

# 1

## SYSTEMS THEORY

### INTRODUCTION

One of the earliest references to social work and systems theory goes as far back as the mid-1970s (Forder, 1976). At that time the theory was being articulated most notably in works seeking to provide social workers with a unitary model of practice (see Goldstein, 1973; Pincus and Minahan, 1974), one that could offer a holistic framework within which to place social work practice. Social work as a new profession was evolving and experimenting with ideas from psychology, sociology and social policy to try to find an identity and set of skills based on solid theories: as a result there was a lot of effort expended into creating a professional identity, value base and intellectual framework that could explain what social work was. This debate has continued ever since, mediated through changes in society, economic upheavals, population trends and legal and educational developments. Because society is in constant flux it is inevitable that social work should be unsettled, and theoretically promiscuous. This is not a problem but a reflection of how social work must evolve in order to respond to new challenges and constant changes.

Forder (1976) considered the philosophical implications of systems theory, concluding that it offered more than the prevailing reductionist psychological theories that were concerned with behaviour and stimuli and that it could develop sociological theories that would place human behaviour in the context of a desire for equilibrium and maintenance of the social and economic status quo. It was argued that systems theory could happily incorporate the concept of free will as well as self-determination and fit into Marxist-inspired conflict theory. Goldstein (1973) observed that the process of social work using a unitary model could be cyclical rather than having a linear start and finish. Together with Pincus and Minahan (1974) the concept of a contract between social worker and client, and what they termed 'target systems' for activity, was incorporated to emphasise the interactivity of the whole. A kaleidoscope provides a useful metaphor for understanding this abstraction: when this is twisted (i.e., an action is implemented) the whole pattern being observed changes its shape and colour from that of the original and does so *ad infinitum*.

Modern systems theory, and its link with family therapy and the systemic ideas that have developed from it, is generally credited with emerging in the 1950s as a result of a number of developments in the fields of psychology, communication theory and psychiatry. At a broader level it is also important to acknowledge here the socio-economic context of a post-Second World War economic expansion, population growth and the significance of cultural changes affecting people's attitudes to sex, marriage, leisure and intimate relationships. Thus in developed industrialised countries the fifties were a time of rapid sociological change and economic growth when new ideas were more easily articulated and received (Walker, 2005). As a result there was a broad cultural change and a focus on scientific ideas that looked for improvements in the way psychological problems were addressed, moving from mainly medical and pharmacological treatments towards adopting in the 1960s what we now refer to as 'talking therapies'.

One of the important factors that stimulated the embryonic ideas that were to grow into a new form of social work was the need to build upon the traditional psychoanalytic model of individual therapy. This individual psychodynamic model was constructed on the basis of theories of the unconscious, psycho-sexual development and defence mechanisms that offered elegant explanations for internal conflicts leading to anxiety, depression and more serious problems resulting in interpersonal difficulties (Yelloly, 1980). New research that demonstrated effectiveness when groups of people were brought together to talk about their problems began to influence practice. Two key figures stand out from this time as being influential in moving forward the ideas that were to crystallise in systemic practice. Ludwig von Bertalanffy (1968) was a German biologist who devised a general systems theory that could be used to explain how an organism worked: this could be achieved by studying the transactional processes happening between different parts. He understood that the whole was greater than the sum of its parts and that using this theory we could observe patterns and the way relationships were organised in any living system.

Gregory Bateson (1973) and others in the USA took this concept of a general systems theory and combined it with the new science of cybernetics: they then applied it to social systems such as the family. Cybernetics had introduced the idea of information processing and the role of feedback mechanisms in regulating mechanical systems. Bateson utilised this notion to argue that families were systems involving rules of communication and the regulatory function of feedback that influenced patterns of behaviour within them. In the UK, Ronald Laing (1969) challenged the orthodoxy in psychiatric practice by arguing that schizophrenia was a product of family dysfunction, while John Bowlby (1969) moved from treating individuals to treating families where an individual was displaying mental health problems.

An idea thus began to take root that individual experiences within families were continually being shaped and influenced by the evolving interaction patterns of communication. Bowlby is more generally recognised as a key figure in the development of attachment theory, yet he was among the first of this new generation to recognise the limitations of individual work and began to work with families rather than individuals. Individuals were not therefore determined by early traumatic experiences or distorted developmental transitions, as the prevailing

therapeutic orthodoxy argued (Freud, 1973; Segal, 1975; Yelloly, 1980). Systemic thinking conceptualised that individual personality and identity could change along with changes in family dynamics. From this common root theory (systems theory) a number of models and methods of practice evolved and this has continued through to the present day (Walker and Akister, 2004).

## SYSTEMS THEORY

Thinking of families as living systems with all the dynamics that this implies was quite revolutionary in its time as it challenged the prevailing orthodoxies which perceived emotional and psychological problems in individual terms:

Family therapy ... looks at problems within the systems of relationships in which they occur, and aims to promote change by intervening in the broader system rather than in the individual alone. (Burnham, 1984: 2)

It enabled professionals to think about how the dynamics are constantly altering as each family member deals with life both inside and outside the family. This also introduced ideas about family boundaries and the permeability of these. It moved the thinking away from linear causality and introduced the idea of circular causality, except where direct child abuse is being perpetrated by a powerful individual exercising bullying, intimidating and financial and psychological power. Crude interpretations of family therapy ideas saw this as absolving perpetrators of responsibility, particularly where a 'no blame' culture was employed in family work. Other critiques rightly pointed to some of the different methods and schools of family therapy practice as being manipulative and even combative (Howe, 1989). However, as we shall see later family therapy, just like systems theory, is constantly evolving, learning from its mistakes and adapting to new circumstances. The important theoretical concept we must grasp here is that change impacts and reverberates around the system in ways that are often unpredictable, for example in child protection interventions or family support measures. These systemic ideas were readily embraced by social workers as helping them to understand how the pieces of each family puzzle would fit together. So what do we mean by these unpredictable results of change?

The activity that follows aims to illustrate the interconnectedness of families, groups, organisations and interprofessional relationships, whereby one action can invoke another reaction in these systems.

---

A mother, father and their two children (boys aged 9 and 4) live together. The parents are having difficulty with the elder boy's behaviour. Family work is undertaken which results in clearer rules for both boys' behaviour and the father spending more time with the elder boy. The elder boy's behaviour improves and everyone is happy until they notice that the younger boy's behaviour has deteriorated.

---

ACTIVITY

## Commentary

What has happened here? It would appear that the improvement in one problem area has led to another problem developing. This is not uncommon when working with families and using systems theory can help us to consider and anticipate some of the possible dynamics of change. The impact of change on all parts of the system needs to be considered. In social work practice when a child is removed from a family it is not unusual to find that another child takes on the role of the child who has been removed and that the problems begin again. In other words dealing directly, or only, with the problem presented can lead to another issue developing and the use of systems theory can help prevent this 'symptom replacement'.

The key points which we need to think about and incorporate into our practice are:

- The parts of the family are interrelated.
- One part of the family cannot be understood in isolation from the rest of the system.
- Family functioning cannot be fully understood by simply understanding each of the parts separately.
- A family's structure and organisation are important factors that determine the behaviour of family members.

In all areas of practice there will be times when there can be a preoccupation with one or two family members and the others will be marginalised. In the above family the younger child's needs were not given enough priority when designing the intervention that was targeted on attempting to improve the elder child's behaviour. This can easily happen and even with experienced practitioners and so it is useful to revisit the interrelatedness of the family members.

These four points make the case for considering families systemically. In relation to social work practice the second and third are of particular note. It is still not uncommon in social work to try to piece together a family's story by accessing or understanding *separate parts* of that family. The notion that this does not enable an understanding of the whole, if true, throws into question much of social work practice where family members are not seen together and indeed some may not be involved at all. So if we cannot understand, let's say, a child in isolation from their family (bullet point 2), and if we cannot understand the family by simply interviewing members separately (bullet point 3), then the task of convening the family members relevant to the system under consideration needs to be undertaken.

It is easy to state this and even if it is apparently true many professionals working in the human services will feel more comfortable interviewing people individually and believe that this enables people to speak more freely. The problem with this viewpoint is that in doing so they are not communicating with the relevant family members and as that family's worker/therapist they will become the sole holder of all the information available as well as the person who decides what is sufficiently relevant for other family members to know. This is a very powerful position to

occupy and non-compatible with ideas of working in partnership with users and carers. In addition, as individuals we will each have our own slant, bias, preferences or interpretation of the facts and it is more effective to share these in a family meeting using a relevant system that can also provide a reality check (Walker and Akister, 2004).

A family's structure and organisation (bullet point 4) will determine to some degree what is possible within that particular family. There is no 'normal' family structure. The question therefore must be 'Does this structure work for this family?' And further, does it allow for the healthy growth of family members? This is where issues such as the permeability of boundaries can be explored. Each system will have a boundary and each system will also contain subsystems and be located within suprasystems. In family terms there will be subsystems within every family which will have their own boundaries. Examples of possible subsystems are those of parental, marital or sibling. There can also be grandparent subsystems and the existence of a suitable hierarchy between the various generations is important here. The suprasystems to which the family may belong concern the extended family, community and other ecological groupings. If a family's boundaries are relatively impervious they may be isolated from their community and might also be enmeshed in their relationships within that family. If on the other hand a family's boundaries are too permeable, the individuals in that family may be disengaged from one another and over-involved with the wider community. This enmeshment and disengagement were first described by Minuchin (1974).

Recent inspections and joint reviews following the death of Peter Connelly (DH, 2010a) have illustrated the need for social workers to rediscover their core skills of assessment, so that decision making and care planning are based on a sound analysis and understanding of each client's unique personality, history and circumstances. Munro confirms that a systems perspective offers the most holistic tool for undertaking informed assessment work that takes into full account the wider environmental factors combined with the inter-personal relationship patterns influencing family experience. Government guidance is recognising the importance of a therapeutic dimension to contemporary practice. It has long been established that social workers' own therapeutic skills need to be seen as a resource that must be used and offered in assessment work (DH, 2000a). This has been repeated since by Munro as recently as 2011.

Community care reforms, child care fiascos and mental health panics have fuelled the drive towards a managerialist culture in social work reducing the professional autonomy of social workers. Munro evidenced this and underlined the critical importance of freeing up social workers to spend more time in direct contact with families, rather than repeatedly filling in paperwork and ticking narrow procedures and timescales. The evidence from social work practitioners is of a strong demand for the practical and theoretical resources to equip them to deal with modern family life and rediscover the value of interpersonal relationship skills (BASW, 2003). The Department of Health has long conceded that assessment processes have become de-skilling for social workers (DH, 2000b), while others have shown how assessment frameworks are impeding therapeutic communication between social workers and service users (Crisp et al., 2007).

## SYSTEMS THEORY AND INTERVENTION PRACTICES

Three broad schools of family therapy can be identified within the systems literature: structural, strategic and systemic. These will be elaborated on along with various others in Chapter 3, but briefly described in this context. First, the characteristics of structural family therapy stem from the technique of observing the interactive patterns in a family. Once this baseline behaviour can be understood as contributing to the problem a structural approach would seek to highlight these, interrupt them when they are happening, and then have the family to re-enact them in ways that will lead to different outcomes. The attraction for practitioners of this way of using family therapy techniques is that it aspires to provide families with problem solving practical solutions while also maintaining a strict structural hierarchy between children and parents/carers. In direct family work therefore the task is to enable families to try out a variety of ways of doing things: for example, by coaching a parent on how to maintain a boundary or limit the behaviour of their child.

Second, the strategic family therapy approach, in contrast to the structural approach, does not have a normative concept of the family that should exist according to set hierarchies and sub-systems of parents/children, etc. Rather, the focus for strategic family therapists will concentrate on the day-to-day interactions which have resulted in problems and the cognitive thinking that is being applied to solve them. The perceptions that people have about these problems will invariably influence how they try to tackle them. In this way a culturally relevant approach will focus on the perceptions within the family system rather than seek to impose one. Attempted solutions and behavioural responses that actually maintain the problem require challenging and shifting, with alternatives being promoted by the worker (Walker and Akister, 2004).

Third, the development of the Milan Systemic Model began in Italy in the 1970s where a group of psychiatrists were experimenting with treating individuals who had been diagnosed as schizophrenic in a radically different way to the orthodox methods then employed. This is an example of a challenge to the prevailing culture within Anglo-American practices that was mounted by a team that had been influenced in their thinking by their particular cultural context. They reported better outcomes when they worked with an entire family rather than the individual patient. The central theoretical idea informing this approach is that the symptomatic behaviour of a family individual is part of a transactional pattern that is peculiar to the family system in which it occurs. Therefore the way to change the symptom is to change the rules of the family (Walker and Akister, 2004).

The goal of this work is to discover the current systemic rules and cultural myths which sustain the present dysfunctional patterns of relating and to then use the assumed resistance of the family towards outside help as a provocation to change. This change is achieved by clarifying the ambiguity in relationships that occur at a nodal point in the family's evolution. Milan Systemic therapists do not work to a normative blueprint of how an ideal family should function (Burnham, 1984).



Furthermore this approach emphasises the significance of the underlying cultural beliefs held by family members about the problem which affected an individual's behaviour. It avoids being perceived as blaming the non-symptomatic members of the family by working on the basis that the actions of various family members are the best they can do (Dallos and Draper, 2000).

## FAMILY LIFECYCLE AND TRANSITIONAL CHALLENGES

Why is the family lifecycle so important? It identifies the tasks that family members have to deal with at the particular stages of life they occupy. Each stage will have different developmental tasks for members. Being a couple requires quite different adaptations to being a couple with a baby, while the needs and tasks faced by a family with young children are very different from those for a family with older children in the process of leaving home and so on. By looking at the family lifecycle we can access a window into the developmental needs of individuals within a family. If these are not being met then family members are likely to experience problems (Dryden, 1988; Brown and Christensen, 1999).

Much has been written about family development, particularly the family lifecycle, but for reasons of space only a brief summary is included here. Essentially the family lifecycle tends to be thought of as a series of stages, each with its own developmental task. The stage of the lifecycle which a family has reached will have relevance to our understanding why family members are experiencing difficulties at that particular point in time. It has been widely proposed that families may experience problems at various transition points in the lifecycle (see Carter and McGoldrick, 1999, for a full description of these stages). It is thus vital to be aware of the main transitions and some of the disruptions to these that can occur. A key factor in this view is that many families function well, or at least do not perceive themselves as having problems for long periods of time. Therefore there must be something specific that triggers family difficulties: it does this by creating circumstances which produce a level of stress that the family will be unable to negotiate. Many family workers believe that moving from one stage of the lifecycle to another can produce such stress (Hoffman, 1981; Madanes, 1981). Examples of this include adjusting to the arrival of another child or coping with a child entering adolescence. Each of these stages will demand alterations to family routines and there will also be an emotional process involved in such transitions.

The main stages of a modern culturally-relevant lifecycle which have been identified are shown in Table 1.1. Within these stages are many substages and it is perhaps noteworthy that families do not proceed neatly through all these stages. We might expect adolescents to be leaving home around the time that grandparents are requiring more care, a stage when families thus have some spare capacity to deal with this. However, grandparents can often become ill when children are still dependent and as a result there will be a conflict of interest as well as a heavy



workload to negotiate. Similarly, as a family enters the stage of being a family with adolescents another baby may arrive, this event thereby necessitating that the family needs to negotiate two developmental stages at the same time.

Increasingly there are families where divorce and/or remarriage have taken place and this also adds a different set of issues to the lifecycle stages that have to be negotiated as well. These may involve the loss of a natural parent and/or gaining a step-child/parent/grandparent. These can also involve negotiations between different family systems. Such extensive family arrangements will inevitably result in complex family lifecycle stages. Often a new couple will want to have children together as well as care for the children they already have. This increases the possibility of being a

**Table 1.1** Culturally inclusive life cycle

<b>Life cycle stage of transition</b>	<b>Emotional process</b>	<b>Changes in family status</b>
1. Between families: the unattached young adult	Individuation requires coming to terms with ethnicity	Differentiation of self from family – not necessarily separation
2. The young couple	Definition of sex roles. Commitment to couple as separate partners or as merged identity	Cultural attitudes can influence female recruited into male line; separate from families of origin; or social norms conformity
3. Transition to parenthood	Observing birth rituals with/without partner, home/hospital. Accepting new members into system	Making space in relationship; parenting responsibilities; extended family involvement
4. Families with adolescents	Tension and flexibility in boundaries contending with separation and different political/religious values/social norms	Parent/child struggle to accept independence/moving in and out of system. Gender issues over different levels of freedom for males/females
5. Launching children and moving on	Accepting different versions of exits from and entries to family system	Cultural context such as established majority, or stage or immigration/migration. Expectations of success, financial support, loyalties. Inclusion of in-laws and dealing with disability/parent death
6. The expanding family in later life	Accepting the changes in generational roles, issues of dependency switch, forms of child care: individual or group	Maintaining own/couple functioning. Supporting older generation. Managing multiple losses – parents, spouse, siblings, peers

Adapted from Kemps, 1997





family with young children as well as older children who may need to live elsewhere for all or part of the time: such arrangements can require complex adaptations.

There are numerous possibilities concerning the lifecycle which will need social workers' consideration and awareness and which may be key to the presenting problem. In the example of the arrival of a new baby in a family with adolescents, it will often be expected that the adolescent is old enough to understand a baby's intense physical demands. This may indeed be the case at one level, but almost invariably the adolescent will experience mixed emotions on the arrival of this new child and may find the decrease in parental attention difficult to cope with. In families presenting at this stage issues such as these must be appraised.

Changes in lifecycle stages can be difficult for many reasons including, for example, anxiety about letting go in adolescence and adjusting to altered responsibilities with new arrivals in the family. In the intensity of dealing with a whole family interview we may lose sight of lifecycle issues which can often offer simple explanations which will make sense to a family. Prior to the first meeting the social worker should consider the lifecycle stage a family has reached. They should also consider what the lifecycle issues and transitions appear to be for that family and be prepared to confirm or moderate these during their assessment of the presenting problems and family functioning. Sometimes the lifecycle transition can be key to the whole child protection process, so it must be recognised here as a highly useful feature in any preparation for making an initial assessment of a family.

## KEY ELEMENTS IN SYSTEMS-BASED WORK

### SUPERVISION

Family therapy possesses a rare openness in relation to exposing practice to wider scrutiny. Apart from the use of video recordings as a way of analysing the complex family patterns of interaction that are impossible to track during an interview, they can also be used as a training tool. Family therapy sessions are usually supervised live: this will involve at least one other person observing the session who will offer feedback and suggestions during the work or at a planned mid-point break. The person/s observing may be behind a screen or present in the room and thus will be able to gain a different perspective to that of the worker involved with the family. In this way they can spot important aspects that may benefit from a supportive suggestion. This notion has been developed to include the use of reflecting teams, whereby the individual(s) behind the screen/mirror will join the family and the worker in front of it to openly discuss their perceptions. Individual-oriented therapists or counsellors who have usually undergone intense personal analysis are also expected to open their practice to scrutiny and supervision, whether in public or private practice. In addition convergence is occurring nowadays whereby family therapists are coming under pressure to demonstrate a degree of personal therapeutic experience before qualifying as registered therapists.



## CONTEXT OF PROBLEMS

This is more than anything perhaps the most defining characteristic of social work practice. It means that whatever the problem being presented to you as a practitioner using systems theory is you will automatically begin to ask a series of questions that will be linked to the context of the presenting problem. This relates not just to the family context but also to the wider professional, public, socio-economic and cultural context of the problem. In other words, it is an ecological approach in that it posits not just that individuals are inter-linked within families but also that families are inter-linked in communities that are in turn inter-linked with classes, ethnic groups and cultures. It is a way to start the reframing process and look at the problem from a different angle so that the concept of blame begins to be eroded and replaced with the concept of understanding the patterns that have created and are maintaining the current problem. For example, one question can prove very helpful here: at some point ask each member of a family 'If this problem were to disappear what problem would be left that would concern you?' This illustrates a different way of working when compared with approaches that can unwittingly reinforce families' dependence on a particular problem. Understanding the overall context of a problem can offer another way of tackling it, rather than seeking to change an individual or indeed trying to change an entire family.

## CIRCULARITY/PATTERNS

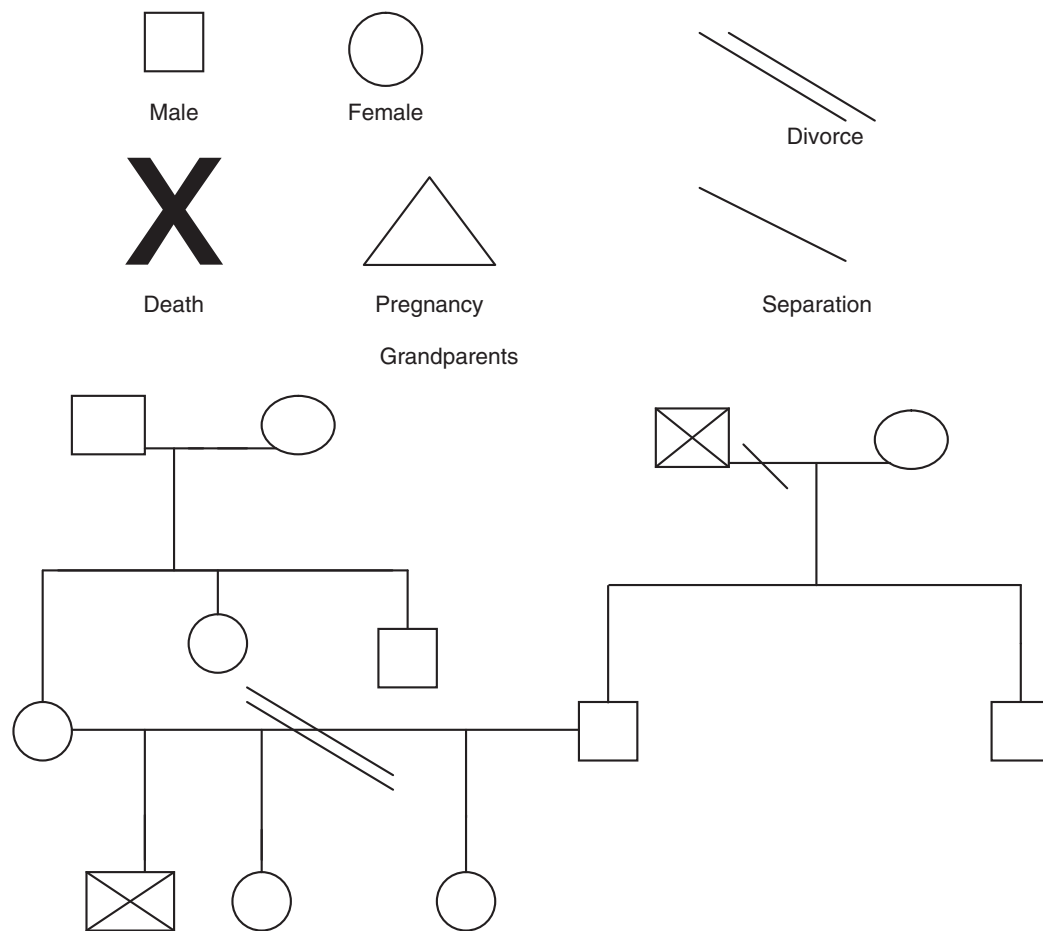
These are characteristic of systems-based work. It is a foundational assumption of systems theory that problematic behaviour is conceived of as forming part of a reflexive, circular motion of events and behaviours without a beginning or end. Being able to spot this circular process and articulate it in a meaningful way with an individual or family offers a positive way forward. This releases the social worker and the family so they are able to think beyond linear causality and blaming or scapegoating behaviour. The important distinction when using this conceptual framework is where abusive adults use grooming behaviour and their power to abuse children and young people. In these child protection cases, and in domestic violence situations, the motivation and responsibility will need to be firmly located with the perpetrator who may need to be removed physically from the family system. The circular understanding of problems offers an elegant explanatory tool to uncover the reasons for the symptoms and other dysfunctional behaviour. Within a family any action by one member will affect all other members and the family as a whole. Each member's response will in turn prompt other responses that will affect all members, whose further reactions will then provoke yet more responses. Such a reverberating effect will in turn affect the first person in a continuous series of chains of influence (Goldenberg and Goldenberg, 2004).

It is vital not to take theoretical concepts to a level of abstraction where they cease to be useful. It is easy to be seduced by the technocratic skills and mechanisms of systems-based working at the expense of missing individual human responses

in families or individual members as well as yourself to what emerges during your work in safeguarding children and young people. You may be an efficient social worker in terms of technical ability, but you may also be experienced by the family/individual as cold, distanced, and emotionally unavailable. One way of guarding against this is to do some preparation before embarking on the work by reflecting on your individual experiences within your own family system. This includes early childhood memories which you may want to prompt with the use of photographs or familiar objects and places.

This practical activity will immediately enable you to visualise the concept of systems and connectedness that will not just be restricted to your own family system. The experiential nature of this activity should arouse strong feelings and give you a greater insight into the impact of your work with vulnerable families.

- Try constructing your own family geneogram using the symbols and example in Figure 1.1.



**Figure 1.1** Geneogram symbols and illustration of three-generational family

- Draw connections between other family members you feel close to or distanced from.
- Think about the family history and culture going back several generations, writing pen pictures of grandparent relationships and characteristics/behaviours/mannerisms.
- By recalling those poignant stories or significant events that affected you and your family, you can begin to appreciate the impact of your own interventions with families and individuals.

### Commentary

This exercise should help you maintain contact with the real feelings and experiences generated when working at a therapeutic level with client families or individuals. Some people can find this exercise too distressing or uncomfortable while others will find it enlightening and empowering. You may find it helpful to conduct the exercise jointly with a trusted colleague or friend, or even a family member. Be prepared for a powerful experience and try to anticipate the need to talk it through with someone afterwards: this could be a team leader or counsellor, or a friend who is good at listening in a non-judgemental way. Knowing yourself is a pre-requisite for modern social work practice and this is very much the case when working with families where you are engaging with individuals at a deeper level. Understanding your own family culture and heritage and the events and issues that have shaped all the individuals within it can offer you some personal insights into the meaning of culture and the deep feelings of identity it evokes.

Thinking about your own community and where you come from, as well as the idea of what it feels like to expose the past and explore its impact on the present, is a powerful experience. A thorough knowledge of your family process can help you to avoid over-identifying with a similar family or persecuting a different family. An awareness of your own feelings of vulnerability and sensitive family issues can also prepare you for negotiating these in a more sympathetic and thoughtful way with families and the individuals you work with. A sophisticated understanding of culture will enable you to consider the multifarious nature of the term 'culture' and how it can protect you against assuming a knowledge and understanding of similar people when in fact you are very different.

## DECISION MAKING

Social work, with children and families, will involve critical decisions about whether or not children should remain in their parents' care. The knowledge on which such decisions are based is drawn from theories of child development, parenting capacity and family functioning. Social work practice in this field has been criticised for failing children when tragedies occur. Sadly it is inevitable that such tragedies will

continue to happen. However, it is also clear from inquiries into child deaths that social work practice can be improved: see, for example, the inquiries into the deaths of Maria Colwell (DHSS, 1974a) and Peter Connelly (Department of Health, 2010). Whether the approach taken by an inquiry promotes changes that lead to better outcomes for children is unclear. The inquiry into Maria Colwell's death confined itself to procedural conclusions, investigating the way in which care had or had not been provided and the coordination of services. Unfortunately, the focus of that inquiry and of subsequent reforms was on the existing system and how to improve it. Nowhere did the inquiry suggest that children's interests could be better served by interventions directed towards the systemic context on which those children are dependent. Minuchin stated:

Looking at the Maria Colwell case from the point of view of a family therapist, I see a group of good people, including dedicated servants of social and legal services, who couldn't respond to Maria because they thought in fragmented ways. Their cognitive models imposed a kind of acoustical screen so that Maria's cries were absorbed and blunted. If I am right, then the reforms introduced to improve those legal and social service systems will only help to retain incorrect points of view. (1984: 144)

The Munro Report has now energised a new generation of officials and government ministers and provided a solid evidence base from which they can draw conclusions and implement changes in child protection. It has taken twenty years for systems ideas to become integrated into policy relating to working with children and families. The government proposed a framework to try to improve social work practice through more structured approaches to family assessment (Department of Health, 2000b; Bentovim and Bingley-Miller, 2002). Improving both family assessments and workers' understanding of attachment relationships was key to this initiative.

Most individuals will have significant others with whom they will relate. Skills in working with two or more people are vital to all those involved in the caring professions. An intervention with one person will affect their significant others and we need to be cognisant of this. As social workers we are required to work with people in their family and community or ecological contexts. The skills of working with two or more people are best described and developed in the introductory texts in social work and family therapy literature (see for example Barker, 1998; Dallos and Draper, 2000; Trevithick, 2005; Okitikpi and Aymer, 2008; O'Loughlin and O'Loughlin, 2008). Once these have been incorporated into our decision-making processes they can be utilised in many and varied situations. The skills demanded by systems theory are readily transferable and relevant to all age groups.

The popularity of systems theory and the practice of family therapy arose from its apparent effectiveness in enabling rapid change for families experiencing problems. One of the reasons for this appears to be the active inclusion of all family members in the change process (Gorell Barnes, 1998), thereby avoiding situations where people feel excluded from what is happening to those they are close to or they are resentful of change. The experience of feeling excluded can occur in many settings.

However, it is not easy to get families together and many workers do not feel comfortable dealing with the complexities of working with the family system where child abuse is suspected: obviously this is contra-indicated where a family member is actively abusing another. For all professionals working in the human professions some of these skills will prove essential since it is the people who live together and relate together who are in the best position to alter the circumstances for each other and to promote positive change. The reason that people come to need interventions is that they have encountered difficulty in dealing with a particular set of circumstances and need assistance to move on and re-establish their family system using the strengths that exist within that family. Thus systems theory is quite consistent with the strengths approach to social work practice, as it seeks to focus on what a family can do well rather than on what they are failing to do.

There are many excellent introductory texts on family therapy (for example Barker, 1998; Dallos and Draper, 2000). Rather than try to repeat what has already been written, the core concepts and considerations for working with a family have been described above and then linked to social work and systems practice. All family therapy is predicated on working with each family as a system and therefore we have looked briefly at the key components of systems theory as these are relevant to social work. The importance of convening and engaging with a family and their lifecycle issues and multicultural aspects is crucial to setting up work with that family. How the process begins and work is done even before seeing a family is critical to the potential success of any decision and subsequent intervention. People do not seek the help of professionals lightly, nor do they take kindly to unwanted intrusions in their lives. Because of this our preparation for working with a family is crucial but also easily rushed in our busy professional practice. Time spent in preparation will be repaid in our reaching the best available decision: it also stands a better chance of sustaining change or safeguarding children and young people in the long term.

## MULTICULTURAL SYSTEMS

McGoldrick, Pearce and Giordano (1982) were among the first to draw attention to culture and ethnicity as crucial influences on the interactional style and structure of families. They also highlighted the importance of giving attention to ethnic groups within what is typically referred to as the majority culture. In order to train multiculturally sensitive therapists, an understanding of one's own ethnic and cultural background will enable us to have a context within which to understand the culture of others (as the previous exercise sought to achieve). We need to appreciate that within the majority culture there is no homogeneous group (Preli and Bernard, 1993; Muncie et al., 1997). Social workers must be aware of the subtleties of their own ethnic and cultural make-up since multicultural practice applies to both majority and minority cultures: the point here being that we cannot

make assumptions about the internal structure of a family from their known culture, as defined by crude stereotypes or lazy generalisations, since there will always be individual interpretations in any culture or religion and we need to take the time to reflect upon and understand these. This does not mean devouring texts that seek to define ethnic minority characteristics or religious customs, rather it requires us to shed stereotypes, challenge orthodox assumptions and open our imagination to any possibility. Or as Einstein eloquently put it: 'knowledge without imagination is useless'.

Pursuing these cultural ideas further, Berg and Jaya (1993) looked at Asian-American families. They explored the concept of family uniqueness and started from the understanding that Asian-American families are like all other families, like some other families, and like no other families. They believed that cultural sensitivity can be learned and looked at some culturally important values for this group. What follows here are, however, some generalisations for the sake of brevity, but we must always remember that each family is unique and requires an individual approach. The need for careful, reflective assessment and high quality supervision before any intervention is made is vital.

## FAMILY CULTURE A

There is a long tradition in Asian culture of solving problems through mediation rather than using head-on confrontations. Berg and Jaya suggest social workers are in a good position to mediate within a family's conflict because of their position of authority, knowledge of family relationships and use of techniques that can enhance face-saving with Asian families.

In this situation meeting with family members separately is suggested since airing their difficulties together at the outset may be too confrontative. This is in contrast to the suggestion above of the importance of beginning family work with whole families. It highlights how every family situation needs an individual appraisal by the social workers on receiving referrals to assess whether standard procedures, whatever those are in a particular agency, are appropriate for the particular family referred. The task of convening and engaging with that family will therefore vary, though it will remain the case that simply understanding the various parts of the family will not enable an understanding of the whole family and the individual contact will need to prepare family members for a family meeting.

Berg and Jaya also give a salutary example of how the different cultures will approach the same problem, using the example of behaviour control.

## FAMILY CULTURE B

American and British children who misbehave are often 'grounded'. Their punishment is to be forced to be with their family and it seems that one of the results of grounding is that children will fight their way out of the family (a process that Americans call emancipation). With Asian children, being excluded from the family is extremely rare and is viewed as a severe punishment. Thus if children misbehave they are threatened with banishment from the family and told to get out. These children will have to fight to stay in the family and the expectation will be that they will remain within the family and will also bring their spouses to join it.

The point here is that neither approach is better or worse, simply that they are different and need to be understood before we try to intervene. An intervention based on the wrong premise for 'grounding' would otherwise totally fail and as social workers we would be perplexed by this if we have assumed majority culture norms. Indeed with any family these expectations should be checked thoroughly.

The systems model of a careful, systematic assessment of how a family organises itself in relation to the necessary tasks of family life is particularly appropriate for understanding the uniqueness of any family. It enables social workers to spend a number of sessions with each family, in a structured way exploring their interaction patterns before embarking on ideas and strategies aimed at encouraging change. It is also a model which focuses on our role as facilitators, working in partnership with a family and enabling or empowering family members rather than instructing or directing them.

Messent (1992), working with Bangladeshi families in East London, also points to the appropriateness of systems theory with Asian families because of the importance of interconnections between different family members while also urging caution with the techniques used. Later in this book a variety of methods and techniques are described, however in this context Messent advises that structural techniques would be appropriate but unbalancing the family should be avoided as this approach may prove too confrontative.

Is it necessary or even desirable for social workers to come from the same religious or cultural background? Various difficulties can arise in a situation of workers having the same culture, particularly where this is not the majority culture and issues around integrating with the majority culture arise. There may be some benefit to having the same cultural/religious identity, but there may also be dis-benefits: Toledano (1996) has written of an issue that may arise when the family and the therapist do come from the same religion or culture (in this case Judaism) and when the culture is a minority one in society.



## Commentary

'How can staff use their own experience and knowledge of their shared culture without imposing it on the family? ... A position of "not knowing" is helpful when the therapist operates almost as a curious anthropologist studying an unfamiliar culture. It is however problematic when the worker is known to share the client's culture' (Toledano, 1996: 293). This is helpful as it emphasises the difference within groups and the difficulties that can arise when the assumption is of shared values and the expectation is that the social worker will support these. It is not necessary to have the answers to a cultural or religious dilemma within a family, however it is necessary to facilitate the process of the family in coming to a resolution of the dilemma. An awareness and preparedness by the social worker to question both their own and the family's position with respect to cultural and religious issues is essential. But it cannot be stressed strongly enough the need for an appreciation of uniqueness within any grouping.

Recent research and theoretical constructs are creating a context where systems ideas can be understood and put into action (Chapter 9 examines some of these in more detail). Ferguson (2008), for example, has examined the nature of social work from the perspective of movement and mobilities. He argued that social work is at all times 'on the move', yet theory and analyses of policy and practice largely depict it as static, solid, and sedentarist. This draws on the new mobilities paradigm (Sheller and Urry, 2003) through which a concern with flows and movements of people, objects, information, practices, speed and rhythm, along with complexity, fluid images and liquid metaphors, is moving to the centre of social theory. This is consistent with a systems perspective of constant change (for example, as seen in the Buddhist belief that you cannot put your foot in the same river twice). An understanding of the liquid, mobile character of social work means producing accounts that are much closer to what its practices are; acknowledging how and where they are performed and experienced by service users and professionals; and recognising the opportunities and risks inherent to them.