally, the figure delineates the regression coefficients pertaining to the inner model and the factorial loadings corresponding to each item within the constructs of the outer model.

As evident from the structural model assessment (**Table 3**), all trajectories exhibit statistical significance, supporting all the posited hypotheses. It is noteworthy that organisational support influences social responsibility both directly ($\beta_{OrgId.SR}$ = 0.473; t = 4.481) and indirectly, mediated by organisational support ($\beta_{OrgId|OrgSup}$ = 0.327; t = 3.653).

Figure 2.
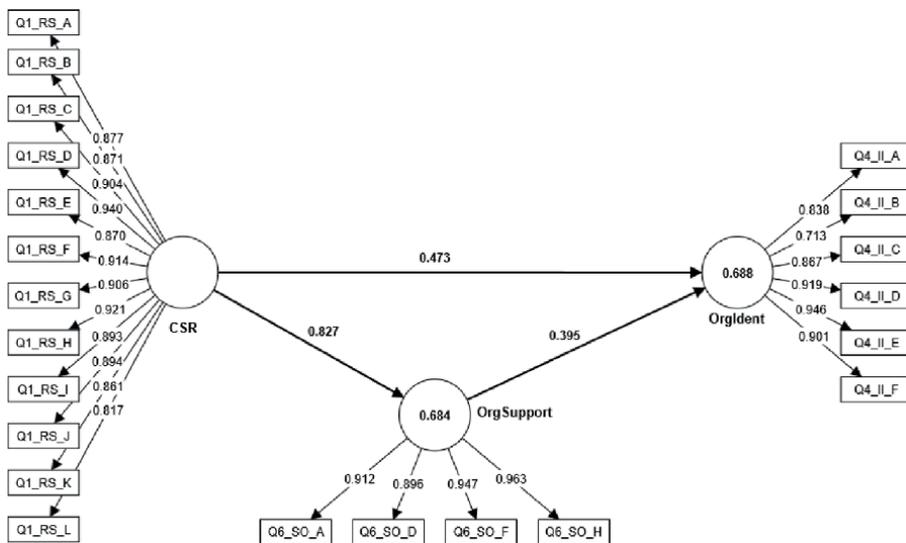*SmartPLS output.*

Hypothesis	β	t	Supported hypothesis?
H(1): Social Responsibility → Org. Support	0.827	17.792	Yes
H(2): Social Responsibility → Org. Identificat.	0.473	4.497	Yes
H(3): Org. Support → Org. Identification	0.395	3.664	Yes
H(4): Social Responsibility → Org. Identificat. (mediated by Org. Support)	0.327	3.653	Yes

Table 3.
Assessment of path analysis.

5. Discussion

Our study aimed to explore the complex interplay between social responsibility, organisational support, and organisational identification within non-profit organisations in Northern Portugal. Mirroring our structural model assessment findings, the data supported all our hypotheses. Organisational support emerged as a critical mediator, directly and indirectly influencing social responsibility.

The significance of social responsibility in enhancing organisational support, as indicated by the strong path coefficient in H1, aligns with the work of Glavas and Kelley [27]. This underscores the positive perception of employees in organisations actively engaged in CSR initiatives. Our findings resonate with McWilliams and Siegel [28] and Scott and Lane [29], highlighting the role of CSR in shaping organisational support.

Further, the impact of POS on organisational identification, as observed in H3, echoes the principles of social exchange theory [4] and is supported by findings from Chen et al. [35]. This suggests that employees' perception of organisational value significantly influences their sense of identification.

The role of social responsibility in fostering organisational identification, as evidenced in H2 and H4, corroborates studies by Mael and Ashforth [3] and Galvin et al. [37]. Turban and Greening [36] further reinforce the importance of CSR initiatives.

6. Conclusions

This research aimed to dissect the relationships between social responsibility, organisational support, and organisational identification in non-profits in Northern Portugal. Our findings demonstrate a robust link between an organisation's societal welfare commitment and employees' perceptions. The data reveal that employees value environmental sustainability, transparency, and visions for sustainable growth, confirming the tri-dimensional nature of social responsibility.

The role of leading and supporting the development of many non-profit organisations is played by social workers. Social workers in managerial roles are expected to deliver operational results with impact. By creating and maintaining a supportive environment, non-profit organisations ensure their staff is aligned with the mission. Given that non-profit organisations play a crucial role in solving social challenges, it is crucial to understand and improve organisational support. The development of social work in societal change and the pursuit of social justice will gain from socially responsible practices, the commitment to ethical conduct, and societal welfare.

The study underscores the intertwined nature of these constructs, with organisational support acting as a powerful mediator. This reinforces the notion that a commitment to social responsibility can enhance support and identification among employees, creating a positive feedback loop beneficial for non-profits.

Despite its insightful findings, our study's focus on Northern Portugal may limit its generalisability. Future research could expand this investigation to other regions and contexts, including for-profit sectors, and employ a mixed-methods approach for deeper insights.

Overall, our study sheds light on the symbiotic relationship between an organisation's social responsibility ethos, the support it provides, and the sense of identification it fosters among employees. This understanding is crucial for non-profits striving to achieve their missions effectively.

Acknowledgements

A. Appendix

Construct	Item	λ
Social Responsibility	Q1_RS_D - The organisation takes great care so that our work does not harm the environment	0.940
	Q1_RS_H - The institution provides its students with complete and accurate information about their services	0.921
	Q1_RS_F - The organisation aims at sustainable growth that considers future generations	0.914
	Q1_RS_G - The organisation contributes to cultural and charitable projects aimed at promoting the well-being of society	0.906
	Q1_RS_C - Environmental issues are an integral part of my organisation's strategy	0.904
	Q1_RS_J - The institution ensures a work environment conducive to the well-being of workers	0.894
	Q1_RS_I - The institution is concerned with the needs and desires of the workers	0.893
	Q1_RS_A - The organisation participates in activities that aim to protect and improve the quality of the environment	0.877
	Q1_RS_B - The organisation implements special programs to minimise its negative impact on the natural environment	0.871
	Q1_RS_E - The organisation develops activities to reduce the consumption of energy and other resources	0.870
	Q1_RS_K - Contributing to the satisfaction and well-being of students is a priority for the institution	0.861
	Q1_RS_L - My institution encourages employees to participate voluntarily in volunteer activities	0.817
Organisational Support	Q4_II_E - When someone praises this institution, it feels like a personal compliment.	0.946
	Q4_II_D - This institution's successes are my successes.	0.919
	Q4_II_F - If a story in the media criticised the institution, I would feel embarrassed.	0.901
	Q4_II_C - When I talk about this institution, I usually say 'we' rather than 'they'.	0.867
	Q4_II_A - I am very interested in what others think about this institution.	0.838
	Q4_II_B - When someone criticises this institution, it feels like a personal insult.	0.713
Organisational Identification	Q6_SO_H - The organisation takes pride in my accomplishments at work.	0.963
	Q6_SO_F - The organisation cares about my general satisfaction at work.	0.947
	Q6_SO_A - The organisation values my contribution to its well-being.	0.912
	Q6_SO_D - The organisation really cares about my well-being.	0.896

Table A1.
Factor loadings for each model item in detail.

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Social Work - Perceptions for a New Era focuses on resilience, well-being, and justice in social work, reflecting a diverse and innovative approach. In an era marked by rapid technological advancements, evolving societal norms, and unprecedented global challenges, the field of social work stands at a critical crossroads. This book brings together diverse perspectives and approaches to address the multifaceted dimensions of social work in the contemporary world. It illuminates the evolving view of social work, highlighting its contribution to fostering resilience, promoting wellbeing, and advocating for justice.

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