

SOCIAL WORK WITH TROUBLED FAMILIES

A CRITICAL INTRODUCTION

EDITED BY KEITH DAVIES

International Perspectives

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Taking a step back from the preoccupations of the debate in the UK, this chapter will look at policy and practice abroad. Research findings from the United States will be considered, but the chapter will also seek to think through the relevance of the concept of 'troubled families' cross-culturally by reviewing the international literature on family-oriented social work.

Introduction

While 'troubled families' may be a particularly UK concept, working with families in difficulty is naturally the focus of social workers' attention all over the world. In considering how an international perspective might provide some alternative perspectives that could inform the debate of how best to work with troubled families, this chapter will initially examine perspectives drawn from the developing (or 'non-Western') world, then return to the developed (or 'Western') world. It is recognised that this distinction is not particularly helpful, as many countries feature elements of both 'worlds' – i.e. marginalised poor communities alongside privileged and richer elite groups, so there may be some interweaving. However there are 'lessons' to be learnt from even very dissimilar situations and this chapter will consider selected examples of work with families from countries as diverse as Vietnam, the Maldives, Zimbabwe, South Africa, Spain, Jamaica, New Zealand, Guatemala,

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Introduction

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Chile, Argentina, the United States, Denmark and the Netherlands. Key issues concern the place of the family in the modern world, particularly the loss of the extended family and its support systems, the pressures on families to survive in a time of austerity, the impact of disease, conflict and migration and the need to try to bring families back together where they have become fragmented to help its members, while helping prevent problems arising in the first place.

The current *Global Definition of Social Work* states that 'Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work' (IFSW 2014). This has profound implications for thinking through what diversities really mean, and in the context of working with families this comprises many different situations – from the constituent individuals to the broader society – and working in different social, political and cultural contexts. Although social work's origins are in Europe and America and the profession has spread around the world, Payne and Askeland (2008) point out that we need to question whether Western models of social work practice and organisation are universal. Their answer is that although this may provide something of a framework for understanding social work, different cultural assumptions and social needs require different approaches to social work and that 'a worldwide view of social work might be richer if it included ideas from other perceptions in non-Western countries' (Payne and Askeland 2008, p.4). Of course, Western countries themselves differ widely in the way they deal with social problems, so there are certainly a variety of approaches to draw on. Dealing with 'troubled families', or working with families with multiple social problems, is one such area, with diverse and even conflicting approaches manifest.

Breakdown of the extended family

Cox and Pawar (2006) point out how important the family is in the developing world context and suggest several reasons why this is the case: caring services are located in the household; the household economy is very important, particularly where social

safety nets are lacking; the provision of health and education relies very much on the cooperation of the family, especially in relation to females and children; and it is the family unit that is most affected when things go wrong. This is often not the case today however where the family is often under severe stress. As Cox and Pawar (2006, p.139) note: 'All local workers, however, will always need to bear in mind the roles of the family, the pressures on families in a specific context, and the likely implications for families of any activities undertaken locally.'

The nature and form of the family is something that is very changeable. As Lawrence *et al.* (2009) note, there is the distinction between the nuclear family – more common in Western societies – and the extended family – much more significant in non-Western societies – which often consists of three generations, with aunts, uncles and cousins often sharing the same home or living in close proximity to each other. Such extended families were able to meet the practical, social and emotional needs of family members, provided constraints and opportunities for those members and contributed to creating stable societies. This is still the case to some extent, but in many ways the role of the family has been significantly weakened by a variety of factors.

In much of the developing world, families are experiencing rapid social change, dire poverty and often the spread of infectious diseases. Consequently, they are in a continuous state of vulnerability. In addition, socioeconomic changes that might leave them in a precarious situation, such as the push factors for migration, either to seek work or due to instability of some type are commonplace, while the 'nuclearisation' of families has diminished the role of the extended family and its role as a buffer against hardship and a source of social security. In this situation most families are 'troubled', mainly by the daily struggle to survive. Increasing numbers of poor families and orphaned children have to survive on their own with no Government safety net, such as might exist in Western countries. This is why in these countries social work needs to have more of a social developmental role and social work with families is very much linked to this.

Need for a social developmental role

Laird (2008) points out that the basic tenet of a developmental approach is to move towards expanding people's capabilities while improving their socioeconomic circumstances and notes that the incorporation of a strengths perspective is therefore a crucial component of developmental social work. The interventions employed to address the problems of disadvantaged families will comprise activities such as micro-financing, vocational training, functional literacy, school sponsorship, intermediate technology transfer and community-based approaches, many of which will be provided through the NGO (non-governmental organisation) sector, often by social workers or community development workers. In focusing on social work practice in sub-Saharan Africa Laird (2008, p.147) notes that the literature reveals that some of the most effective strategies are built around:

reciprocal exchanges of resources within communities, the pooling of community resources as a whole, the intricate domestic and economic collaboration of intergenerational households, and the diversification of livelihoods.

Developing appropriate forms of social work

Helping families in resource-poor situations where poverty is commonplace means supporting and promoting reciprocal relationships, building on traditional coping strategies and developing additional adaptations in support of activity to improve living standards. Hugman (2010) for example examines how social workers assist families facing difficulties of various kinds in Vietnam. He profiles the work of the child protection service of UNICEF Vietnam to develop 'barefoot social workers' in remote areas. In this approach, female members of local communities are recruited and given short-course training in basic social work concepts and methods. They are then employed on a part-time basis to provide advice and counselling to families in their local communities who

are experiencing multiple difficulties. These women may provide direct assistance, for example in taking care of a child in order to give a mother with mental health problems some respite, providing psychosocial support and links to formal services to families facing issues with extreme poverty or with family members who may have HIV.

Hugman points out that in recent years a national study was undertaken to examine the need for a formal social work profession in Vietnam (UNICEF Vietnam/Ministry of Labour, Invalids and Social Affairs (MOLISA) 2007). This study concluded that there was a substantive need for social services in the areas of families facing multiple difficulties (including where child abuse and domestic violence are prevalent), where there are mental health issues, disabled and older people requiring support, the social impacts of prostitution, drug misuse, HIV/AIDS and crime. This study and the developmental work that extended from it explicitly recognised that importance of developing a form of social work appropriate for Vietnam – seen as ‘social work with Vietnamese characteristics’. Hugman notes that the role of university-trained social workers in the next decade is likely to be one where they are able to deal:

...with complex situations, supervising and supporting local practitioners in the wards and communes and to be able to contribute through more senior roles in management, research and policy development. (Hugman 2010, p.142)

At the same time, it is seen as important to develop appropriate education and training materials that are suitable for Vietnam and there is now a process in place to focus not only on appropriate direct practice, but also to give attention to organisational and educational matters and gear this towards the current needs of families and the community more generally. The example of Vietnam demonstrates the key features of the development of more relevant models of social work that were identified by Midgley (1981) in his landmark study of social work in the developing world (i.e. his concerns over ‘professional imperialism’) as being more appropriate in attempting to progress beyond neo-colonialism.

Listening to the family and its concerns

Hussain *et al.* (2012) consider how a team of social workers in the Maldives has assisted families in extreme difficulty through the Child and Family Protection Service (CFPS) of the Ministry for Health and Family. They point out that although the country has largely benefited from tourism-based development, many families in the islands face significant problems and consequently the vulnerabilities of families – especially with regard to children and adolescents – have increased. This is partly due to family break-up, with some moving to resort islands looking for work, and also due to families migrating in order for children to attend better schools largely concentrated in urban areas. Often fathers do not see their families for years at a time. The authors explain how local community members were mobilised, given minimal training on issues such as child safety and advice on accessing support to address domestic violence and then worked closely with family members. Through listening carefully to the concerns of community members, proving resources to meet these concerns, by delivering these in a respectful and gender-sensitive ways in a very patriarchal society:

Communities began to accept that they had to take some responsibility in the child protection process and had an important role to play in assisting families that are in difficult circumstances... It is vital that the social services continue to have energetic and creative leaders [who are] actively committed. (Hussain *et al.* 2012, p.111)

This approach was modelled from Tanzania's 'barefoot health workers' scheme in the 1970s to deliver basic health services to a great number of people.

Making men responsible for families

'Troubled families' is a description that could be applied to families in many developing countries, another example being Zimbabwe in sub-Saharan Africa. Here 14 per cent of Zimbabweans live with

HIV and AIDS, one of the highest prevalence rates in the world. While the global HIV/AIDS incidence is declining, rates of new infections remain very high in many sub-Saharan Africa countries. In Zimbabwe out of 1,400,000 people infected (a 14.7% prevalence rate), 180,000 are children under 14 years of age (UNAIDS 2014). The disease therefore remains the most striking public health issue in the country. Children whose parents are HIV-positive face multiple vulnerabilities, such as becoming infected themselves, risking losing parental care and being subject to social discrimination and neglect, while in many cases where parents are deceased, siblings are cared for in child-headed households or by ageing grandparents. The epidemic has devastated families here, but key initiatives pioneered through NGOs have been able to help in strengthening families. One interesting initiative carried out through a southern Africa regional NGO (SAFAIDS) was to encourage men to become more considerate and sexually responsible through promoting public education campaigns in beer halls, for example, and developing AIDS champions in the community. Improving circumstances for families has implications for men in relation to taking more responsibility for their own families:

This means society as a whole must change. Political and community leaders should recognise the role of men in the epidemic, change their own behaviour and encourage policies that support change. Religious leaders must recognise and respond to all the different factors influencing men's behaviour and the media can raise awareness of the role of men and the need for men to change. (SAFAIDS, PANOS, UNAIDS 2001, p.25)

Strengthening families

Families are likely to need considerable help to manage in these adverse circumstances. The work of SOS Children's Villages in Zimbabwe is notable through their SOS Family Strengthening Programmes. The programmes enable children who are at risk of

losing parental care to grow up within a caring family environment. When children can no longer stay with their families, they are cared for by their SOS mothers in one of the SOS families in three different locations in the country, by providing day care, education and vocational training. Since 2003, Family Strengthening Programmes have offered access to essential services for children's development and supporting families to protect and care for their children. The programmes reach out to over 3000 children a year and provide them and their families with food, school fees, basic medical treatment, counselling and psychosocial support (see SOS Children's Villages 2014). This is consistent with research findings from Lyons, Manion and Carlsen (2006) who point out how social professionals can strengthen the coping capacity of families by providing direct financial assistance, home visits, food and nutritional support and waiving of school fees.

Working towards radical transformation

Developmental social work is emerging as a new paradigm in international social work that seeks to infuse social developmental theory and practice into social work processes (Midgley and Conley 2010). Social work and social development are professional disciplines that are starting to be fused together, significantly at the level of the 'Global Agenda' mentioned later. A good example of this can be found in South Africa. Patel and Hochfeld (2013) point out that this country is unique in that the developmental approach to social welfare and social work was adopted as national government policy in 1997 after the collapse of apartheid, and their view is that the country is to be commended for an ambitious and progressive developmental welfare policy. However they remain critical of the piecemeal, fragmented and often contradictory basket of service delivery that so often fails service users (Patel and Hochfeld 2013, p.700). While this may be partly due to government priorities, there is also concern that families are affected in a detrimental way by the marketisation of policies on the delivery of social work services in contemporary South Africa. In an article by student social workers in South Africa the point is made that practitioners can no longer

be satisfied with merely mitigating the negative effects of poverty, unemployment and inequality in practice when many of these problems are associated with neoliberal policies:

The challenge however lies not just in social workers having to make critical choices to reposition themselves but also to critically reflect on their roles if they are to make a difference and address the needs of the most vulnerable and marginalised sectors of the population. (Raniga and Zelnick 2014, p.394)

Raniga and Zelnick (2014) suggest that what is required is a radical transformation of the welfare system and changes in the socio-structural and economic system that disadvantage both social workers and service users. The implication of this is that it is the macro-economic factors that propel families into destitution and poverty and which are behind social pathology, and unless this is dealt with, social work intervention is always going to be at the level of amelioration and 'patching up' of problems.

Global Agenda for Social Work and Social Development

It is worth mentioning at this stage the Global Agenda for Social Work and Social Development, an initiative that in 2010 stemmed from the three main global bodies representing social workers – the International Federation of Social Workers (IFSW), the International Association of Schools of Social Work (IASSW), and the International Council on Social Welfare (ICSW). This Agenda is seen as a basis for advocacy with regional and global bodies, including the United Nations, and as a way of demonstrating professional coherence, solidarity and credibility (Jones and Truell 2012). As part of this initiative, a Global Observatory is monitoring social work practice around the world, linked to a thematic topic – it is currently promoting social and economic equalities. An example of positive practice in working strategically on behalf of disadvantaged families is provided by Consejo, the General Council of Social Workers of Spain. The Council launched

a campaign in 2012 called Marea Naranja (Orange Wave), which brings together citizens, social workers and other professionals. Social workers wear orange T-shirts to work every Friday and there is a nationwide programme of activities working with local communities and families in difficulty who campaign to challenge service reductions and uphold the social rights of citizens (IASSW, ICSW, IFSW 2014).

Countering community and family violence

Inequalities, social dislocation, drug abuse and the breakdown of family structure are the consequences of not dealing with some of these macro-social and systemic issues. This may lead to violence and the collapse of the normative standards that traditionally held families together. An example of community violence that spiralled out of control affecting and disrupting families can be found in Jamaica – a country that has the unfortunate distinction of most homicides per population. This has been brought about by a variety of factors – a harsh economic climate, poverty, inequality and ruthless political culture. As Levy (2012) reports, the predominant single parent nature of the family in Jamaica that worked well with a strong supportive extended family is now a thing of the past with nearly half of single parent household heads away working or having migrated in search of work a key feature. Levy reports on an initiative called the Peace Management Institute (PMI), a state and civil society alliance formed in 2002 by the Minister of National Security with the blessing of the two main political parties. For the first time, the state employed social workers and adopted applied social measures to reduce community violence. A PMI activist board (which has representatives of the two main political parties, ministers of religion, university lecturers and civil society members) takes a hands-on approach in working with the families and communities affected:

In the PMI approach, board members and staff simply walk into a community rocked by war (violence) and engage the young shottas (shooters) in conversation, listening carefully to

deal with this and move forward, in the tradition of bi-culturalism (between the indigenous Maori and the White settler (Pakeha) community), major reforms to the child welfare and youth justice systems were made (under the Strengthening Families Initiative) and New Zealand became the first nation to legislate Family Group Conferencing (FGC) in working with families and children, which has since been extended to many countries.

FGC is an international success story in dealing with complex family dynamics. Rotabi *et al.* (2012) indicate how FGC encourages participation by different sides of the family in Norway, can be carried out safely even in situations of domestic violence in the United States and Canada and generates plans reflecting children's cultural background and families' ethic of caring for their young relatives in both the United States and the UK. These authors also report on its success in the Marshall Islands and consider how FGC could be used in Guatemala. Within Guatemala, FGC is taught within the curriculum of the National University and is referred to in Spanish as auto-ayuda-familiar, i.e. family self-help groups. As Rotabi *et al.* (2012, p.411) point out:

Students learn how to bring family members together to find a commonly agreed-upon solution to an identified problem affecting the family. The social worker is responsible for overseeing the orientation, assessment and support of the family.

The strength of FGC is its flexibility and the fact that it can be adapted to suit local cultures and bring in the extended family to support families in crisis.

A shift to family-centred practice under New Zealand's Strengthening Families Initiative, with its emphasis on collaborative partnerships as the means to deliver services to multiple needs families, was predicated on New Zealand's Children, Young Persons and Their Families Act of 1989 and has been held up internationally as a model of excellent practice. Research conducted by McKenzie, Kelliher and Henderson (2001) indicated that this model is being used to deal with complex problem issues, often with families that have limited familial and/or social supports and advocacy to call upon.

This research also demonstrated that greater emphasis should be based on a neutral facilitator chairing the meetings to ensure that the voice of the family is not lost, that sufficient information is provided on the process involved, that more attention is given to dealing with the complexity of the problems faced by the families and that more support is needed for the parents rather than just the children. While some parents felt they were not supported enough, nearly 90 per cent still indicated the relationships they had with the agencies and professionals involved changed positively during the Strengthening Families process. It was interesting to note that the role of grandparents was seen to be important.

Empowering families

While New Zealand dealt with issues of marginalisation and discrimination through involving the wider family and community, in other developing parts of the world these inequalities were very evident and of concern to social workers practising there. Extreme poverty has been an issue that social workers have grappled with in Latin America, where the profession's roots can be traced back to the early twentieth century in Chile, where the first school of social work was created in 1925. Social work education and practice has evolved through several transitions, initially from an effort to reduce poverty by teaching appropriate work ethics to the poor, but later denounced as a means of creating an active labour class to support capitalism and sustain the ruling class. Following a period in the 1950s when social work became heavily influenced by individualistic developments in the United States, the profession underwent what came to be known as the 'reconceptualization process', which challenged the remedial nature of social work and emphasised how marginalised groups were exploited and oppressed. Theories that guided this thinking, and which are still very prominent within Latin American social work, were liberation theology, 'conscientization' and Marxist ideology, among others, where social workers believed that social work should bring social change to oppressive structures.

Latin American social workers would not frame the situation as working with 'difficult' or 'troubled' families and would be more likely to view them as victims and to look to where support could be found (labour unions, social movements, etc.), and where action could be taken through grassroots organisations to address the socio-political and economic realities of the marginalised – and counter what they would see as the impact of neoliberal policies on vulnerable sectors of society. The Latino culture has a strong orientation towards embracing older adults within the family, but this is often not possible today due to the harsh economic circumstances families face. However, social workers have helped families survive the financial crisis through the creation of communal cooperatives (e.g. the cartoneros movement in Argentina, see Queiro-Tajalli 2012).

Family-based/centred services and family practice

In the United States, working with troubled families tends to connote a more clinical and therapeutic approach to family problems. There has always been a strong family orientation in social work practice in the United States, originally stemming from the work of the Charity Organisation Society and Settlement Movement, which had emphasised a systemic approach where the family was seen within the broader social environment. However the psychoanalytic movement in the early twentieth century diverted attention from the family and led to the individualisation of social problems, and this remained the pre-eminent social work strategy for many decades.

The return to the family as a primary focus of attention in direct practice occurred in the 1950s and 1960s with a greater focus on urban America and the plight of families entrapped within the public welfare system. Rasheed and Rasheed (2011, p.183) point out:

These families more often than not were not only faced with poverty but also with issues of delinquency, neglect and severe health problems. These families, referred to as the 'multiproblem families', garnered the concern of many social scientists.

The interdisciplinary family therapy movement also emerged at this time and this together with systemic approaches infused social work practice with a range of interventions with families. In the United States a distinction is often made between 'family-based' or 'family-centred' social work versus 'family practice' (Collins, Jordan and Coleman 1999).

Family-based/centred services comprise a range of activities such as case management, counselling/therapy, education, skill-building, advocacy and provision of direct services (such as housing, food or clothes). Family practice connotes a more direct clinical/therapeutic approach to family problems as well as broader systemic factors impacting family life. An example here might be to help families learn more effective problem-solving skills in order to reduce the number of crises and increase the likelihood of supportive rather than destructive family interactions.

Clark and Woods-Waller (2006) point out that the mission of the profession in the United States is based on a set of core values, including: service; social justice; dignity and worth of the person; importance of human relationships; integrity; and competence. As noted by Watkins, Jennisen and Lundy (2012), the roles and responsibilities of social workers in the United States has grown over time and now includes culturally and ethnically diverse populations and services directed at demographically varied populations. They note that the clear trend in social work practice has been the continued privatisation of services and although social work services are in even greater demand, they are also often decreased in attempts to reduce expenditures, in both the private and public sectors. So although there is enormous need for family-oriented work, the fragmentation of social work itself and the encroachment of other professions and quasi-professions into the social work domain creates challenges for the future.

New ways of working can develop from this inter-professional approach. In Rochester, New York, for example, the Police Department utilises a model called FACIT – the Family and Crisis Intervention Team, which consists of civilian social workers and counsellors employed by the police department, who respond to cases involving domestic disputes, mental health issues, alcohol and

substance misuse, landlord-tenant problems, child abuse, juvenile delinquency and the needs of the elderly. The unit is assigned work with cases of crimes against children and referrals for juvenile diversion from the Family Court System.

Family preservation programmes

Many states in the United States operate 'family preservation' programmes, which use a particular model of service delivery that underscores the importance of restoring families to safe levels of functioning. As a service model, family preservation programmes share common features including intensive services delivered over a relatively short period of time, individualised to a family's needs and offered in the family home or community – under the Family Support and Preservation Act (1993). There was a backlash to this in the 1990s following media stories of children who suffered serious and sometimes fatal injuries in difficult families, with critics attacking family preservation services as preserving families at the expense of child safety, and later a much stronger emphasis was placed on child safety through the Adoption and Safe Families Act (ASWFA) in 1997. Much of what is now termed 'family-centred practice' was first embodied in the family preservation movement (Gelles 2001). Caseloads are typically small so that the worker can be easily accessible to the family, and they are often available 24 hours a day for emergencies and crisis intervention. The period of time for service delivery varies from one month to several months depending on the model and is time limited in order to restore family functioning as soon as possible. Many family preservation programmes now work closely with community groups and have helped broaden the definition of family by including extended family members and natural helping networks. Further examples of family practice can be noted.

Family to Family initiative

Also in the United States, Midgley and Conley (2010) report on the Family to Family initiative, sponsored by The Annie E. Casey Foundation that in a similar way to FGC harnesses communities' interests in protecting their children. This Foundation encourages partnerships with extended families and communities to protect children and support families, working with both natural and foster families to keep children in their local community. Beginning with five states and three additional counties in 1993, the initiative had spread to 18 states and more than 80 sites across the United States by 2009, although the project itself has now ceased.

For Family to Family to be successful, the community has to be included as a real partner, right from the start. Strong relationships with the community will help sustain changes and can help the agency in the face of various kinds of pressure – for example, from the media or the courts. This means reaching out to community leaders to involve them in the planning process – from creating the vision to thinking with you about how the work of the agency might need to change. (The Annie E. Casey Foundation 2001, p.18)

The main point of Family to Family was enabling more children to stay within their neighbourhoods of origin and experience a greater sense of stability and community.

Another strategy that extended from this initiative is Team Decision Making, a process that invites community and extended family involvement in case planning for children.

Pedagogic approaches

A similar approach can be found in Denmark where the Danish Government has, through its social development programme, put a great emphasis on prevention strategies in supporting families with serious difficulties, such as those where parents are affected by drug and alcohol abuse. Hatton (2006) reports that there has been

a significant reduction in the number of children being removed from home in the last few decades, and where this decision is made under their Social Assistance Act, it is done so by a social committee in each locality, consisting of three municipal politicians, one judge and one psychologist – contrasting sharply with the British and Irish systems, where the decision is made by the courts. As noted by the Ministry of Social Affairs (1995, p.66):

It remains the guiding principle that preventative social measures in Denmark be directed towards supporting the family, in such a way as to provide optimum conditions for the child's growth and development.

Van Ewijk (2010) also comments on the social care system in Denmark, where he notes that Danish experts prefer to speak about pedagogy instead of care and how this pedagogical perspective connects childcare, elderly care, care for the disabled, youth care, community care and community development (see Cameron and Moss 2007). Social pedagogy is drawn from the concept of education in its widest sense and attempts to deal with problems in a holistic way. The Danish pedagogic approach in social work, the development of community projects and a strong emphasis on prevention have led to policies that can support families in difficulty, although resource constraints obviously have affected the work of voluntary organisations.

As Lyons, Manion and Carlsen (2006) and Lyons *et al.* (2012) observe, at the core of the pedagogical relationship are notions of equality and respect and the eradication of unequal power relations. It draws on Freirian ideas about 'conscientization' (Freire 1972), particularly where Freire talks about the need for dialogue, critical thinking and developing an awareness of oppressive situations that prevent citizens from engaging constructively in the world – as through adverse circumstances, poverty and discrimination they have been forced into a 'culture of silence' where they cannot speak up for themselves.

Multi-agencies together in promoting change

Van der Laan (2000) considers how the marketisation of social work is helping to transform social work in the Netherlands, and how this has impacted on work with multi-problem families. He mentions how, given an increase in applications for material assistance, some generic social work agencies decided to devote extra attention to concrete aid, especially in the cities of Utrecht and The Hague. Cooperative projects were set up relating to case management, debt management, problems families and chronic psychiatric patients. Some projects, for example those set up for families who have been evicted from their homes as a result of nuisance or indebtedness, now include their signing a contract with social work and with regard to housing. Counselling would go along with the offer of housing or debt reconciliation – i.e. with the latter example, only if they opt for counselling does the project negotiate with their creditors to freeze or reschedule their debts while they receive counselling. In this way the process is similar to the family practice initiative within the United States.

While this may seem a successful approach to working with 'difficult' individuals and families, Van de Laan (2000, p.100) feels that social work is in new territory here and needs to make some key choices regarding direction:

Should social work be willing to conceive social problems, such as crime, nuisance, debt, disablement and unemployment, in terms of behavioural change, and to use its professional power to steer clients towards the changes prescribed by the commissioning authorities?

He feels that a concerted effort is needed for social workers to preserve their professional standards, between the demands of their clients and the financial incentives provided by the commissioning institutions.

Conclusion

This chapter has attempted to consider the relevance of the concept of 'troubled families' cross-culturally by reviewing some key international literature on family-oriented social work in different parts of the world. While there are a variety of approaches to working with families, several major themes stand out – the need to rebuild families in the wake of the loss of the extended family, the changing concept or definition of social work to include ideas of social development, where work with families and communities are placed centre stage, the deployment of para-professionals listening closely to the concerns of family members and considering the role of men in families and helping them to take more responsibility, in parts of the world where this is appropriate.

Strengthening families through various programmes, both governmental and non-governmental, is important, but so is considering more radical measures aimed at reducing social and economic disparities and finding ways to counter community and intra-family violence. Involving the family is key to much of this and family-centred or family-based practice, where the family and its constituent members are fully involved and empowered, are key aspirations. Social workers also need to consider how they can nurture and support families and build on prevention programmes to stop problems from escalating and becoming more serious.

Finally, social workers need to consider how they can work with other agencies to promote behavioural change, where this is seen to be needed, and how this relates to their own professional values.

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