

THE UNIVERSITY OF MANITOBA

AN ECOLOGICAL NETWORK FAMILY PRACTICE MODEL:

A DEVELOPMENT OF FAMILY SOCIAL WORK

BY

RUTH PROMISLOW RACHLIS

A PRACTICUM REPORT

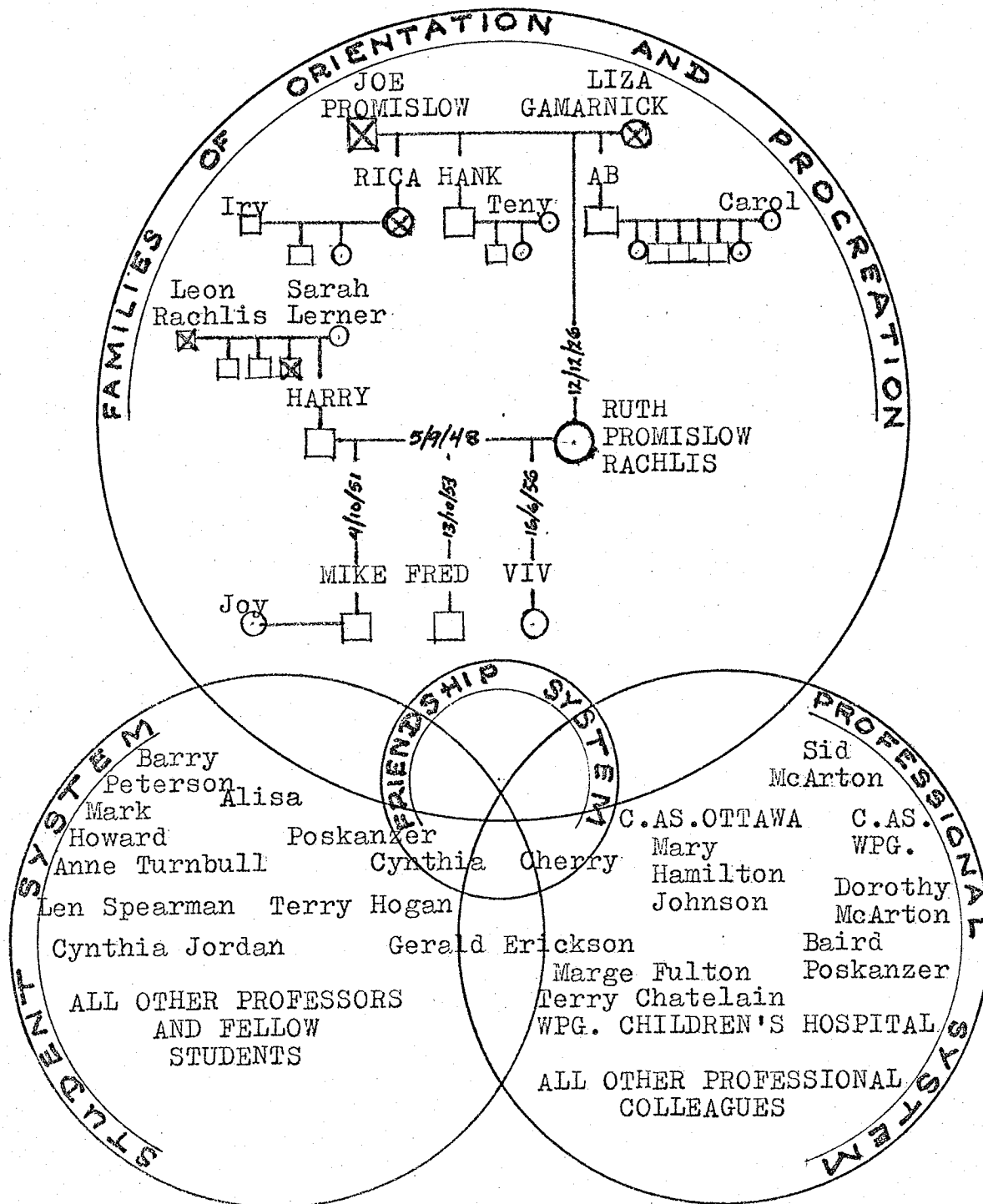
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INTRODUCTION

This paper is a report on the practicum in which I have been involved as a Social Work graduate student since September, 1973. My goals were threefold:

1. to develop skills as an advanced practitioner in family therapy;
2. to examine the evolution of family social work from the beginning of the Charity Organization Societies in the 1870's to the beginning of the current era of family therapy in order to assess whether that orientation to the family is a developmental outgrowth of the profession; and,
3. to inquire into the uniqueness of the contribution which social work can make in the field of family therapy.

In order to develop my practice skills, I worked at the Psychological Service Centre at the University of Manitoba for the past ten months. There, I have been involved with fifteen family groupings. In eight, the total nuclear family was included at some time during the period of treatment; four marital couples were seen in multiple couple group therapy; one marital pair was treated in conjoint marital therapy; and, in two cases, the wives on an intake basis were helped to explore the problems which related to their families and they chose to work further on their own. With two of the total families, and with the multiple couple group, I worked in co-therapy with two graduate Psychology students. Many of the cases included involvement with community agencies, citizen's ad hoc committees, other professionals and other individuals who had significant relationships to the family. It is this practice model of the network of the families' social context in the therapy situation which I elucidate later in this report.

My route for reaching my second and third goals was to review the literature pertaining to the past century of family social work, beginning with the founding of the Charity Organization movement in the United States. I felt that this would not only serve to examine Social Work's evolution but might also provide insights into the question of whether Social Work has a unique contribution to make to the field of Family Therapy. Just as Norman Paul spoke of the individual's life cycle as a system composed of sequential stages of development as subsystems,¹ so also do I feel that an examination of the developmental stages in family social work will be helpful to assess whether Family Therapy is a normal outgrowth of family casework or whether it is an anomaly because of "... the discontinuities between the knowledge base and practice of social casework and family therapy."²

Before proceeding with this review, however, it will be necessary to deal first with problems of definition and sources and the limitations imposed by my resolution of these problems. The Oxford English Dictionary lists eleven main definitions and numerous sub-definitions for the family. Although many of the usages shown are irrelevant ("a group or assemblage of objects ...") or obsolete ("the retinue of a nobleman or grandee"), a cursory skimming will indicate that the term "family" must be one of the least static words in the English language. Even in the short period of

¹ Norman Paul, M.D., "A General Systems Approach to Human Maturation and Family Therapy" in General Systems Theory and Psychiatry, ed. by William Gray, M.D., and others (Boston: Little Brown & Co., 1969), p. 435.

² Gerald Erickson, "Teaching Family Therapy," Journal of Education for Social Work, IX (Fall 1973), p. 9.

the past hundred years, the concept has undergone significant change from that of a household, including servants, and together with all kin under the same roof or not, to that of the nuclear family. In this paper, I have used the fluid definition and the reader should be cautioned that the concept of family at the end of the period reviewed is not the same as at the beginning because of the changes in its structure and function over this time period.³

With regard to sources, it is important to stress the problems faced in a paper of this size dealing with historical research into an area of professional theory and practice. The researcher is faced with three major categories of sources. Primary - agency case records of the period under review, which represent application of theory and actual practice; Secondary - contemporary commentary in professional journals and books; and Tertiary - articles and books which look back to earlier periods chiefly with regard to examining secondary sources from an historical perspective. Because of limits of time, space and geography, I have ignored the primary sources, and because of the lack of contemporary commentary prior to 1920, only tertiary sources were available for the earliest years. Further, since most of the historical sources were from the United States, I settled early on for that orientation.

The limitation imposed by the lack of Canadian sources is obvious but not significant since it is a reasonable assumption that the Canadian sequential development is similar to that of the United States - despite the differences during the period in the legislative framework. In

³ For a useful summary of three theories of evolutionary change of family structure and function see Gerald R. Leslie, The Family in Social Context (New York: Oxford University Press, 1967), Ch. 8, pp. 221-251.

contrast, the limitation imposed by dependence on secondary and tertiary sources, though not so obvious, can be quite significant. The question arises: Do the secondary sources accurately reflect the actual practice of the time? To be more explicit: - Based on our knowledge of the divergence between current scholarly concerns and the reality factors in the working field, is there not ground for believing that contemporary writings represent only the minority innovative views of the authors about how Family Social Work should be practised? Further, a divergence can also be expected to occur between the concerns expressed in contemporary writings and their retrospective assessment at a later date. An example of this divergence and a suggestion for scholarly study of the problem terminates an article entitled "Social Work's Freudian Deluge: Myth or Reality"⁴ by Leslie B. Alexander:

"In summary, then, there does seem to be a very clear discrepancy between most primary and secondary analyses of social work in the 1920s. While many recent writers have fostered the thesis that psychoanalytic theory deluged social work in that decade, the evidence from primary sources is contrary to this conclusion. Rather it appears that, except in a few northeastern cities, Freudian theory was not well known to social workers. Its influence was limited to an elite few rather than to the main body of the profession ..."

"It would be interesting ... to supplement the survey with case records, curricula from schools of social work existing at the time, and interviews with practioners active during the period." ⁵

⁴ In this study Alexander refutes the view of Woodroffe who stated "... after the First World War ... the American social work scene was swept by a psychiatric deluge ..." See Kathleen Woodroffe, From Charity to Social Work (Toronto: University of Toronto Press, 1962), p. 119.

⁵ Leslie B. Alexander, "Social Work's Freudian Deluge: Myth or Reality?" The Social Service Review, Vol. 46 (December 1972), No. 4, p. 532. Note that Alexander uses the terms "Primary" and "Secondary" in the same sense as I have designated them as Secondary and Tertiary sources. He means contemporary and retrospective writings, respectively. It is only in his final paragraph that he recognizes the "real" Primary sources but does not label them as such.

The limitations of this paper are then quite formidable. I proceed only with the reassurance that "the objective of historical science is not to know everything ... but to understand the ensemble. It is impossible to establish a rigorous distinction between what we know as fact and what we infer from the facts."⁶

HISTORICAL REVIEW

The 1870's in the United States was a period of ferment for welfare workers. By the end of the decade, the Society for Prevention of Pauperism was supplanted by the Charity Organization Society, the precursor of modern social casework. A writer looking back at this struggle had this to say: "[The Charity Organization Society was] organized as a protest against unco-ordinated and unintelligent relief-giving, and its uncompromising attack upon pauperism and mendacity won it many enemies among sentimental givers."⁷

The recipients of service from the Charity Organization Societies (hereafter referred to as C.O.S.) were the economically disadvantaged. The approach that was applied to these families was based on the medical model: "The hypothesis used was that "... uncovering the cause of a social ill would suggest the cure."⁸ This was consistent with the

⁶ Raymond Aron, "Evidence and Inference in History," in Evidence and Inference, ed. by Daniel Lerner (Illinois: The Free Press, 1958), p. 27.

⁷ Mary E. Richmond, The Long View: Papers and Addresses by Mary E. Richmond, ed. by Joanna C. Colcord and Ruth Z.S. Mann (New York: Russell Sage Foundation, 1930), p. 33.

⁸ Carel B. Germain, "Casework and Science: A Historical Encounter" in Theories of Social Casework, ed. by Robert Roberts and Robert Nee (Chicago: University of Chicago Press, 1970), p. 11.

general scientific approach of the time. Since this scientific approach,⁹ as it related to charity, had a strong moralistic base, the establishment of eligibility for services was determined in terms of "worthy" and "unworthy." The purpose of charity was seen to be to lessen the dependency of the family.

From its beginning, the C.O.S. sought "... to distinguish between what is peculiar to that family and must be individually conquered and what is borne in common ... and must be cured by social or legislative action."¹⁰ Thus, very early, our profession adopted a two-pronged attack on family problems: one being the emphasis by the Friendly Visitor on helping the individual family adjust to its environment and the other being the drive by the social activist to change that environment to more adequately meet the needs of more families. The two prongs were closely related at this time because of the social activists' dependence on data accumulation from case histories of the Visitors.

The unit of treatment of the C.O.S. was held to be the family. Zilpha Smith chastized those of her colleagues at the National Conference of Charities and Corrections in 1890 who dealt "... with poor persons or defective persons as individuals apart from their

⁹ It is questionable whether any scientific approach can be entirely divorced from values or ideology and this relates for example to atomic energy, family therapy or social policy. For views of the latter, see Gunnar Myrdal, "The Place of Values in Social Policy," Journal of Social Policy, Vol. 1, Part I, (1972); David Horowitz, "Social Science or Ideology," Social Policy, Vol. 1, No. 3, (September-October 1970), pp. 30-37; David Donnison, "Ideologies and Policies," Journal of Social Policy, Vol. 1, Part II, (April 1972), pp. 97-118; and Raymond Plant, Social and Moral Theory in Casework (London: Routledge and Kegan Paul, 1970).

¹⁰ Zilpha D. Smith, "Needy Families in Their Homes: Introduction," Proceedings, NCCC, 1901, p. 287. As quoted in Margaret E. Rich, A Belief in People: A History of Family Social Work (New York: Family Service Association of America, 1956), p. 28.

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family relationships." The role of the worker was to keep the family together but if this failed, help was to be sought from other charities to make the necessary placements. It appears that the C.O.S. regarded themselves as general practitioners who made referrals for service to specialty agencies when necessary.

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Family-centred casework had, by the early 1900's, developed as a process:

- "1. To learn the nature of the 'disease' as the family was considered to be 'socially ailing'; and,
2. To discover the strengths within the family to be used for their recovery toward self-maintenance." 13

As can be seen from the chart on the following page (Figure 1), Mary E. Richmond in 1901 took the broad view of forces impinging on, and acting within a family in order to determine those influences which could help to cure the diseased family. A cursory glance at this chart might result in crediting her with formulating modern concepts of systems in relationship to each other since she designates the family and its network of personal, neighborhood and civic forces as well as the private and public resources available. Her address to the National Conference of Charities and Corrections in 1901, from which this chart is taken, indicated that these forces were present in all families and not just those who were poor. The goal of service was to return the family to the A circle.

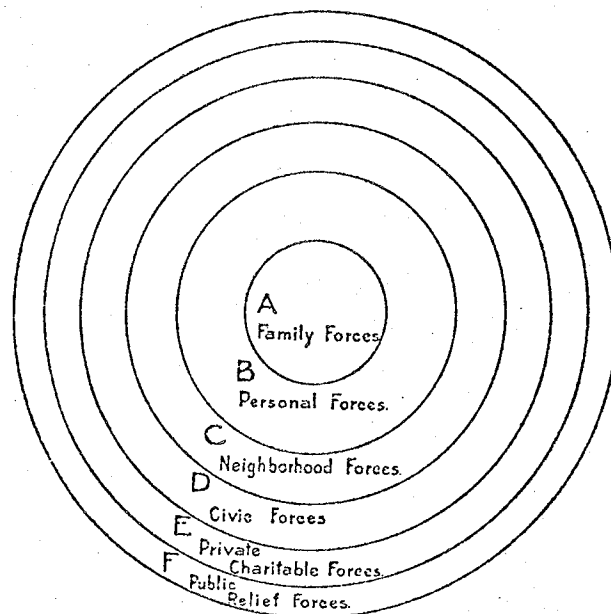
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¹¹ Rich, A Belief, Footnote 10, p. 95.

¹² For a recent view of the family worker as general practitioner, see Alfred Kahn, Studies in Social Policy and Planning (New York: Russell Sage Foundations, 1969), pp. 278-279 and pp. 282-284.

¹³ Nina R. Garton and Herbert A. Otto, The Development of Theory and Practice in Social Casework (Springfield, Ill.: Charles C. Thomas, 1964), p. 13.

¹⁴ Mary E. Richmond, The Long View, Footnote 7, p. 189.



A.—*Family Forces.*
Capacity of each member for
Affection.
Training.
Endeavor.
Social development.

B.—*Personal Forces.*
Kindred.
Friends.

C.—*Neighborhood Forces.*
Neighbors, landlords, tradesmen.
Former and present employers.
Clergymen, Sunday-school teachers, fellow church members.
Doctors.
Trade-unions, fraternal and benefit societies, social clubs, fellow-workmen.
Libraries, educational clubs, classes, settlements, etc.
Thrift agencies, savings-banks, stamp-savings, building and loan associations.

D.—*Civic Forces.*
School-teachers, truant officers.
Police, police magistrates, probation officers, reformatories.

Health department, sanitary inspectors, factory inspectors.
Postmen.
Parks, baths, etc.

E.—*Private Charitable Forces.*
Charity organization society.
Church of denomination to which family belongs.
Benevolent individuals.
National, special, and general relief societies.
Charitable employment agencies and work-rooms.
Fresh-air society, children's aid society, society for protection of children, children's homes, etc.
District nurses, sick-diet kitchens, dispensaries, hospitals, etc.
Society for suppression of vice, prisoner's aid society, etc.

F.—*Public Relief Forces.*
Almshouses.
Outdoor poor department.
Public hospitals and dispensaries.

DIAGRAM OF FORCES WITH WHICH THE CHARITY WORKER MAY CO-OPERATE
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FIGURE 1.

Taken from Mary E. Richmond, The Long View: Papers and Addresses by Mary E. Richmond, edited by Joanna C. Colcord and Ruth Z.S. Mann (New York: Russell Sage Foundations, 1930), p. 189.

It is interesting to note the criticisms of her views of the relationship between the family and its environment expressed by later writers possessed of new knowledge and theory. Virginia Robinson, who was beginning to assess the value of psychology to social work in 1934, wrote: "In this chart the relation of community forces to the family was skillfully analyzed but of the relationships within the family itself little was said or known."¹⁵ Carel Germain, writing in 1970, felt that Miss Richmond was dealing with scientific concepts in a mechanistic way and that she was handicapped by her lack of knowledge of today's scientific concepts which permit one to deal with "... problems of growth, change, and potentiality, with systems in mutual interaction, and with man as inseparable from environment in an ecological frame of reference."¹⁶

The second decade of the twentieth century saw the continuation of family charity agencies to differentiate between external factors affecting the family and the adjustments of family members within their own system. A predictable result was the conflict which developed between those theorists who felt that for the study of adjustment of members of the family it was necessary to abolish "... the family as a unit of interest in social service and replace that unit with the individual ... [and those that insisted that] ... we have not even in our most democratic philanthropy sufficiently

¹⁵ Virginia P. Robinson, A Changing Psychology in Social Casework (Chapel Hill: The University of North Carolina Press, 1934), p. 10.

¹⁶ Germain, "Casework and Science," Footnote 8, p. 29. It is a model for practice within this ecological frame of reference with which I will be dealing later in this paper.

emphasized the family, the whole diversified family as a unit of endeavors."¹⁷

A shift occurred at the same time in the view of charity and relief as primary goal to that of a casework tool for treatment and rehabilitation of the family as a whole.¹⁸ The desire to better comprehend the family led, however, to the labelling of the sick individual (the drinking husband, the delinquent child, the ignorant mother) as the focus for treatment. It would appear that it was impossible to apply Miss Richmond's systemic approach, restricted as the practitioners were to the values and limited knowledge of the time. Her search for a scientific base for Social Work led instead to the individual within the family as the focus of study and attention.¹⁹

By the end of the second decade of this century, then, there appeared to be a sharpening in the conflict of how the family could

¹⁷ Garton and Otto, Development Theory and Practice, Footnote 13, p. 13.

¹⁸ Rich, A Belief, Footnote 10, p. 4.

¹⁹ It would be interesting to investigate why social psychiatry, which developed in this period out of a close relationship with psychiatric social work, failed to have an impact on social work in emphasizing the family. Norman Bell and John Spiegel feel that the field of social psychiatry has been, and continued to be, ill defined in terms of whether it was a body of knowledge or a field of practice. (See "Social Psychiatry," Arch Gen Psych, Vol. 14 (April 1966), pp. 337-345.) Carel Germain states that it was much simpler for social workers to adopt the psychoanalytic theory which offered not only a rich body of insights but also a methodology and technique for applying them to individuals. (See Germain, "Casework and Science," Footnote 8, p. 18.) How thoroughly psychoanalytic theory was integrated into social work practice is questionable. (See for example, Alexander, "Social Work's Freudian Deluge: Myth or Reality?", Footnote 5.)

best be served: whether the focus should be on the individual within the family or on the family as a whole. Agreement was however general in the commitment of concern to the family. The institutionalization of this commitment came with the founding, in 1919, of the American Association for Organizing Family Social Work by the members of the national federation of Charity Organization Societies to replace, nationally, the federation which was, itself, established only eight years earlier.

The advent of this new association signalled not just a change in name but a change in emphasis as well since it included as one of its goals the promotion of family welfare generally in contrast to the former exclusive interest in serving only those families which were economically dependent. Hamilton, writing in 1931, felt that the main thrust in the re-organization of the national body was to promote the idea that any family problem could be brought to a family agency. This goal was not achieved in the immediately following years as the cases presenting themselves to family agencies continued to be involved, in the main, with "... economic social problems or failure
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in economic self-maintenance ..." While social work, generally, was interested in remedying poverty, disease and ignorance, Hamilton felt that the function of a family agency was to direct its specific attention to the effect of these problems on a particular family at a particular time.

²⁰ Gordon Hamilton, "Refocusing Family Casework," in Readings in Social Casework 1920-1938, ed. by Fern Lowry (New York: Columbia University Press, 1939), p. 86.

1920 was the year in which The Family, the Journal of the National Association of Family Social Workers, began publishing. Its purpose was

"... to provide a medium for more technical discussion, for more expansive and exclusive treatment of the family social workers' problems, for more intensive cultivation of a much narrower field, than is possible under the auspices of such a broad and many-sided publication as the Survey (a social work journal of broad interest) has come to be." 21

During this decade there were other indications of the growth of social work towards professionalization. Smith College recognized this trend and in 1921 awarded Mary Richmond an honorary degree for²² "... establishing the scientific basis of a new profession." The first six week training course for social workers had commenced in 1898 and, by 1920, the two year post-graduate university program existed on several campuses. Training in the scientific method of study, diagnosis and treatment was now considered to be important for the practice of social work and the requisite development of the social sciences was judged to have reached the stage of permitting the "... training of social workers on a basis that may properly be²³ called professional." Whether the capability of a scientific approach was due to the influence of social work of Freudian psychiatry or to the emergence of sociological concepts exemplified by Mary Richmond's contributions, it is clear that the 20's was a decade in which social

²¹ The Family, Vol. 1, No. 1, (March 1920), p. 18.

²² Germain, "Casework and Science," Footnote 8, p. 12.

²³ Stuart Alfred Queen, Social Work in the Light of History (Philadelphia and London: J.B. Lippincott Co., 1922), p. 28.

work was to become established as a profession with a specific theoretical knowledge base to be applied to its work with people.

The 1920's was also the decade in which were expressed the views of several persons so far ahead of their time that these views are only now being reviewed and examined. It was in 1926 that E.W. Burgess, a sociologist, wrote his article, "The Family as a Unity of Interacting Personalities," in which he stated that the family exists in reality²⁴ because of the interaction of its members and not through status by law.²⁵ Earlier, Raymond defined relationships within families as that capacity²⁶ which allows families to withstand external hazards. Margaret Rich analyzed the action taken with a family by a social worker using Burgess' concept. These voices, however, were few and family practice continued to ignore family interaction while concentrating on the individual.

While children had been recognized as a target for service many years earlier,²⁷ it was not until the 20's that individualization

²⁴ Ernest W. Burgess, "The Family as a Unity of Interacting Personalities," The Family, Vol. 7, (1926), pp. 3-9. For current discussion on Burgess' article in the light of recent research on the family, see Gerald Handel, "Psychological Studies of Whole Families," in Psychological Bulletin 63, 1965; and in Sourcebook in Marriage and the Family, ed. by Marvin B. Sussman (New York: Houghton Mifflin Co., 1968), pp. 515-535.

²⁵ Stockton Raymond, "What Constitutes the True Family Standard," The Family, Vol. 1, (June 1920), p. 14.

²⁶ Margaret Rich, "The Case Worker in Action," The Family, Vol. XI, (June 1930), pp. 117-123.

²⁷ "The Winnipeg, Canada Children's Aid Society was incorporated in 1898. Since then it has rescued from homes of vice and crime over 4,300 children. It has placed over 1,400 children in good foster homes for situations and maintained supervision over them during minority" (Child Welfare League of America Bulletin, Vol. II, No. 3, (March 15, 1923), p. 3). My emphasis.

occurred - "... and the family agencies viewed their goal as keeping a child at home rather than transferring it to another one even if it was a better one."²⁸ Jessie Taft, in an article entitled, "The Relation of Psychiatry to Social Work," saw the role of social workers as that of re-education to bring about "... carefully foreseen and selected alterations in the environment."²⁹ Other professions could also contribute to the improvement in family organization and functioning with respect to children by playing a part in the re-education process. Home economists, for example, with their knowledge of nutrition and home management, were utilized as consultants as well as employees in family agencies.³⁰

It was the mother who was in most cases described in the journals as the target for education. In the rare case in which the father is given recognition in terms of his influence on the child or of his relationship with the mother, it is usually in the labelled role of drunkard, deserter or unmarried father. Because of the prevalent view of problem-solving as a cause and effect, direct linear relationship, a blaming-advocacy stance was natural on the part of the workers. A difficult child was the fault of inadequate parents; a wife in trouble had an inadequate husband. While some social workers may still be subject to this type of bias, the family therapist circular causal approach has some influence on the worker becoming

²⁸ Frank Brūnō, "The Meaning of the Conference," The Family, Vol. VIII, (December 1927), p. 266.

²⁹ Jessie Taft, "The Relation of Psychiatry to Social Work," The Family, Vol. VII, (November 1926), p. 203.

³⁰ Helen W. Hanchette, "Home Economics as a Working Force in Family Case Work," The Family, Vol. II, No. 5, (July 1921), pp. 111-116.

the advocate of the whole family as well as having a preventitive effect on fault-labelling.

Despite the entrenchment of the simplistic moralist view, attacks on this position were present. Dr. Burgess represents the "unique elite group" in the following excerpt of a statement he made in the section on Sociology and Social Work of the American Sociological Society in Washington, December 27-30, 1927:

"... for a real understanding of the client the social worker must view him not as an 'individual' because the term 'individual' is limited in its meaning to devote the biological organism, but as a 'person' because this term may be defined as the individual with status, i.e., with a conception of his role in group relationship." 31

Other writers developed this concept to examine how family roles had to be redistributed, either by the removal of a member or by the re-absorption of a member into family life. Initial attempts at categorization and typology were being made but these were limited to functional effects on families rather than effects on interactional patterns.

In the decade of the '30's, there occurred a world-wide depression, the extent and severity of which had never before been experienced. All fields of human concern were shaken to the core but social work with its long history of engagement in the delivery of financial assistance to the needy became the prime target for professional upheaval.

The immediate effect was to overwhelm the agencies with applications for assistance. Under-staffed, under-resourced, and required to make quick decisions regarding eligibility, workers tended

31 M.J. Karpf, "Sociologists and Social Workers Meet," The Family (April 1928), Vol. IX, No. 2, pp. 39-40.

to take the easy route and returned to the worthy-unworthy approach - this time, however, on the basis of "scientific" criteria. A summary of a book by Grace Marcus entitled "Some Aspects of Relief in Family Case Work"³² showed two problems uppermost in the minds of social workers: relief and the application of psychiatric principles to family case work. Theodora Wilson, a practicing worker of the time, quoted a cynic at a conference: "The social workers have gone psychiatric while the world has gone economic."³³ Wilson expressed the view that family workers were then concerned with refining the techniques of their jobs and incorporating theories from psychiatry and as well, there was no direct opportunity for professional involvement in the larger social issues of the day. Many individual social workers were, however, unsatisfied with the lack of opportunity for direct involvement and left their offices in the agencies to contribute their knowledge and skills to the burgeoning emergency relief centres.

A review of a book by Jessie Taft, "The Dynamics of Therapy in a Controlled Relationship,"³⁴ stated that case workers were torn between their interest in the individual and their interest in his social environment. The setting of the thirties was most difficult for the social worker since all efforts in either direction seemed futile and it was inevitable that tensions be generated between protagonists of

³² Dorothy G. Burpee, "Further Aspects of Relief," The Family, Vol. XI, No. 2, (April 1930), pp. 58-61.

³³ Theodora L. Wilson, "Social Work from the Perspective of Fifty Years: A Personal History," Smith College Studies of Social Work, Vol. XLII, No. 2, (February 1972), p. 109.

³⁴ Unknown, The Family, Vol. XIV, No. 6, (October 1933), p. 222.

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the different camps. A reviewer of "Justice First" by John A. Iapp
vented his spleen about the emphasis placed by the mental hygiene
movement on the individual as the cause of poverty by advising the
movement that it was in danger of being completely discredited.

Following upon the federal government's innovations in the early
years of the "New Deal," the family agencies realized that they were
faced with a crisis of identity of function. More and more, their
main role of money distribution was being made redundant with the
mushrooming of public agencies. This crisis was reflected in articles
appearing in The Family, which from the mid-thirties on, displayed
concern about the relationship between public and private agencies.
This was not a new concern but the depression changed the debate from
a leisurely philosophical tone to an immediate pressing demand for
resolution.

Most of the articles assumed that the removal of the relief-
giving function of family agencies was a permanent factor: "The life
36
of the future will take economic sufficiency for granted" - and
welcomed the opportunity to work with families whose main problems

35 Unknown, The Family, Vol. XI, No. 1, (March 1930), p. 30.

36 F.N. Stapleford, "Some Challenges to Private Family Social
Work," The Family, Vol. XVI, No. 9, (November 1935), p. 201.

37
 were not economic. A great desire existed to test out the new psychological and analytic theories related to inner dynamics - although some articles questioned the level of social workers' skills to deal with family problems not related to economic need. There was a realization of not only a need for re-education and re-definition of skills on the part of workers and agencies but also a need to interpret the new services and their significance to the community. 38
 One article went so far as to discuss clients' involvement in committees to design programs for the family agency. 39

Many family agencies took the plunge at this time and introduced new service programs to replace the material services previously given. A survey conducted by the Family Welfare Association of America in December, 1934, showed a great variety: "... an investigation service for the juvenile court on mother's pension cases, a speech correction clinic, a workshop in which clients make furniture for their own use and for sale, cooking classes, client groups for

37 It is from this point that we can date the continuing conflict within social work as to the merits of broadening the profession's interest in families to all economic strata. On the one hand, there are those who condemn the family worker for turning away from the poor. See Richard A. Cloward and Irwin Epstein, "Private Social Welfare's Disengagement From the Poor: The Case of Family Adjustment Agencies," Social Welfare Institutions, edited by Meyer N. Zald (New York: John Wiley and Sons, Inc., 1965), pp. 623-643. And, on the other, we are told that what poor families need to cure their poverty is money, which can be distributed by anyone and is the responsibility of the state, and they do not need social work services. See Joel Handler, Reforming the Poor (New York: Basic Books, 1972).

38 Cora Kasius, "Some Questions of Family Agency Program in Relation to Interpretation," The Family, Vol. XVII, No. 3, (May 1936), pp. 67-71.

39 Helen Prescott Churchward, "An Experiment in Client Participation," The Family, Vol. XVII, No. 2, (April 1936), pp. 43-48.

the discussion of parent-child relationships, and the sponsorship of community projects such as a community house and a day nursery.⁴⁰ The family agency was now looking within its community to assess needs and attempting to fill these needs.

One of the new services was family consultation and family and marriage counselling. In an article, "Who Is To Do The Job," by Leah Feder, the author speaks of these programs in relation to family agency involvement in three areas of casework practice: pure economic or opportunity case work with no complications; case work situations where complications arise; and therapy which she defines as the approach which deals less with reality situations and more with inner problems.⁴¹ She felt that psychoanalytic as well as other knowledge was needed for the latter two areas but, further, that therapy was not really within the purview of the family case worker.⁴²

Feder's emphasis on the individual and his "inner problems" in family work, although by the end of the 1930's the predominant view, did not go unchallenged. The opposing insistence on treating the whole family with its interactive systems, though representative of a small minority opinion, had the advantage of being linked semantically with the field itself. How could "family" agencies, in promoting their services and justifying their existence, be anything but proponents -

⁴⁰ Florence Waite, "New Emphasis in Family Social Work," The Family, Vol. XVII, No. 5, (July 1936), pp. 156-163.

⁴¹ It is, perhaps, the view of "reality" which separates those earlier case workers from modern family therapists. We would feel today that every problem is a reality problem and should be dealt with as such and not by uncovering the unconscious inner problems.

⁴² Leah Feder, "Who Is To Do The Job? Discussion of Personnel-Training and Equipment," The Family, Vol. XVII, No. 5, (July 1936), pp. 163-169.

conscious, or, more likely, unconscious - of this latter view? How could their promotive acts of justification avoid damaging the fragmented "individual's inner problems" view? The 1935 annual meeting of the Association of Family Agencies, for instance, "... emphasized the paramount interest and function of family social work to the understanding of the family and the development and application of skills in strengthening family life."⁴³ Even more illustrative of this point,⁴⁴ in view of the almost universal acceptance of the medical model of the individual in family social work, is this statement by Stanley P. Davies, President of the Association:

"We did not become family societies and family social workers out of a process of reasoning about the importance of the family; nor did we put emphasis upon the family just because as an aggregation of human beings in one household it presents a convenient unit for working purposes. It was rather that, as people revealed to us the problems really on their minds and hearts, these problems almost invariably led right back to the family and to family relationships. The individual we were trying to help took us there."⁴⁵

The thirties closed, and the forties began with new challenges to the family agencies caused by the onset of World War II. Families were being dismembered by individuals' involvement in the war which resulted in absent fathers and pressures and stresses on the family. As well, the world's total efforts in the war created conditions of

⁴³ Rich, A Belief, Footnote 10, p. 130.

⁴⁴ It must again be emphasized that there probably existed a gap between contemporary theoretician's views, in which this universal acceptance is evident, and actual practice on the firing line in the agencies' offices.

⁴⁵ Stanley P. Davies, "Our Unchanging Goal: The Family," Family Welfare Association of America, New York, 1938, p. 13 as quoted in Rich, A Belief, Footnote 10, p. 137. My emphasis.

turmoil and unrest which affected all other institutions. Once again the family agencies, despite shortages of trained personnel, responded to the new demands. They adapted to this new crisis by applying their known knowledge and techniques to new problems. This was not the climate, therefore, which could stimulate changes in methodology or technique and the individual in the family remained the unit of treatment. Together with the increase in prominence accorded to psychiatry as a profession during the war came a greater usage by family agencies of psychiatrists as consultants.⁴⁶ Their input resulted of course in a further diminution of the concept of the family as the locus of treatment.

In fact during this crisis the family was in some danger of being entirely lost as a concept within the profession as social work was again looking to a broad generic approach. The name of the journal, The Family, was changed in June 1946, to the "Journal of Social Casework" to reflect this approach. The articles contain more and more psychiatric terms such as transference and resistance, and there is an attempt to define therapy done by social workers as supportive as opposed to insight achievement. Marital therapy usually consisted of helping the wife to understand the problem and work out her best solution.⁴⁷ Some authors urged seeing the marital partner but he was interviewed separately and usually by a different worker.⁴⁸ Both clients were treated as having

⁴⁶ Most of the articles in Social Casework in June 1949, Vol. 30 look at the relationship of Psychotherapy and Casework.

⁴⁷ Elsie M. Waelder, "Casework with Marital Problems," Journal of Social Casework, Vol. 28, (May 1947), pp. 168-174.

⁴⁸ Katherine McElroy, "Marriage Counselling," Journal of Social Casework, Vol. 28, (June 1947), pp. 211-217.

problems; the relationship between the two was not described and therefore not recognized as treatable.

The fifties have been considered as the period when the family became the unit, if not of treatment, at least of diagnosis. Later journal articles credit the beginning of this to a 1953 article by Francis Scherz in the Social Casework entitled "What is Family-Centred Casework?" Other articles in this same journal, which originated in addresses given at the National Conference of Social Work in June 1953, reflect the growing interest in a new capability of strengthening family life, a goal which, as stated earlier, was present from the beginning of the C.O.S. Francis Scherz stated,

"We must also understand interrelationships, the role each individual plays in the family, how his behavior affects other family members, and in turn, how it is influenced by them ... We must also know the current social and psychological situation of the family unit and of the individual family members ... Our newer insights into the dynamics of family life are helping us to consider in a more active and co-ordinated fashion the inter-relatedness of social, cultural, physical, and psychological factors ..." 49

This marks the beginning of the contemporary era of working with total families.

This orientation influenced practitioners of other professions as well in many diverse areas: Pollak, a sociologist on the East Coast; Bell, a psychologist in New England; Bowlby, a psychiatrist in England; Jackson, a psychiatrist in California; and Gomberg, a social worker in collaboration with Ackerman, a psychiatrist in New York, to name only

⁴⁹ Francis Scherz, "What is Family-Centred Casework?" Social Casework, Vol. XXXIV, No. 8, (1953), p. 344.

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a few. Although attempts have been made to explain this convergence of knowledge,⁵¹ I feel that, as with the emergence of any synthesis, the process was indeterminate. Whatever the explanation might be, the influences of the convergence were felt in family social work and incorporated as new approaches to an old goal: enhancing family functioning. Because of the topical nature of the literature of the last two decades, their review in terms of history is more appropriately left for future researchers, who will in retrospect be able to recognize and identify their relevance.

⁵⁰ For examples of these works see: Otto Pollak, "A Family Diagnosis Model," The Social Service Review, Vol. XXXIV, No. 1, (March 1960), pp. 19-31; John Bowlby, "The Study and Reductions of Group Tensions in the Family," in Gerald D. Erickson and Terence P. Hogan (eds.), Family Therapy: An Introduction to Theory and Technique (Monterey, Cal.: Brooks/Cole Publishing, 1972), pp. 16-23; Bell describes his first involvement with Whole Families in John E. Bell, "Family Group Therapy - A New Treatment Method for Children," in Family Therapy: An Introduction to Theory and Technique, ed. by Gerald Erickson and Terence Hogan (Monterey, Cal.: Brooks/Cole Publishing, 1972), pp. 24-53; Don D. Jackson, "The Question of Family Homeostasis," Psychiatric Quarterly Supplement, Vol. XXXI, No. 1, (1957), pp. 79-90; M. Robert Gomberg, "Family Diagnosis: Trends in Theory and Practice," Social Casework, Vol. XXXIX, Nos. 2-3, (February-March 1958), also in Social Work With Families, ed. by Eileen Younghusband (London: George Allen and Unwin Ltd., 1965), pp. 150-167; Nathan W. Ackerman, The Psychodynamics of Family Life (New York: Basic Books, 1958).

⁵¹ See for example Don D. Jackson and Virginia Satir, "A Review of Psychiatric Developments in Family Diagnosis and Family Therapy," in Exploring the Base for Family Therapy, ed. by Nathan W. Ackerman, M.D. and others (New York: Family Service Association of America, 1961), pp. 29-51; and John P. Spiegel and Norman W. Bell, "The Family of the Psychiatric Patient," in American Handbook of Psychiatry, ed. by Silvano Arieti (New York: Basic Books, Inc., 1959), pp. 114-149.

HISTORICAL SUMMARY AND CONCLUSIONS REGARDING MY ORIGINAL PRACTICUM GOALS

A summary of family social work can now be attempted. Beginning in the 1870's with its goal of organizing charity, family social work soon recognized society's influence over the need for charity, then individualized and particularized the families affected by external circumstances. It proceeded to look inward to relationships within families and by the late thirties, recognizing that the family existed universally and not just in economically deprived circumstances, began to reach out and extend its services to all classes. At the same time, theories used to underpin the delivery of services changed from being largely moralistic to sociologic and then to an amalgam of sociologic and psychoanalytic.

It was in the 1950's with the convergence of knowledge from all the social sciences that social work began to view the family as a system. The cycle appears to be completed - family social work has returned to serving total families, an approach used by the C.O.S.s a century ago. But, as with any cycle, there have been many factors and influences which have served to change the original balance. These forces are multicausal, not the least of which are the explosion of knowledge, not only in sociology and psychiatry, but in all the many areas which enhance social work knowledge and skill.

However, the goal of serving families and the fact that social work has for a century worked towards it is evidence of the value of the profession's contribution to the current acceptance of the family as a system. To face the issue honestly, however, this preceding

statement cannot be taken to state categorically that social work alone can make a unique contribution to the field of family therapy. It is possible, for instance, that the coming together of streams of knowledge from various disciplines may signal the end of separate contributions and the emergence of an entirely new discipline.⁵²

At this point, therefore, I feel that I can examine goals two and three of my practicum which I addressed in my Introduction. Yes, I do believe that family therapy is a natural outgrowth of family casework. I believe this primarily because of the single-minded commitment of social work to the family despite the equivocal route it often took over the past century. I cannot give a categorical answer to the question of whether it is now an anomaly because of

"... the discontinuities between the knowledge base and practice ..."⁵³

There is evidence in the school here of the recognition of knowledge gaps in many social science areas, largely because the knowledge explosion has created the situation whereby no single discipline can encompass all its relevant information. Further, what will be important in the involvement and improvement of family therapy, a practical discipline, is an awareness of what concepts can meaningfully be related to interventive techniques. It is a moot point therefore, as to whether the attempt by the social work profession to appropriate

⁵² The suggestion of an amalgamation of psychiatrists, psychoanalysts, psychologists and psychiatric social workers is expressed in William E. Henry, John H. Sims, Silee Spray, The Fifth Profession, Becoming a Psychotherapist (San Francisco: Jossey-Bass Inc., 1971).

⁵³ Gerald Erickson, "Teaching Family Therapy," Footnote 2, p. 9.

areas of knowledge from other disciplines is a better structural solution than the recognition of an entirely new discipline devoted to family therapy.

More important than the question of structure at this point is that of where the thrust of future development of family therapy will be and where the profession of social work can now best make a contribution.

The goal of enhancement of family functioning is the single most important factor which has not wavered within family social work. However, attempts to achieve this goal appeared to have, at various times, emphasized one part of this system at the expense of others. I suggest that it is the total system of the family within its social sphere which will be the arena for practice and theory development. While much of the current family therapy literature is directed to defining the family's internal relationships, some writers are beginning to look at the family as an open system and its many interfaces with other open systems. It is this concept which I would like to look at now. I will be suggesting an ecological, network practice model and illustrate this with some case examples from my practicum.

SOME SUPPORTING THEORIES FOR A FAMILY NETWORK PRACTICE MODEL

While as I stated above, the factors which enabled the family rather than the individual to become the unit of attention in the helping professions are multi-causal, the concept of systems theory provided the framework for its growth and development. The seemingly

simple concept of a system as "... a complex of elements or components directly or indirectly related in a causal network, such that each component is related to some other in a more or less stable way within any particular period of time,"⁵⁴ enabled the approach to take root. This theories relationship to social work in general can be found⁵⁵ elsewhere.

Mary Richmond's systemic view of the family within the social system as well as some updated criticism of her concepts have been discussed earlier (see p. 7). Other articles dealing with her work in the light of current theory and knowledge marvel at her fore-⁵⁶knowledge and prescience. It is as though we can truly be aware of the contribution she made to family social work only because of the state of today's knowledge. Her framework is still a valid one which we are now beginning to fill in as we involve ourselves in working with total families. The last twenty years have seen the burgeoning development of knowledge of the internal system of the family. Most of this wisdom, however, has been developed as though the family were

⁵⁴Walter Buckley, Sociology and Systems Theory (Englewood Cliffs, N.J.: Prentice Hall, 1967), p. 41 as quoted in Howard Goldstein, Social Work Practice: A Unitary Approach, 1st edition (Columbia: University of South Carolina Press, 1973).

⁵⁵ See for example Irma L. Stein, "The Systems Model and Social Systems Theory: Their Application to Casework," in Social Casework: Theories in Action, ed. by Herbert F. Streeb (Metuchen, N.J.: The Scarecrow Press, Inc., 1971), pp. 123-195. This article contains a comprehensive bibliography on systems theory generally and as it related to social work.

⁵⁶ See Muriel W. Pumphrey, "Lasting and Outmoded Concepts in the Caseworker's Heritage;" Carol H. Meyer, "Purposes and Boundaries - Casework Fifty Years Later;" John Goldmeier, "The Legacy of Mary Richmond in Education and Practice;" Sheldon Rotter, "Mary Richmond and Family Social Work Today;" all in Social Casework, Vol. 54, No. 5, (May 1973). They marked the 50th anniversary of Mary Richmond's book: What is Social Casework?

a closed system and not as it is, in fact, an open system, "where it is a part of the social system, the family is influenced by the other parts and, in turn, also influences them."⁵⁷ Nimkoff in his comparative studies of the family in many cultures found that in relatively rare situations is the family the total society. Thus, the boundaries between the family and its external organizations become blurred. It is this relationship of the family with its supra-system that is becoming a new area for increased study and practice. As stated earlier, Zilpha Smith early on was aware of the need for social work's involvement in working with individual families as well as to press for social legislative action which would affect all families. While necessary in its time, this approach appeared to be responsible for creating a schizophrenic division in the profession. Some are now beginning to question this schism in social work.

"Such a dichotomous view, although including the poles of the continuum, tends to create two different professions and to exclude the middle range of practice which is focused on the interface between the client systems and social institutions, a range which includes, among others, developmental, social broker, mediation and case advocacy roles - a range which many would define as the heart of social work practice." ⁵⁸

A network model of family practice seeks to bridge the dichotomy between these two methods and relate the family to its social institutions.

Minuchin, a psychiatrist, who has been in the forefront of a particular structured approach of working with families, has, because

⁵⁷ M.F. Nimkoff, Comparative Family Systems (Boston: Houghton Mifflin Co., 1965), p. 33.

⁵⁸ Ann Hartman, "The Generic Stance and the Family Agency," Social Casework, Vol. 55, No. 4, (April 1974), p. 207.

⁵⁹ Salvador Minuchin, Families and Family Therapy (Cambridge, Mass.: Harvard University Press, 1974).

of his involvement with poor families, recognized the importance of the family in relationship to its other systems. "... Whatever our point of focus as investigators may be, we need to understand how our level of intervention relates to other levels. How and in what situations should we direct our interventions at the level of the individual, the family, or society? Would intervention at one level affect the others? Are some points of entry more effective than others?"⁶⁰

Later he states that, in his view, families with disengaged internal patterns (families where its members are isolated and non-participant) are unable to take advantage of large-scale social programs without use of homemaking service, innovative use of schools,⁶¹ and other community support services.⁶² In another paper, I emphasized the necessity for both a broad public level of social policy relating to the needs of individuals, and a local service network which responds to families in whatever form they occur. In this paper, I am dealing with a model of practice within that local network. Before proceeding with its illustration, I would like to look briefly at some of the theories which have been developed in many diverse fields which speak about the interrelationships of the family and society (I was faced with an over-abundance of material and have chosen simply to indicate some examples from the literature).

⁶⁰ Salvador Minuchin, Families of the Slums: An Exploration of Their Structure and Treatment (New York: Basic Books Inc., 1967), p. 372.

⁶¹ Ibid., p. 376.

⁶² Ruth Rachlis, "Public Family Policy: Some Significant Issues," unpublished. This paper contains a bibliography on literature related to Family Policy.

Philosophically, some writers warn us that the Western world's reverence for the rights of the individual will ultimately lead to an atomistic and alienated man,⁶³ and the destruction of not only families⁶⁴ but our Western civilization. Others question our sanctification of the isolated nuclear family.⁶⁵ Theoretically, Parsons maintains that the nuclear family is the most functional structure for our current mobile society,⁶⁶ while Litwack, opposing this concept of nuclear family self-sufficiency, states that its traditional functions are being shared not only with its extended family but with many formal organizations: schools,⁶⁷ churches, work, etc. Bell and Vogel see the nuclear family in all respects as an intermediary between the members within it and the society surrounding it.⁶⁸ Jordan, a social worker, defines a continuum of families under stress from those which he terms at one extreme "centrifugal" (those that look outward to the community not only during stress but

⁶³ Richard N. Goodwin, "The American Social Process," The New Yorker, Part I, (January 21, 1974); Part II, (January 28, 1974); Part III, (February 4, 1974); also in book form, The American Condition (Garden City, N.Y.: Doubleday, 1974).

⁶⁴ For a summary of Carl Zimmerman's work, Family and Civilization, which deals with this subject, see Gerald Leslie, Footnote 3, pp. 223-230.

⁶⁵ Albert Scheflen and Andrew Ferber, "Critique of a Sacred Cow," in The Book of Family Therapy, ed. by Andrew Ferber, Marilyn Mendelsohn and Augustus Napier (N.P. Science House, 1972), pp. 666-683.

⁶⁶ Talcott Parsons and Robert Bales, Family, Socialization and Interaction Process (New York: Free Press of Glencoe, Inc., 1955).

⁶⁷ Eugene Litwack, "Extended Kin Relations in an Industrial Democratic Society," in Social Structure and the Family: Generational Relations, ed. by Ethel Shanas and Gordon F. Streib (Englewood Cliffs, N.J.: Prentice Hall, Inc., 1965), pp. 290-323.

⁶⁸ Norman W. Bell and Ezra F. Vogel, "Toward a Framework for Functional Analysis of Family Behavior," in A Modern Introduction to the Family, ed. by Norman W. Bell and Ezra F. Vogel (New York: The Free Press, 1968), revised edition, pp. 1-34.

for fulfillment of many of their needs and often contain a delinquent member) to those which he terms "integrative" families (those which draw closer during times of stress and try to create like-thinking and often contain a schizophrenic member).⁶⁹ (For a similar view of the latter type, see Lyman C. Wynne, et al., "Pseudo-Mutuality in the Family Relations of Schizophrenics."⁷⁰)

When, therefore, as a helping profession we view the family as a system with its sub-systems and supra-systems, we must be aware not only of the difficulties within the system, but of the tensions that exist in its relationship to the external systems. Social workers, as family therapists, are involved more often than other helping professionals with families who are more dependent on outside organizations. Because of its internal structure, this type of family is usually unable to negotiate freely with the community. As society becomes more organized and formalized, I would forecast an increasing role for the social worker as bureaucratic mediator.⁷¹ Social workers will need to, firstly, assess the locus of the system where the interaction is faulty, and, secondly, determine what interventions are necessary to unblock the interchange. These interventions could vary from facilitating communication between various parts involved to encouraging change in the structure and function of any of the segments in the interaction.

⁶⁹ William Jordan, The Social Worker in Family Situations (London: Routledge and Kegan Paul, 1972), p. 32.

⁷⁰ Lyman C. Wynne, et al., "Pseudo-Mutuality in the Family Relations of Schizophrenics," in A Modern Introduction to the Family, ed. by Bell and Vogel, Footnote 68, pp. 628-649.

⁷¹ For an expanded view of the family in an ever-increasing bureaucratic society see Otto Pollak, "The Outlook for the American Family," in Journal of Marriage and Family, Vol. 29, (February 1967), pp. 193-205.

ILLUSTRATIONS OF THE ECOLOGICAL PRACTICE MODEL

Illustrative of the usage of the ecological model are several cases I encountered at the Psychological Service Centre of the University of Manitoba (denoted hereafter as P.S.C.) in the course of my practicum.

The main source of the P.S.C.'s caseload is referrals, and most referrals are made by psychiatrists and other physicians. The caseload is therefore similar to that of a medical clinic, mental health clinic or family service agency in that the client (which may be one or more members of the family) has a problem which can be considered as being internal to the family system. In contrast, other community agencies (e.g., Child Guidance Clinics, Children's Aid Societies, financial agencies, the courts) encounter clients exhibiting difficulties in functioning which relate to systems external to the family. The importance of an ecological and family approach in these agencies where some dysfunctioning with outside systems is exhibited is here posited. The point I wish to make with my illustrations is that, even in families which present themselves as having internal problems, an awareness and utilization of their relationship to other societal influences is a requirement in order to produce desired changes.

The first case demonstrates the necessity of understanding the family in relation to its philosophical and religious values, how these affected their internal relationship - particularly the marital pair - and demonstrates the need for inclusion of the church in the therapy to help the family make a step forward in their development.

Mr. and Mrs. A. were a couple in their early 40's who were referred to the P.S.C. for counselling regarding a sexual problem which the wife claimed as hers. The previous year, they had received brief family counselling for themselves and two daughters from a social worker at the Child Guidance Clinic because of the youngest girl's severe depression. A marital problem had been identified in that contact. The couple are members of a fundamentalist religious group and while the husband expressed a caring attitude to the wife, his passive nature, as well as his philosophy that adequate prayer was all that was important to promote change, prevented him from becoming engaged in the therapeutic process even though he was present at the sessions. Intervention was focused on identifying the sexual problem in terms of the relationship and then looking at the difficulties in the relationship. It was possible even with Mr. A.'s resistance to help Mrs. A. become more autonomous within the relationship and to have her look at her goals for herself as a person, express some anger at her husband because he fell short of her ideal,⁷² and come to terms with her decision on religious grounds to nevertheless stay in the marriage. She began to show some acceptance of her husband as a total person with his positive and negative characteristics.

While Mr. A., throughout this process, made some attempt at being more open and communicative, they both continued to express concern that in some way they were demonstrating that they were less than adequate

⁷² Warkentin and Whitaker see this as a common feature in most marriage counselling situations. See John Warkentin and Carl Whitaker, "Serial Impasse in Marriage," in Family Structure, Dynamics and Therapy, ed. by Irven M. Cohen (Washington, D.C.: Psychiatric Research Report #20, The American Psychiatric Association, 1966).

Christians because of the presence of these difficulties. I urged them to consult their pastor, an act which they were reluctant to do because of guilt and shame. With my support, however, they did so. The pastor conferred with me on my interventive methods, interviewed them and built in his support and reassurance that the marital therapy was indeed in harmony with their Christian values. The relief and feeling of increased self-esteem this gave them enabled them to continue to work on their relationship without further help. Thus, the appreciation and inclusion of the religious factor and the facilitation of communication between the family and the church was a necessary basis for the success of brief therapy (approximately six sessions) to be undertaken.⁷³

The B. family, Mr. and Mrs. B. and two children, 7 and 2, exemplifies a family approach which recognized the necessity of intervention in many sub-systems: the marital pair; the parent-child; the 7 year-old child (Tommy) as well as the supra-systems of the child's relationship to the school and all the sub-systems thereto. These interventions included increasing communications and expediting change in the various components.

Mr. and Mrs. B. had been separated during their marriage for about a year and came to counselling when they had been re-united for a year because of their difficulty in coping with their 7 year-old child whom they had labelled hyperactive. After three sessions of the use of behavior modification approach with the parents, re-enforcing positive behavior, it became clear that the parents were in conflict as to what

⁷³ Ruth Rachlis, "Short-Term Crisis Family Therapy," unpublished. Contains a bibliography on crisis theory and brief therapy as it relates to families.

each of them saw as positive behavior since their own marital difficulties blocked this clarification. Mr. B. resisted any efforts at marital counselling (he had had some previous negative experience) and wished to be involved only at the parental level. After a recess of a few months and a referral to a Parent Effectiveness Course given at a community agency (using other community resources as input to the family), the school became concerned about Tommy's classroom and school behavior and asked us to complete a psychological assessment. Subsequently, a conference including the family, the school principal and Tommy's two teachers, as well as the psychologist and myself, was held at the school to share information and to establish future goals. The couple still resisted any need for working on their relationship and were looking to the school to introduce changes. The school co-operated and, in about two months, re-convened a second conference which included the original participants plus a psychologist and social worker from the Child Guidance Clinic as the school personnel felt they could not continue to provide the boy's educational needs without some internal changes within the family. Confronted with all the information and choices, Mr. and Mrs. B. agreed to engage themselves in their marital problem.

Concurrent to this development, a Halstead Reitan Neuropsychological Battery test was administered to Tommy because of a large scatter score on prior psychological tests. The results of the Halstead indicated some minimal brain dysfunctioning. Tommy's pediatrician, on being advised, prescribed the necessary medication. The information generated by all the tests also confirmed the boy's need for consistent parenting, an impossibility within the existing marital relationship. At the present time, the psychologist and myself are involved in marital

counselling with the couple and they are engaged in that process. Their patterns of interaction are extremely entrenched but a beginning has been made and the focus is now on themselves and not on their son. The school is continuing a positive reinforcement approach and the social worker and psychologist from the Child Guidance Clinic are involved with Tommy and some of his school peers in a group relationship. The process is time consuming and expensive but it may well be worthwhile if the development of a delinquent or emotionally disturbed individual can be developed. }

It would appear certain that only shared input by the various organizations impinging on this family can produce a positive result.

The C. case illustrates a combined community, agency and family therapy situation. The techniques used (an adaptation of Auerswald) are discussed in "Combined Family and Service Network Intervention."⁷⁴ The authors recommend them as a useful practice method with lower socio-economic families. The C. family is economically independent so that the public financial agencies are not part of their interface. Despite this, a similar practice method was used with good results.

The C. family, Mr. and Mrs. C. and three children, a boy of 14, a girl of 12 and a boy of 9, were referred to the P.S.C. because of the eldest boy's involvement, six months earlier, in delinquent aggressive behavior at school. This occurred in an upper-middle class area. An influential citizens group became involved because of their concern about safety in the community and succeeded in scapegoating the boy

⁷⁴ Gerald Erickson, Ruth Rachlis and Margaret Tobin, "Combined Family and Service Network Intervention," The Social Worker, Vol. 41, No. 4, (Winter 1973), pp. 276-283.

and having him expelled from school. At the time of referral the 14 year old, Dick, and his family had been involved in the bureaucratic web of the court, the school, and the elected school board, and were subjected as well to other community pressures. Dick had been assessed by both school and court psychologists and psychiatrists but no resolution of his problem resulted. The family was discouraged and confused about the requirements to be met for them to achieve their primary goal of re-enrolling Dick in school.

An inter-systems conference was called involving two probation officers from the court, two representatives from the school division, a social worker from the Child Guidance Clinic, four representatives from the community committee, two co-therapists from the P.S.C., and the child with his parents. The first agenda item was the recognition by all of mutually-held values of opposition to violent behavior. This was then separated from the necessity of an appropriate solution being found to deal with the boy. A commitment was received from the community group to terminate any action in retaliation for the deviant act which would be deemed likely to result in his further alienation. This, I must emphasize, was necessary before any further constructive action could be undertaken or tasks assigned. The agencies involved could now proceed with the tasks necessary to accomplish the primary objective - i.e., Dick's re-enrollment in school - without fear of community opposition. It should be noted that prior to this meeting the school division stated that they could not re-instate the boy until the Child Guidance Clinic had completed a school assessment and the clinic stated they could not do the assessment until the expulsion was lifted. This impasse was recognized at the conference and the

school division's representatives agreed to raise the matter of re-instatement at the next board's meeting while the clinic's representatives agreed to assess Dick's school needs without formal re-instatement. Before the next network meeting, four weeks later, all original tasks were achieved: Dick was re-instated in school and a new group of tasks involving a smaller group was drawn up. (See flow chart, Figure 2 on following page, showing input and output for a network approach.)

One of the side-effects of focusing seven sessions on one child in the family and his difficulties with a community problem is the risk of his being scapegoated and labelled "the problem" in the family. This is a real difficulty since the first task in any family therapy situation is a re-labelling and re-focussing of a member problem to a family system problem. What was accomplished here was a re-labelling of the problem as a community problem. However, with the resolution of one problem within the system, difficulties were identified within the nuclear family system in terms of communication, parental alignments, parent-child problems. At the time of writing, the current goal of our family therapy is family system restructuring. ⁷⁵ An attempt was made to involve Dick's peer group; however, this was not successful.

It will be noted that the practice technique of involving several institutional systems is sufficiently developed to assure that community agencies attend to the needs of a particular family. The changes that occur in the agency systems are in terms of adaptability and flexibility of service and in this case community support to do so. Perhaps, as

⁷⁵ Salvador Minuchin, Families and Family Therapy, Footnote 59.

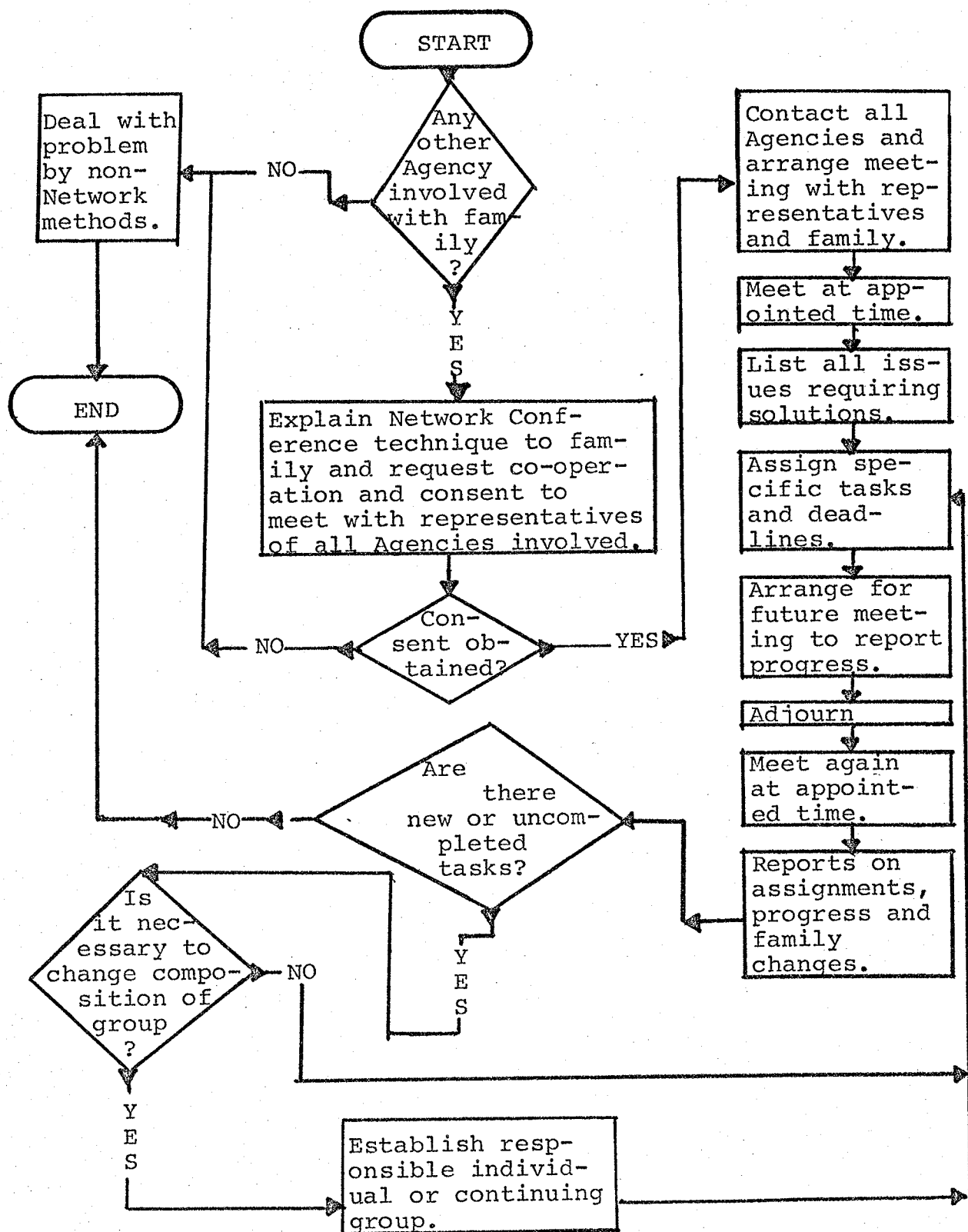


FIGURE 2

FLOW CHART OF ACTION TO BE TAKEN
WITHIN A FAMILY NETWORK SERVICE

practice further evolves, methodology can be worked out to develop instruments of change with respect to more basic policies of the agencies where this seems necessary. At the least however, this method can assure a humanistic approach and diminution of mechanistic contact⁷⁶ which is so often a current by-product of our technical society. As we become more familiar with working in larger systems, we will gain a better understanding of the total family within its larger context and the appropriate levels of intervention.

The final case illustration is that of bringing together a new system for the purpose of developing mutual aid. This case consists of a four couple multiple marital group which was led by the writer and a clinical psychology student, as co-therapists. The marital sub-systems within the four families were defined as being in internal conflict. The goal in this case was to return each of the sub-systems to its own family system after accomplishing some strengthening changes. The four independent couples were brought together in order that each might contribute to effecting change in the others. This approach is a development and integration of some elements of group work with⁷⁷ ⁷⁸ Lacquer's Multiple Family Therapy. Bach has used this technique to help couples acquire specific communication skills in fighting. Leichter

⁷⁶ H. Peter Lacquer, M.D., "General Systems Theory and Multiple Family Therapy," in General Systems Theory and Psychiatry, ed. by W. Gray, No. 1, p. 410.

⁷⁷ Ibid.

⁷⁸ George Bach and P. Wyden, The Intimate Enemy: How to Fight Fair in Love and Marriage (New York: Morrow Publishers, 1969).

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has also written on this subject. Langsley (lecture communication) and others are working with marital couples on a long-term basis. Our particular group underwent sixteen weekly sessions. Our subjective results indicate that change takes place in a relationship when couples begin to open up and trust themselves in a group. Both marital partners receive and give support and confrontation, have input and receive feedback from other group members and, in this process, change not only their individual behavior but their marital relationships.

We found along with Leichter that the nature of a married couple's group is "... quite different from therapy groups in which the participants are not related outside the group ...," since the therapists must constantly be aware and relate the change that takes place in one of the partners, to its effect on the other partner, as well as the marriage relationship. With our couples, these changes occurred much more rapidly through the mutuality of the group process than they did through conjoint couple therapy.

It will be noted that the previous case illustrations included involvement in the therapy situation, not only the client system but its network in terms of other institutions: church, school, and the court; other professionals: ministers, social workers, probation officers, psychologists, doctors, teachers and other school personnel;

⁷⁹ Elsa Leichter, "Treatment of Married Couples Groups," Family Co-ordinator, Vol. 22, No. 1, (January 1973), pp. 31-41.

⁸⁰ University of Manitoba Medical College, March 1974. Langsley was one of the participants in an experiment to keep a member out of hospital using a family therapy as the intervention. See Donald G. Langsley and David M. Kaplan, The Treatment of Families in Crisis (New York: Grune and Stratton, 1968).

⁸¹ Leichter, "Treatment of Married Couples Groups," Footnote 79, p. 31.

as well as a citizen group, a school board, and other client systems. It was the application of this comprehensive approach to the families that was responsible for constructive change to occur.

SUMMARY AND CONCLUSION

This report has not dealt with the interventive methods and techniques which were employed in helping families in my practicum who were having difficulties only within their internal relationships. These are in an arena which can almost be called traditional and are well documented in the literature. What I wished to illustrate here is a methodology of practice which is most relevant to social workers in terms both of the volume of cases which they encounter and of the scarcity of documentation of this methodology. The methods take into consideration societal and community influences on a particular family and, as well, integrate them within the therapy situation. As I stated earlier, family social work throughout its professional development has taken a broad view of forces impinging on a family. We are moving from simply recognizing these inner and outer influences as forces in interaction to choosing strategically and knowledgeably those points in the interaction at which intervention will bring about optimum change. As we do more work in this area, theories will develop which will further improve practice.

Which skills are required then for social workers involved in an ecological family practice approach? This method cuts across the traditional casework, group work and community organization

methodology, as well as negates the dichotomy between social policy and direct service. What appears to be needed is the broad sociological orientation of Zilpha Smith and Mary Richmond along with the knowledge of current social science theories. The worker should have the ability to change at will the focus of his assessment and therapy from a broad societal view in ever narrowing close-ups down to the one individual within a family. Within this broad continuum is included the require-
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 ment for knowledge of families and kinship networks, community networks
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 and service networks, as well as marital therapy, parent-child relationships, and individuals within the family. The skills encompassed in these many areas require expanding those described by Cleghorn and Levin for family therapists in terms of perceptual, conceptual and
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 executive, since competence at one level of these supra or sub-systems

⁸² For an expansion of this concept see Sanford N. Sherman, "Family Therapy as a Unifying Force in Social Work," in Expanding Theory and Practice in Family Therapy, ed. by Nathan Ackerman, Frances L. Beatman and Sanford N. Sherman (New York: Family Service Association of America, 1967), pp. 20-28.

⁸³ Ross V. Speck and Carolyn L. Attneave, Family Networks (New York: Pantheon Books, 1973).

⁸⁴ Edgar Auerswald, "Families, Change and the Ecological Perspective," Family Process, 10, (1971), pp. 263-280; and Edgar Auerswald, "Interdisciplinary vs. Ecological Approach," Family Process, Vol. 7, (1968), pp. 202-215. The author also was at a workshop in June 1970 in Winnipeg in which he was a resource person.

⁸⁵ Erickson, et al., "Combined Family and Service Network Intervention," Footnote 74.

⁸⁶ John M. Cleghorn and Sol Levin, "Training Family Therapists by Setting Learning Objectives," American Journal of Orthopsychiatry, 43 (3), (April 1973), pp. 439-446.

of the family is not necessarily translated as competence at another level. The achievement of this knowledge and skill becomes more difficult because of the necessity for sifting the relevant material out of the massive amount of data presented during the past twenty-five years. This issue has been faced by all educators in the helping professions. I suggest that social workers involved in an ecological family practice can begin this process by acquiring a generic social work training augmented by a specialty in family orientation.

The practice method which I have described would meet the request of Ann Hartman, "The Generic Stance and the Family Agency," when she suggests that family agencies once again assume their historic leadership stance

"... and search for new methods of helping-methods which would translate into practice new knowledge concerning the nature of man in his world The assumption of a generic stance would free both agency and worker in his search." 87

It is my view that setting the family as the primary boundary for service by social workers not only in family agencies, but in any setting in which they might find themselves, would produce improved service to all clients. The family as a starting point allows for seeing its functioning or dysfunctioning "... with respect to the system's relation to the supra-system, to the relation of the system's parts or to the system as a whole. This, then, involves the transactional view
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of system parts - whole and systems in the field." The family as the

⁸⁷ Hartman, "The Generic Stance and the Family Agency," Footnote 58, p. 207.

⁸⁸ Stein, "The Systems Model and Social Systems Theory: Their Application to Casework," Footnote 55, p. 145.

focus of service, no matter what the problem, provides a vantage from which to realistically operate within such broad goals as that of social work's concern:

"... with the human condition as a whole, the total environment, and their relationship. This would include a concern not only with the individual but with all phenomena that sustain or inhibit the survival and development of all men." 89

This report examines the evolution of family social work over the past century, and suggests that family therapy is a natural developmental outgrowth of that profession. Nonetheless, it questions whether social work now has a unique contribution to make to the field of family therapy, or whether this orientation requires a general synthesis of many modes of thought, ranging from physics, through the social sciences, to philosophy.

In any case, this exploration has helped me to more adequately develop my skills as a practitioner in family therapy - my primary goal. I have come to use as my model the ecological, network, family practice method which integrates and incorporates the sociological concepts of Zilpha Smith and Mary Richmond with modern theories.

Because of the burgeoning of technical knowledge over this time period the necessity for combining these concepts with a humanistic approach to interventive techniques has been, and will continue to be, an important task for family social work.

⁸⁹ Statement of Present Objectives for the Bachelor of Social Work Program, School of Social Work, University of Manitoba, 1973.

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