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Effective relationship-based practice: a theoretical exploration

PAMELA TREVITHICK

Summary *This paper looks at the importance of a relationship-based approach within social work. It explores past writings on the social worker–client relationship, why the relationship was seen to be central to effectiveness and good practice, and why this perspective fell out of favour. It revisits the importance of a relationship-based approach, within a psychosocial perspective, in relation to eight areas of practice. These include the assessment task and process; relationship difficulties; people who are vulnerable or reliant on others for their well-being; situations that require practitioners to be able to hold and contain anxiety; the relationship as a foundation for capacity building, empowerment and developing people’s potential; and in relation to disadvantaged and marginalised sectors of the population, how social workers can use the ‘front-line’ knowledge they have gained through the relationships they have created in political ways—to bear witness and report on ‘social ills’ as they impact on the lives of service users. A final section looks briefly at how the service user–social worker relationship is perceived and described in the Benchmarking Statement, National Occupational Standards and the General Social Care Council’s Rules and Requirements and their implications in terms of the new social work degree.*

Introduction

In the past, the relationship between clients (service users) and social workers was seen to be at ‘the heart of social work’ (Collins & Collins, 1981, p. 6) and essential to good practice, but in recent years, its importance and value has become ‘confused and ambivalent’ (Howe, 1998a, p. 45). This paper explores this theme, beginning with a brief overview of how the relationship has been conceptualised in the past, and why it fell out of favour. It then looks at the importance of the relationship and the quality of the experience we seek to provide, described here as a relationship-based approach, and its use in practice in relation to assessment. A final section looks briefly at where we are now—how the service user–social worker relationship is perceived and described in the Benchmarking Statement, National Occupational Standards and the General Social Care Council’s *Rules and Requirements* and their implications in terms of the new social work degree.

The importance of relationships in social welfare extends beyond social work and can be seen in government policy and practice: some are enshrined in legislation. These can be found in concepts like ‘joined up services’ (connecting individual need to the services provided or relating one resource to another), ‘joined up thinking’ (how best to locate, select, critically analyse, adapt

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and creatively apply the different theories and practice approaches that abound within health and welfare contexts) and concepts such as ‘evidence-based policy and practice’, ‘partnership’ or ‘empowerment’. They describe an attempt to enhance the *quality of the relationship* between the services on offer, those who deliver services, and the people who receive them. We may not agree about how best to set about this task, or how it should be funded, but there is little doubt that these issues remain a central concern of government, welfare agencies and practitioners across a range of disciplines. They also describe a perspective evident in social work, and allied professions, which sees problems, and their solution, in terms of the individual—as ‘personal troubles’ and not as ‘public issues’ (Mills, 1959, p. 130), as if divorced from any wider social or political causation. As a result, the ‘ills of society’, which may once have been voiced by social workers, as well as service users, remain unsaid and neglected—and with its voice muted, social work continues to remain in a state of constant flux, without a robust identity capable of addressing public criticism or a strategy to fend off the ever-increasing demands of government (Jordan & Parton, 2000, p. 259).

A relationship-based perspective can be used in a range of different contexts or practice approaches. For example, the importance of relationships is central to some perspectives in group relations and organisational theory and change, particularly those from a psychoanalytic perspective (French & Vince, 1999). Similarly, a ‘relational practice’ analysis, drawing on a feminist perspective, can be found in the field of management (Fletcher, 1998). Or again, with regard to social work education, Edwards and Richards (2002), writing on ‘Relational/Cultural theory’, stress the importance of a relational approach to teaching and learning. In social work practice, it is frequently linked to client-centred or psychosocial approaches, or to casework, but it is a perspective that can be used in other practice approaches or interventions, such as task-centred work. In cognitive-behavioural approaches, it is sometimes described in terms of ‘therapeutic variables’, that often draw heavily on the writings of Carl Rogers (1951, 1961), and later followers Truax and Carkhuff (1967), that is, working relationships that are ‘founded on empathy, warmth and genuineness on the part of the worker. ... A good working relationship is a necessary but not sufficient condition for being an effective helper in this field’ (Hudson & Sheldon, 2000, p. 65). As with all practice approaches, a great deal depends on the knowledge, skills, values and qualities that social workers bring to the work, and the quality of the relationship that is created. This paper looks at relationship-based practice from a psychosocial perspective, defined by Hollis (1977) as:

an attempt to mobilize the strengths of the personality and the resources of the environment at strategic points to improve the opportunities available to the individual and to develop more effective personal and interpersonal functioning (p. 1308).

Past writings on the social worker–client relationship

One of the first and most influential texts in this field, *The Casework Relationship* by Felix Biestek (1957), described the ‘appropriate attitudes, knowledge and abilities’ required of a social worker in terms of seven principles:

1. individuation;
2. purposeful expression of emotion;
3. controlled emotional environment;
4. acceptance;
5. nonjudgmental attitude;

6. client self-determination; and
7. confidentiality.

None of these principles are easy to achieve, particularly in relation to those service users who are hostile, difficult to engage or well defended in other ways. An important question in this area, and a subject that warrants rigorous research because of its relevance to all professionals working with people, is whether these ‘attitudes’ and ‘abilities’—such as empathy or the ‘professional use of self’—can be taught on training courses, including social work courses (Erera, 1997).

Biestek defines the casework relationship as ‘the dynamic interaction of attitudes and emotions between the caseworker and client, with the purpose of helping the client achieve a better adjustment between himself (sic) and his environment’ (p. 17). The emphasis is on individual change or ‘adjustment’, rather than external and environmental changes—on seeing ‘people with problems and people as problems’ (Howe, 1987, p. 56). Interestingly, Kadushin (1990, pp. 39–57), drawing heavily on Biestek’s seven principles, omits the word ‘casework’ from his account of the social worker–client relationship, which he describes as ‘the communication bridge between people’ (1990, p. 36). This ‘bridge’ provides a vital link across the two worlds: that of the practitioner and that of the service user, where empathy and self-knowledge act as central tools from which to ‘read’ the similarities and differences that lie within and across these two worlds (Sudbery, 2002, p. 156). How we perceive people’s ‘narratives’, and the meaning people give to their experiences within and across different worlds, is the subject of important debate, particularly where this involves a multicultural dimension (Robinson, 1995; Taylor, 1999).

Salzberger-Wittenberg views the relationship as ‘a two-way process in which both parties affect each other’ (1970, p. 37) and, ideally, where both parties learn and change within this process. Change is seen as a reciprocal, two way process where every experience influences the next stage in a person’s life. As practitioners, every encounter with service users—and others—offers an opportunity to build on and to extend our knowledge base and expertise. For service users, it means that the way we approach the range of problems for which our help is sought—in terms of our knowledge base, skills and personal qualities we bring to our role—can act as a turning point. It can give rise to a new or renewed sense of hope and optimism about the future and the part that people can play in shaping their lives (Trevithick, 2000, p. 4). On the other hand, professional relationships that are over-focused on ‘techniques’ in a detached and mechanistic way, or that fail to respond to the service user’s real needs, can reinforce doubts and fears, generate mistrust, increase anxieties, deepen defences. This can make it more difficult for service users to seek help in the future or to approach that help with a sense of confidence (Salzberger-Wittenberg, 1970, p. 166). The emphasis is on social workers having the knowledge and skills, and self-knowledge, to work with defensive behaviours that act as a barrier to change and progress.

In terms of social work education, these challenges to psychosocial approaches and casework came at a time when there was an ‘intellectual purge’ (Jones, 1996, p. 204) taking place—that is, a ‘stripping out’ of theory from the social work curriculum—and an over-emphasis on social work values, such as anti-discriminatory and anti-oppressive perspectives, as a substitute for a sound theoretical and practice knowledge base (Jones, 1996, pp. 190–191). The sense was that social workers who meant well, will do well. This tendency for social work and social work education to be ‘prone to fashions’ (England, 1986) is still evident today in the way that social work tends to shift ground on key issues, often in response to the demands of its critics and government, but without careful thought and research evidence to support this shift. As a result, there has been no rigorous attempt to study or to research the relationships that occur within social, particularly relationship-based practice, and to link this knowledge to effective practice.

It can be difficult to identify and quantify the specific benefits that a good working relationship

brings to the social work task. One body of research that emerged in this period looked at the views of service users' in relation to services provided (Mayer & Timms, 1970; Sainsbury, 1987; Sainsbury *et al.*, 1982; Fisher, 1983). Here, there was considerable evidence on the importance of relationship—that service users valued social workers who demonstrated a 'sensitive patient understanding—friendliness, reliability, regularity of contact, attention to detail and openness—in short to the significance of the presence of a caring person' even where there had been 'little positive change in clients' circumstances (Cheetham *et al.*, 1992, p. 63). Thus, what we do (task) and how we do it (process) were both thought to be significant, particularly where this involved providing practical help. These works still make important reading and are important today in a climate where evidence of effectiveness may be based on simplified targets or single outcomes, without adequate follow-up research to indicate whether specific positive outcomes prove to be robust and resilient over time, or whether they give rise to other positive benefits. The absence of evidence does not mean the absence of benefit.

It is also clear that during the 1970s and 1980s—and since—some practitioners fell into the deceptive and perilous trap of thinking that forming and maintaining good relationships, sometimes called relationship-building, was an end in itself, rather than a practice approach that provides a foundation on which to build future work:

While it is true that people do not come to us looking for a relationship, and while it is no substitute for practical support, nevertheless we are one of the few groups who recognize the value of relating to others in a way which recognizes their experience as fundamental to understanding and action (Coulshed, 1991, p. 2).

Any practice approach, in the hands of practitioners who lack the necessary knowledge and skills, can easily go astray, but one consequence of this impoverished 'relationship-as-an-end-in-itself' approach was that in the 1970s and 1980s, poor practice came to be associated with psychosocial approaches and casework. The term casework, or social casework, is sometimes used to describe a psychosocial approach (Orme, 2000, p. 45), or a more general psychological approach to service delivery (Barker, 1995, p. 153) but it is still probably true to say that it has 'rarely been defined to anyone's satisfaction' (Timms, 1964, p. 3). As a result, both psychosocial approaches and casework came under attack from within social work (Fischer, 1973; Bailey & Brake, 1975; Langan & Lee, 1989) and, in a more general way, from outside the profession following several public inquiries into the deaths of children known to social services, beginning with the Maria Colwell inquiry in 1973. In recent years, the challenges have come from those who support the view that cognitive-behavioural approaches offer a more effective social work approach (Sheldon, 1995). Some criticisms of psychosocial approaches, and psychoanalytically informed casework, need to be acknowledged, particularly where practitioners fail to give sufficient importance to the individual in his or her wider social context (Trevithick, 1998), or where there is a tendency to pathologise problems and people. Also, this approach still 'fails to satisfactorily incorporate a political dimension' (Cooper, 2000, p. 276) but, it could be argued, other approaches fail in this area. However, these may not reflect the shortcomings of the approach itself, but the unrigorous use of a psychosocial relationship-based approach in practice.

A relationship-based approach to practice

The quality of the relationship that we strive to create, within a psychosocial perspective, can be seen to be important in relation to eight areas of social work practice:

1. assessment;
2. as a foundation on which to build future work;

3. as help for people experiencing difficulties relating to self, others, and their wider social environment;
4. as help, support and care for people who are vulnerable and reliant on particular services for their well-being;
5. as advocacy and mediation for people experiencing discrimination or difficulties accessing services and resources;
6. as an approach to hold and contain anxiety in times of transition or crises;
7. as a foundation for capacity building; and
8. as a practice that can bear witness and report on ‘social ills’ as they impact on the lives of service users

It is not possible to cover these eight areas in depth—each warrant a paper in their own right. However one task that provides a link across the eight areas of practice is assessment. This paper explores how a psychoanalytic approach to relationship-based practice might look with regard to assessment.

Relationship difficulties

The relationships that we strive to build involve creating a sound ‘working relationship’, or ‘working alliance’, as the platform and the medium for the work we undertake with service users. Part of this task is to find out what is going on and how—if at all—past events may be being replayed in the here-and-now. Relational difficulties abound within social work largely due to the impact of childhood experiences and the fact that ‘The poorer the quality of people’s relationship history and social environment, the less robust will be their psychological make-up and ability to deal with other people, social situations and emotional demand’ (Howe, 1998b, p.175). The importance of relational difficulties can be seen in Reid’s (1978) influential categorisation of eight ‘unsatisfied wants’:

- interpersonal conflict;
- dissatisfaction in social relations;
- problems with formal organisations;
- difficulties in role performance;
- problems of social transition;
- reactive emotional distress;
- inadequate resources;
- psychological role and behavioural problems not identified elsewhere (Reid, 1978).

As this categorisation shows, many of these ‘unsatisfied wants’ indicate a breakdown in the ability to sustain a healthy or constructive relationship with some key aspect of life. From a psychosocial perspective, these difficulties may be conceptualised and understood in terms of ‘modern’ psychoanalytic theory, which stresses the importance of early childhood experiences, positive and negative, on the development of the personality (Fonagy, 2002, p.162). Or the difficulties may be understood in terms of ‘attachment theory’, which attempts to explain ‘the many forms of emotional distress and personality disturbance, including anxiety, anger, depression, and emotional detachment, to which unwilling separation and loss give rise’ (Bowlby, 1979, p.103). Whatever the conceptualisation, both acknowledge the importance of relationships in childhood as being formative (Fonagy, 2002, p.162). Since it is in the area of relating and relationships that many problems occur, it stands to reason that a relationship-based

focus has the potential to help service users to identify what is going wrong, and to draw on the professional relationship as a sound foundation from which to ‘sort out’ and ‘work through’ these problems.

This work may involve providing a ‘corrective’ or ‘reparative’ emotional experience—that is, a more intense and therapeutic use of the relationship where this is needed to help individuals to come to terms with, and hopefully to overcome, the impact of failed, abusive and abandoning relationships, or separations or traumatic experiences due to other causes. This work is most often used in relation to looked-after children but may also be provided for other vulnerable individuals or for people in crisis, such as people experiencing emotional problems. A particular strength of this approach is to restore trust in other human beings where this has been lost, or to provide a place to work through ‘other relationship problems, including problems arising from their environment’ (Wilson, 2000, p. 350). This work is likely to be more effective in the context of a sustained relationship and can often take a long time, depending on the nature of the difficulties encountered and also the context in which the work is located, which in fieldwork settings are sometimes far from ideal.

It is impossible to ignore the misery that results from failed relationships. The suffering caused when people feel abandoned, unwanted, lonely, uncared for, isolated, can be unbearable for many human beings. It can leave people feeling depleted, empty, de-energised, lacking in motivation, and without a sense of hope and optimism about their lives and future. From this place, it can feel better to be in an abusive relationship than none at all and impossible for people to move their lives forward without help. On the other hand, the pleasure and joy caused by positive relationships can be immensely uplifting, re-energising, and lead to profound feelings of connection, hope and possibility. The former is a de-energising experience where the latter is a re-energising experience—a point looked at again later in this paper.

The quality of help provided

An assessment also involves assessing whether the service users can use the help that is on offer and if so, what kind of help best fits the individual in question and their situation. For example, some service users see other people, including social workers, as a resource whilst others see the same people as a threat: ‘There are many patients who need us to be able to give them the capacity to *use us*’ (Winnicott, 1971, p.94). Or again, service users who have been hurt and humiliated in the education system may find it difficult to use an approach that involves the use of ‘homework’ as a technique without considerable effort on the part of the practitioner. Cognitive-behavioural approaches use homework tasks, but is it also a technique used in Cognitive-Analytic Therapy (CAT) and Interpersonal Therapy. These details are important in terms of service users’ choices, and should inform the range of practice approaches that may—or may not—be offered. However, these are issues that are rarely discussed with service users and an area that is seriously under-researched. It is likely that this situation will change following new government directives on the involvement of service users and carers in social work education and service delivery.

It is important to stress that not all service users need or desire a relationship, often because other important relationships already exist: this fact should emerge during the assessment. However, where we encounter problems that are complex, multifaceted and intangible, or social relationships that are fraught, a successful outcome may not be possible unless time is taken—and skills used—to establish some form of meaningful and constructive connection with the individuals in question. This involves using our empathic skills to see life from another person’s perspective, which Winnicott sees as a sign of health, that is ‘the ability of one individual to enter imaginatively and yet accurately into the thoughts and feelings and hopes and fears of another

person; also to allow the other person to do the same to us' (Winnicott, 1986, p. 117). However, to be able to empathise in this way involves a degree of self-knowledge, another attribute that it may be difficult to teach:

The capacity to be in touch with the client's feelings is related to the worker's ability to acknowledge his or her own. Before a worker can understand the power of emotion in the life of the client, it is necessary to discover its importance in the worker's own experience (Shulman, 1999, p. 156).

This self-knowledge involves having a clear understanding that how we present ourselves to service users is likely to influence the interaction and the openness of the communication. To fail to realise this can lead to unsuccessful outcomes—that how we do things can be as important as what we do. The greater the trust, respect, concern and practice competence that is generated, the greater the likelihood of an open and honest exchange where individuals can reveal what they see to be happening, and why, and how the situation can be improved. On the other hand, in situations where service users—and practitioners—feel defended, guarded and self-protective, it can be difficult to establish a sound foundation on which to build future work. In this information-gathering process, 'hard facts', particularly important baseline data, are important but so too is the meaning that these facts hold for the individual. All people and situations are unique, and made up of intangible factors that are difficult to identify (Cheetham *et al.*, 1992, p. 12). However, part of the task of the social worker is to make sense of this uniqueness in terms of theories and practice experience that help to explain human behaviour, motivation, thoughts and feelings. Without this link to theory, it is not possible to ensure that skills are transferable (Parsloe, 1988, p. 8).

Conscious and unconscious factors

Central to a psychoanalytically informed approach to assessment is the view that to focus solely on what is known—on conscious aspects—can mean that we only gain a partial picture. This is particularly true where we encounter people—including ourselves, service users or other professionals—who are very defensive and self-protecting in some—or perhaps most—situations. A defence regularly deployed in social work, and not solely among service users, is *denial*, that is 'a defence mechanism that simply disavows or denies thoughts, feelings, wishes or needs that cause anxiety. The term is used purely for unconscious operations that function to "deny" that which cannot be dealt with consciously' (Reber & Reber, 2001, p. 187).

Defences not only serve to conceal thoughts, feelings and behaviour, but sometimes also reveal unaware responses. They can also distort what is remembered. This makes it difficult for the individual—or others—to gain an accurate picture of experiences and events. The capacity to understand and work with defensive behaviours in ways that enable people to know why they need to defend themselves in particular ways, and the meaning and impact of their behaviour, can help individuals who wish to change themselves or their environment. That is not to deny the importance of what is known (conscious) and the 'expert' knowledge that service users hold about events, thoughts and feelings that have shaped their lives, but it is to say that because knowledge is partial and gathered in relation to other persons or things, we frequently need other people to deepen our understanding and perception of ourselves, others and our place in the wider picture of life.

In addition to weight given to the operation of defences, conscious, preconscious and unconscious factors, transference and counter-transference are important concepts in a psychosocial approach. Transference occurs in every human relationship—falling in love is the

best example. Transference reactions, both positive and negative, involve passing on or ‘transferring’ emotions or patterns of relating from one person onto another person—or object. It tells us something about what we have become for others—service users, professionals and others—and they for us, and what is being represented or expected in a given situation (Sudbery, 2002, pp. 152–156). Although feelings are located in the present, they often have an earlier, unconscious (unaware) aspect and can involve transferring of positive feelings (trust, affection) towards others or involve transferring more hostile feelings (mistrust, dislike). To know that feelings from the past may be being transferred into the present can provide us with some clues about those thoughts and feelings that have, so far, remained unexpressed and, therefore, to assess the situation more effectively. For example, the term ‘non-verbal communication’ describes this kind of intuitive reading or perception that is not based on hard facts or reason. Similarly, the emotional openness that we, as practitioners, demonstrate in relation to another person’s transferred feelings is referred to within a psychoanalytic framework as counter-transference. Counter-transference reactions, in so far as they correctly mirror another person’s thoughts and feelings, enable us to experience some of the emotions that another person might be feeling or thinking. In social work literature, these reactions are sometimes described as empathy or the use of intuitive skills. However, when attempting to understand transference and counter-transference reactions, we run the risk that our own unconscious, unresolved fears and fantasies from the past may enter the picture, to blur reality and our accurate reading of the situation. For this reason, good supervision is essential in order to rigorously monitor, clarify and understand these reactions, and to decide how best to translate this intuitive knowledge—if at all—into practice (Howe, 1998a, p. 53).

Social, familial and cultural context

In any assessment, it is important to understand people in their wider social, familial and cultural context in order to mobilise resources in ways that are helpful. For some people, the help they request may involve practitioners working to maintain the quality of life that they currently have, or to prevent deterioration. For others, it may involve being called upon to help service users to introduce limited changes, or more radical changes (Waltzlawick *et al.*, 1974, p. 9) in ways that moves their lives forward. For example, some people, such as those who are frail or in poor health, may rely heavily on external resources, perhaps in the form of meals-on-wheels, home aids or care staff for emotional and physical comfort and well being. This means that any failure or unreliability in relation to the provision of these services can sometimes lead to a great deal of upset and emotional turmoil for the people involved. This needs to be understood in practical terms, but also in terms of a psychological understanding of the importance of reliability and consistency, particularly for people who are dependent on others and, therefore, vulnerable—a theme central to Winnicott’s writing (1965, p. 84). In this context, the term vulnerable is used to describe ‘people who are for various reasons unable to take care of themselves or protect themselves from others’ (Johns & Sedgwick, 1999, p. 2). Poor service delivery can give rise to a range of anxieties and fantasies, and lead to serious states of insecurity and fears about people’s ability to survive. Practitioners coming from a psychosocial perspective—who are able to ‘engage with emotional experience’ (Cooper, 2003)—are more likely to recognise these difficulties and to respond with sympathy and understanding to these distressed reactions and to take appropriate action. Here, the concept of ‘recognition’ is important in terms of the impact and meaning that is confirmed in the practitioner’s response (Benjamin, 1995, p. 33).

Similarly, practitioners who are in touch with the emotional impact that results from discrimination and social exclusion, and the suffering caused by poverty, are in a position to

accurately reflect those feelings when advocating and mediating on another's behalf. In these situations, and in times of transition or crisis, practitioners need to have an understanding of the importance of holding and containing anxiety (Froggett, 2002, pp. 41–42)—that is, ‘an irrational fear ... a response to some as yet unrecognised fact, either in the environment or in the self’ (Rycroft, 1968, pp. 7–8). Containing anxiety involves being open and receptive to the thoughts and feelings of others—becoming a ‘container’—so that these can be *transformed* into something more manageable (Hinshelwood, 1991, p. 248). This is often achieved through the process of talking to someone who has the ability to listen, to empathise, to *take in* and to *bear* the worries being expressed, and the ability to come alongside the individual in ways that communicate an understanding and give the sense that the person is not alone. The final stage of this process involves offering back the concerns to the anxious person but in a modified form—where the major anxieties are acknowledged but also altered so that they no longer carry the same ‘sting’ or sense of turmoil or anguish. This enables ‘natural’ growth processes to reassert themselves (Phillips, 1988, p. 98), until people feel ready and able to hold themselves (Benjamin, 1990, p. 128). However, practitioners working with this degree of openness and responsiveness need to be well supported and supervised if they are not to become overburdened and ‘burnt out’.

Energising and de-energising experiences

Negative life experiences, crises, ‘let downs’, or other ‘failure situations’ (Winnicott, 1975, p. 281) may be produced by, or lead to, defensive behaviour. Organisations, such as social services agencies, can be as prone to defensive behaviour as individuals—the ‘watch your back’ stance (Froggett, 2002, p. 131). Defences operate to protect people or organisations from aspects of themselves that are felt to be threatening, or that provoke anxiety (Jacobs, 1988, p. 80). They may keep ‘bad’ feelings a bay but can block ‘good’ feelings from getting through. They can also lead to exhaustion because ‘keeping the lid on things’, or ‘pushing feelings down’, takes emotional energy. This can make it more difficult for individuals to find the energy and motivation that is needed to be freed from feelings of anxiety, fear, resentment, or other draining emotions and inner conflicts. It is important to remember that many of these reactions—both positive and negative—are triggered by events from outside—by other people, or from events taking place in people's lives but their impact is intensified by the social and attachment histories that different individuals bring to this situation. Thus, social and environmental factors play a key role—a point that is key when working with people living in situations of deprivation, social exclusion and urban decay. These settings can make the task of fostering a supportive and constructive relationship, or progress, difficult to achieve ‘when we are confronted daily with oppression and deprivation’ (Coulshed & Orme, 1998, p. 3).

Practitioners who have an understanding of conscious and unconscious processes in relation to individuals and organisations, and who also take a systemic perspective, are in a good position to understand that responsibility for the difficulties that people experience—and their solution—cannot lie solely with the individual. For many service users, Winnicott's ‘facilitating environment’ or ‘setting that gives confidence’ does not exist—or at least, not yet. The socio-political environment, and the context within which social work is located, gives rise to a whole range of problems that ‘directly prevents individuals from engaging in personal growth processes’ (Weick, 1983, p. 133). As such, emotional energy needed for the task of growth—people moving their lives forward—is tied up in the struggle to survive or to cope with problems that would be more effectively addressed at the level of local and central government policy and practice. Here I am reminded of the many hours that service users are made to spend sorting out errors in our social security system. It can feel a much more immediate, rewarding and manageable task to

work with individuals than to change ‘the balance of forces in the social environment in the client’s favour’ (Kadushin, 1990, p. 14). Also, most social workers have not been trained to work with organisational change in this way, or to influence ‘systems within and outside social work’ (Cheetham *et al.*, 1992, p. 13). Social work practitioners work with some of the most deprived and disadvantaged sectors of the population which means we are in an ideal position to bear witness and report on ‘social ills’ as they impact on the lives of service users. However, for the most part, these deficiencies in the wider social environment remain unchallenged.

One approach to this difficulty involves helping service users to identify and to seek positive, energising experiences where creative potential is released, giving rise to other energising experiences. At the same time, it involves helping service users to protect themselves from negative, de-energising experiences that deplete energy and creative potential, and lead to people becoming stuck and lacking in motivation. This frees up energy that would have been spent recovering from the impact of negative experiences or spent on defensive reactions to protect the individual from further harm. For this task to be successful, that is for ‘personal growth to take place’ (Winnicott, 1975, p. 291) involves a recognition of the ‘struggle for recognition and development’ (Hoggett, 2000, p. 6; Benjamin, 1990, p. 16), providing ‘a setting that gives confidence’ (Winnicott, 1975, p. 287), and a relationship that is warm, concerned, interested, reliable, consistent, theoretically informed and robust in times of crisis. It is the kind of care that is needed to flourish as opposed to care needed to survive. An example of a project that purposefully fosters supportive and constructive relationships in this way can be found in the work of The Stone Center in Boston, USA. Jordan identifies five positive outcomes from this work:

1. an increase in zest and vitality;
2. an increase in empowerment to act;
3. an enlarged picture of ourselves and others;
4. an increase in self-worth (i.e. greater confidence and competence); and
5. a growing desire for more rather than less connection and contact with others (Jordan *et al.*, 1991, p. 95).

What is important in the work of the Stone Center, and their Relational/Cultural theory, is the importance placed on relatedness and how difficulties that stem from early formative experiences and poor attachment histories can be overcome by ‘participating in growth fostering relationships’ (Miller & Stiver, 1997, p. 22).

Capacity building

This approach can be linked to theories of human growth and development, and to a ‘strengths’ perspective, through the term *capacity*. Capacity is derived from the latin *capax*, meaning ‘able to take in; ability to receive or contain; holding power’ (*Oxford English Dictionary*). However, the term capacity not only describes *what is* but also *what can be* that is, it highlights the potential for change. From a psychosocial perspective, capacity building begins in infancy, through the ‘good enough’ environment, adaptation and care provided by the mother or carer. In this experience of being held, the infants develop the capacity to *hold* something for others, as well as for themselves—‘the capacity to develop an inside, to be a container’ (Winnicott, 1971, p. 97). Thus, a capacity is not something that is permanent—or fixed—but instead ‘develops through action or shrinks through neglect, and can be limited by the repressive action or attitudes of others and by failures in development in oneself’ (French, 1999, p. 1218). Capacity development is also used in other contexts, such as international contexts, community development, health promotion or other areas where there is a focus on extending the potential that currently operates. Many years

ago, I worked in a feminist mental health project that used the concept of capacities as an assessment tool and to measure progress (Trevithick, 1995). An important example includes ‘the capacity of the human being to grow and change throughout life’ (Konopka, 1963, p. 38). This states that given a degree of emotional and physical health, and a ‘facilitating’ or ‘good enough’ environment, we have an innate ‘life force’ that ‘will strive for developmental change based on innate curiosity, need for stimulation, and desire for fulfilment. This premise assumes that human beings are essentially imaginative, self-motivating, and curious beings who are capable of continual development’ (Weick, 1983, p. 133). Other examples of capacities, drawn from the work of Winnicott, include the ‘capacity for independence’, the ‘capacity to be alone’, the ‘capacity for concern’—that is, the capacity to be affected by the existence of another.

The place of relationship-based approaches in the new social work degree

The way the relationship is seen can act as a litmus test that helps to identify the current location and direction of social work. For example, in recent years, there has been a shift away from the needs of service users toward the needs of government, seen in the tension between ‘needs-led’ and ‘resource-led’ assessments and in the way that the service-user–practitioner relationship is ‘increasingly seen in procedural, legal and administrative terms’ (Howe, 1998a, p. 45) and not as indicators of practice effectiveness. With regard to the new social work degree, the service user–social worker relationship is described in several places in the requirements laid down in the Benchmarking Statement (BS) (Quality Assurance Agency for Higher Education, 2000), National Occupational Standards (NOS) (TOPSS UK, 2002), and the General Social Care Council’s *Rules and Requirements* (GSCC) (GSCC, 1996). For example, there is requirement for practitioners to ‘build and sustain purposeful relationships with people and organisations in community-based, and inter-professional contexts including group-care’ (BS, 3.2.2.4) and ‘develop effective helping relationships and partnerships with other individuals, groups and organisations that facilitate change’ (BS, 3.2.4). In a similar, yet sometimes different language, requirements laid down in the National Occupational Standards require social workers to ‘develop a strategy to enable a purposeful relationship’; ‘to develop and maintain effective working relationships’ with individuals, families, carers, groups, communities and others; ‘reflect on your own background, experiences and practice that may have an impact on the relationship’; ‘review the likely impact of your own, and your organisation’s, role and responsibilities in the relationship’ and to ‘develop a strategy to enable a purposeful relationship’. In the language of the GSCC, the requirement is to ‘sustain and maintain working relationships with children, young people, adults, carers and groups’ and to ‘respond to expressions of emotional needs from children, young people and adults throughout the development and maintenance of a professional social work relationship’.

Some requirements are the same, or similar, to those laid down in the requirements for the Diploma in Social Work (CCETSW, 1995) but with two important differences. The first relates to the importance given to theory in the new degree, particularly psychological theory, and the ‘relevance of psychological and physiological perspectives to understanding individual and social development and functioning’ (BS) and on ‘psychological and sociological explanations of human growth and development and the factors that impact on it’ (NOS). Similarly, the GSCC’s requirements call for social workers to have an understanding of ‘the effect of physical and social deprivation on development’. These requirements provide an important opportunity to link relationship-based approaches to theories of human growth and development, particularly in relation to people from disadvantaged and excluded sectors of the population, and to teach and study this subject from a sound theoretical and practice base. The second difference can be seen in the importance given to the role of service users and carers in relation to social work training

programmes and service provision and delivery, including assessment (SCIE, 2002). These changes indicate a recognition that service users and carers have much to contribute to social work in terms of their ‘expert’ knowledge as people with strengths and limitations in particular areas (learning difficulties, physical impairments, etc.) and also their experience of social work services and the way these services have been delivered in the past. For social workers to be able to demonstrate the skills and qualities needed to create an active partnership with service users in this way involves a sound theoretical understanding of the importance of building and maintaining good relationships and, more importantly, the ability to use this knowledge in practice. This paper has been an exploration of some of the changes and challenges open to social work—challenges that open up the opportunity to explore new ideas and to develop ‘a framework that unites the way we understand people with the way we work with them. Relationship-based thinking provides that possibility’ (Howe, 1998a, p. 55).

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