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Constructing the Structurally Competent Classroom

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Social work seeks to address social problems through interventions that span micro and macro systems. As such, all social workers are obligated to understand the interplay between individual realities and structural forces. Yet prior models of structural social work play a marginal role in social work education, leaving social work educators without the means to meet these obligations. This structural gap in social work classrooms risks deemphasizing macro practice and failing to prepare micro practitioners to account for structural forces that impact client wellbeing and client-social worker interactions. This paper examines the framework of structural competence as a potential solution to this challenge. It focuses on the use of structural competence as a pedagogical tool, describing its integration into a social welfare policy course and an evaluation of this effort. We find that structural competence can provide a unifying framework through which structural social work may be articulated and anchored. Though it helped students conceptualize the interaction between micro realities and macro forces, it requires further operationalization to provide a clear vision as to what structurally competent social work practice looks like in action.

Keywords: Structural competence, cultural competence, social work education, structural social work, social policy

Introduction

On a sunny Wednesday morning we stood as instructors before a class of 48 undergraduate social work students and asked, "Who has learned about 'empowerment'? 'Resilience'? How about 'psychiatric diagnoses' or 'cultural competence'?" A majority of students raised their hands. We continued. "Okay, and who has learned about 'institutional racism'? 'Neoliberalism'? 'Coded language'? The 'structural forces' that influence health and wellbeing?" Few hands went up. The majority, instead, perplexedly stared forward.

Social work espouses a central person-in-environment framework, yet the students before us were much more familiar with the person than the environment. Their lack of knowledge was not an anomaly. Surveys indicate social work students have little exposure to macro concepts, interventions, and field experiences (Miller, Tice, & Hall, 2008). Lack of exposure to macro concepts and practice opportunities across curriculum is a crude but clear indicator of a structural gap in social work education.

In our view, this structural gap limits the success of a profession charged with enhancing the welfare of individuals and groups by insufficiently attending to the socio-structural forces that shape client outcomes and practice. Social workers profess a commitment to addressing poverty and social exclusion across micro- and macro-levels of practice (British Association of Social Workers, 2012; National Association of Social Workers, 2008). They also profess a desire to produce knowledge that deepens understanding of and provides solutions to marginalization (Brekke, 2012). Yet social workers struggle to turn these intentions into reality. For example, many social workers fail to integrate political action and social work practice (Rome & Hoehstetter, 2010). Filling social work's structural gap and addressing related sequelae requires, at a minimum, a unified framework and vision for teaching students about the socio-structural forces that impact the individuals and communities with whom they will work, the role of structural forces in shaping their interactions with clients, and the interventions they deliver. Structural competence is one such framework.

Initially conceptualized by medical anthropologists Jonathan Metzl and Helena Hansen (2014), structural competence is a

framework for understanding the ways in which social, cultural, and economic forces influence health behaviors and outcomes, provider-patient interactions, and healthcare delivery. Though a structural approach to social work is hardly new, a point to which we return below, it has remained marginal and has been hindered by an impractical reputation. Further, its application to the social work classroom, to our knowledge, has gone unexamined. Emphasizing competence and lending itself directly to professional training, structural competence holds promise for social work.

In this paper, we aim to reinvigorate conversation about structural social work, while also making structural social work tangible. In doing so, we describe our adaptation and application of the structural competence framework to an undergraduate social welfare policy course. Based on our evaluation of this course, we highlight the strengths and challenges to integrating this framework into the social work classroom. Before further discussing the framework and our adaptation, we first situate structural competence within literature on structural social work and competency-based frameworks.

Structural Social Work: Legacy and Limitations

Structural social work is not new. Assessing structural influences on wellbeing has a legacy spanning social work's earliest days (see, e.g., Addams, 1910; Lee, 1937). Later, the term "structure" was popularized by 1970's radical and Marxist social work scholars (see, e.g., Brake & Bailey, 1980; Galper, 1975; Moreau, 1979). In writing about structure, scholars such as Bailey, Blake, and Galper highlighted income inequality, social control-oriented social services, and the individualism inherent within the capitalist social order. Subsequent scholars have expanded the meaning and scope of structural social work.

Since Marxism's decline in scholarly popularity, several contemporary authors have provided updated conceptualizations of structure and structural social work. In *The New Structural Social Work* (2007), Mullaly drew on feminist, anti-racist, and postmodern approaches to define structure as "the means by which oppression is institutionalized in society [and]...the ways that social institutions, laws, policies, and social processes and practices all work together primarily in favor of the dominant group at the expense of the subordinate group" (2007, p. 262).

In *Structural Approach to Direct Practice in Social Work: A Social Constructionist Perspective* (2006), Wood and Tully used a social constructionist lens and defined structure as “a set of narratives and their related sociocultural and local interactions” that persist over time, becoming institutionalized and normalized (2006, p. 25). In contrast to their predecessors, these 21st century definitions of structure suggest that structure is not limited to the terrain of political economy, nor that the target of structural social work is dismantling the capitalist order. Instead, contemporary structural social work involves intervening across material and symbolic dimensions of economic and social inequality—from increasing access to benefits to race-making.

What does this notion of structure mean for social work practice? Both Wood and Tully (2006) and Mullaly (2007) suggest that structural social work offers goals and techniques applicable to a variety of micro- and macro-level practice settings. Wood and Tully identified four primary tasks in structural social work: structural social work should help people connect with resources, change social structures that limit capacity or cause suffering, help people navigate problematic situations, and help people deconstruct sociopolitical discourse to reveal connections to daily struggles. Mullaly identified two goals for structural social work—immediate relief from oppressive social structures and longer-term structural change.

Though these scholars have developed foundational strategies for structural social work (i.e., “tasks”) and overarching aims (i.e., “goals”), their work remains marginal and infrequently used by social work educators. One potential challenge to the integration of contemporary structural approaches is the perception that they are impractical, an impression that has lingered since structural social work’s Marxist days. Another potential reason for their marginal role may be the lack of demonstrated application to social work pedagogy and curriculum. Despite pleas for educational reform in this area (e.g., Miller et al., 2008), we know of no models for how structural social work can be integrated into curriculum or taught. As we discuss further below, structural competence may be a useful model for overcoming these challenges to structural social work, with its integration of theory and practice, and its focus on educating “competent” practitioners.

Teaching Competency: Concepts and Controversies

The integration of competence into structural social work, at least in name, could be key to increasing the perceived (and, with any luck, actual) practicality of structural social work. The essence of competence is “observed performance in role” (Clark, 1995, p. 565). To ensure social work students are adequately capacitated to implement social work interventions in the real world, the field has increasingly turned to competency-based models for guiding social work education. Though competence-based education in social work can be traced from the profession’s early formation, competence is now inextricably tied to social work’s scope. Competence is highly emphasized by the Council on Social Work Education (CSWE), which has refocused its accreditation standards under a “competency-based education framework” (CSWE, 2008).

Few would argue with the value of ensuring social work students are adequately trained to practice in accordance with the field’s principles and standards. However, scholars have debated the degree to which competency-based frameworks achieve this aim. Concerns regarding competency suggest it promotes a narrow conception of social work which fails to prepare social workers for the moral and ethical specificities of practice (Higgins, 2015). Some have accused competency-based models of being formulaic, representing an inflexible “toolkit mentality” of social work training (Abrams & Moio, 2009; Higgins, 2015). Others suggest that competence is conceptually muddled, lacking empirical bases, and in need of valid and reliable measures of attainment (Clark, 1995).

Despite these critiques, the need to maintain standards in social work practice propels competence forward as an organizing principle for the profession (e.g., CSWE, 2015). CSWE has attempted to circumvent some of the aforementioned concerns by enveloping knowledge and values into its definition of competency (CSWE, 2008). Other critiques have been assuaged in the United Kingdom by adapting a capabilities framework (Higgins, 2015), wherein skill acquisition is treated as an ongoing developmental process instead of a goal with a concrete end.

In relation to structural social work, competence may have utility despite its limitations. The practicality of competence gives it the potential to add an important dose of pragmatism to structural social work. With the abovementioned critiques in mind and careful attention to avoiding recognized pitfalls, a competence-based approach might bring together the tasks and goals articulated by previous structural social work scholars into a set of tangible, teachable practices. We apply structural competence, as delineated below, to structural social work in this effort.

Structural Competence

Structural competence, according to Jonathan Metzl and Helena Hansen, is the:

trained ability to discern how a host of issues defined clinically as symptoms, attitudes, or diseases...also represent the downstream implications of a number of upstream decisions about such matters as health care and food delivery systems, zoning laws, urban and rural infrastructures, medicalization, or even about the very definitions of illness and health. (2014, p. 4)

Here, “structure” is an inclusive term, applicable to physical structures (e.g., transportation, infrastructure, buildings, the organization of neighborhoods, sanitation), frameworks (e.g., diagnostic classifications, bureaucracies), and the associations and assumptions embedded within language and attitudes (e.g., stigma, racism). The approach is intended to help medical providers answer complex questions, like: What are the factors that shape stigma and health outcomes? How do these factors influence the health problems of patients seeking care? And, how do these factors influence patient provider interactions?

Metzl and Hansen purport that structural competence is enacted via five competencies. The first is to “recognize the structures that shape clinical interactions” (2014, p. 6). When doctors draw on research that identifies structural influences on healthcare delivery and health behaviors, Metzl and Hansen argue, they can better identify the factors that constrain their work. The second competency seeks to develop “an extra-clinical language of structure” (2014, p. 7). This competency

urges doctors to develop the ability to discuss the structural forces that impact health outside of clinical interactions and in communities. The third competency is “rearticulating ‘cultural’ presentations in structural terms” (2014, p. 9). Here doctors are encouraged to understand that what is classified as “cultural” is often actually the manifestation of ethno-racial disparities rooted in structural inequality. Shifting aims from understanding toward action, the fourth competency is “observing and imagining structural interventions” (2014, p. 10). The fifth competency is “developing structural humility,” or the ability of doctors to recognize the limitations of their training and ability to truly understand the experiences of patients who may face structural barriers to health.

Structural competence has three essential characteristics. First, structural competence is fundamentally transdisciplinary in its theoretical and empirical foundations. In order to understand the ways in which a multitude of structures shape client outcomes and practitioner-client interactions, practitioners must draw from varied bodies of literature.

Secondly, structural competence *forefronts inequality*. In its effort to do so, structural competence aims to expand, not replace, cultural competence by examining how “race, class, gender, and ethnicity are shaped both by the interaction of two persons in a room, and by the larger structural contexts in which their interactions take place” (Metzl & Hansen, 2014, p. 3). Structural competence does not devalue attempts to understand differential health outcomes or healthcare utilization. It instead encourages practitioners to consider how disparities or health behaviors conceptualized as cultural in nature may be rooted in the interaction between culture and structured inequality that privileges the health of some groups over others.

Finally, structural competence takes a broad view of training. Structural competence is not intended to be a checklist of skills. It is meant to be a framework that better equips healthcare professionals to identify and organize structures and how they relate to social problems, oppression, and injustice.

Structural competence aligns well with social work in its approach and aims. Social work is interdisciplinary, inequality-focused, and oriented toward a broad conceptualization of competence. Structural competence also aligns with social work in their mutual recognition of cultural competence, though with

structural competence the focus is expanded to address how even the very definitions of culture and cultural groups are shaped by structures. By drawing attention to the structural factors that perpetuate social injustice and that generate social problems, structural competence could help social workers link knowledge to action, assuaging concerns regarding the impracticality of structural models of social work. In sum, structural competence is an approach with the potential to refocus social worker education on the material and symbolic forces that impact clients and practice, maintaining a practical focus while avoiding the pitfalls of mechanistic competency-based models. The remainder of this paper focuses on our adaptation of this approach, illustrating it through our operationalization of structural competence in a policy course.

Methods

We adapted the structural competence model proposed by Metzl and Hansen to social work and utilized it as a guiding framework for an undergraduate social welfare policy course. The course was taught at a large, public university situated in a large, West Coast city. Each class period within the eight-week course, which met twice a week, consisted of two hours of an all-class lecture, and a third hour for smaller discussion sections. To understand the process of adapting structural competence and the influence of the framework on instruction and learning, we evaluated our adaptation. Specifically, our evaluation sought to answer two questions: (1) How can structural competence be adapted for use in a social welfare policy course? And, (2) how does the structural competence framework shape student learning and instruction?

In order to answer these questions, we employed Taylor's (1993) strategy for evaluating social work education. Taylor's strategy promotes illuminative, qualitative, and utilization-focused evaluations. Illuminative evaluations seek to monitor and describe the process of course implementation and contribute to its ongoing development, qualitative evaluations center student and instructor perspectives, and utilization-focused evaluations prioritize the practical utility of the evaluation for research consumers. Our two evaluation questions are illuminative in that we document and link the process of adapting

and implementing the structural competence framework to teaching and learning. The evaluation is also fundamentally qualitative in that, while some quantitative indicators are used, findings and conclusions center around participant and instructor perspectives and are generated through a qualitative review of several outcomes. Finally, by providing sufficient detail on the adaptation of the model, as well as the strengths and weaknesses of the approach taken, the evaluation is focused on informing educational practices among social work educators, and thus is utilization-focused in nature.

Table 1. Evaluation Questions, Data Sources, and Analytic Approach

Evaluation Question	Data Source	Analytic Approach
1. How can structural competence be adapted to a social welfare policy course?	Adaptation table Syllabus Lesson plans	Document review Document review Document review
2. How does the structural competence framework shape student learning and instruction?	Student course satisfaction (pre-SC and SC) Student grades (pre-SC and SC) Structural competence portfolios Instructor reflections	Quantitative description and comparison (two-sample t-test) Quantitative description and comparison Deductive thematic analysis Inductive thematic analysis

Several data sources and analytic approaches were employed (see Table 1). To answer question one, we conducted a review of instructor preparation materials and course materials. These materials included an Adaptation Table used to document our reconceptualization of structural competencies for social work, and to align readings, activities, and assignments with each competency. Materials also included the course syllabus and lesson plans, which were used to anchor our description of the adaptation in the intended and actualized course content.

For question two, we used three data sources to assess student learning. First, we assessed differences in satisfaction captured in formal course evaluation scores on Likert scale questions from a first iteration of the course when a structural competency framework was not implemented (to be called the “pre-SC course”) and the second iteration of the course when a structural competency framework was implemented (to be called the “SC course”). Secondly, we assessed impact on student

learning by comparing median class grades from the first and second iterations of the course. Thirdly, to assess impact on student learning, we qualitatively analyzed content from students' Structural Competency Portfolios, the final course project. To analyze these portfolios, we deductively coded for knowledge or skill acquisition articulated within any of the five structural competencies. Finally, to assess influence on teaching, we inductively analyzed instructor reflections for themes related to strengths and weaknesses of the approach.

Findings

Adapting Structural Competence

Before describing the ways the structural competence framework shaped instruction and student learning, we operationalize our adaptation. Adapting structural competence for a social welfare policy course involved two primary processes. First, we conceptualized concepts such as "structural forces" and "structural competence" for the purpose of social work practice. Secondly, we translated this reconceptualization into a policy curriculum.

Defining Structural Forces and Structural Competency. In order to implement structural competence in a social welfare policy course we began by defining structural forces for social work practice. We defined *structural forces* as the broad social, economic, cultural, health, and environmental conditions and policies that exist at the global, national, state, and local levels. We classified structural forces into four clusters: the physical aspects of a society (e.g., transportation infrastructure, waste management, and buildings); the systems and institutions used to organize a society (e.g., political, economic, and school systems and institutions); the frameworks employed by a society (e.g., dominant analytic approaches and guidelines); and the language and beliefs that give meaning to a society (e.g., labels, coded language, and political values). It was emphasized that all structures can simultaneously intersect and influence one another to produce social outcomes. Given the focus of the course, we specified that policies themselves, in addition to the values, frameworks, languages and analytic approaches used to interpret and evaluate them, are examples of structural forces.

We defined *structural competency* as knowing how structural forces influence the behaviors, attitudes, and wellbeing of clients, understanding how these forces and their impacts come to be defined, and obtaining the skills necessary to influence structural forces. While structural competency within medicine primarily focuses on improving micro interactions between doctors and patients, we expanded our focus to include the macro-, in addition to micro- level work. In other words, we underscored how social workers can apply structural competency to macro-level interventions by intervening directly on social structures in addition to underscoring how structural forces impact social worker-client interactions.

Further, we adapted Metzl and Hansen's (2014) five main competencies as major aims of the course. The adapted competencies sought to capacitate students to: (1) identify major policies and related structural forces that impact client wellbeing; (2) recognize the practice implications of those policies and related structural forces; (3) develop ability for structural assessment, including knowing how to assess the ways in which policies and other structures produce/reduce inequalities, and/or how policies create/eliminate barriers for inclusion; (4) identify or conceptualize policy interventions that enhance wellbeing while cultivating awareness of policy interventions that address structural barriers to equity and wellbeing; and (5) develop structural humility. *Structural humility* was established as the capacity to recognize an individual practitioner's limitations when it comes to understanding the entirety of how structural forces influence each client's life. It also involved repudiating the notion that full mastery of complex and evolving structural forces as they interact with complex and evolving individuals and groups is ever fully plausible.

Structure of Course. In order to use the structural competence framework to guide study of social welfare policy, the first third of the course delineated space for orienting students to structural competence in addition to the standard orientation to social welfare policy (i.e., the processes of policy creation and evaluation, political perspectives, and elements of policy). We provided definitions for and examples of structural forces and competencies and strove to illustrate the way in which factors across levels influence wellbeing outcomes. To help students learn how policies interact with other structural forces to

produce social outcomes, we spent two classes on inequality, including the interactions between poverty, racism and other identity-related inequalities.

After establishing these bases (to which we continuously returned), the remainder of the course was devoted to policy fundamentals. Lectures covered major social insurance and social assistance programs and lectures specific to healthcare, mental health, child welfare, education, housing and homelessness, immigration, and criminal justice policies. Within each of these domains, we highlighted how policies interact with other forces to produce social outcomes. We also highlighted how these forces shape social worker-client relationships. We drew on an interdisciplinary body of empirical and theoretical literature and cultivated space for identifying the structural forces that influence the problems social welfare policies set out to address.

Assignments were designed to promote both the acquisition of policy basics and the enhancement of structural competence. In addition to a midterm and final exam, two written reading responses and a policy analysis paper were required. To help facilitate structural humility, the policy analysis paper included an autobiographical component in which students were asked to reflect on the way in which a policy had influenced their own developmental trajectory.

The final assignment was a Structural Competency Portfolio. The portfolio was submitted on the last day of the course, wherein each student was asked to present and reflect upon their structural competency gains. Though this portfolio represented ten percent of the final grade, it was a low-stakes writing assignment that emphasized processing more than the writing itself (Elbow, 1997). The assignment offered space for both instructors and students to solidify the use of structural competency as the course's primary cohesive agent.

Structural Competence's Influence on Student Learning and Instructor Approach

We examined the influence of the structural competence framework by assessing student learning, as measured by student performance, course evaluations, and instructor reflections on the teaching process.

Student learning. Overall, student performance reflected attainment of learning objectives. The median student final grade for the course was a 92.2, a 4.5 percent increase from 87.7 percent in the pre-SC iteration. Furthermore, deductive content analysis of the final Structural Competency Portfolios for the SC-students (N = 41) found that the vast majority of students (n = 35, 86%) were successfully able to articulate an understanding of structural competence and their perceptions as to how their structural competence had increased during the course. Among the five established competencies, four were widely discussed in portfolios. Competencies one and five, specifically, were the most prominently featured. For competency one (identify major policies and related structural forces that impact client well-being), 14 students (34%) noted an increased capacity. Students reflected that learning about how policies and other structural forces intersect and impact one another improved their grasp on their notions of “interconnectedness” and “person-in-environment”; they saw these things as integral to their learning in the course. One student articulated:

I was able to consider how the conflation and confluence between factors [across] levels ultimately influence the ways in which policies are framed, designed, and implemented... Considering the interplay of structural forces in policy design can provide a more holistic approach towards understanding what the policy’s intentions, goals, objectives and consequences are. I feel as though without any consideration of structural forces we lack the substantial information necessary to fully understand policies.

Increased capacity for the fifth competency, the development of structural humility, was also endorsed by 14 students (34%). These students discussed coming to understand that “you don’t know what you don’t know,” learning to look at issues in a different way, and practicing personal evaluations of their own belief systems. One student elaborated: “This class taught me that I may have some knowledge of how I want things to go but there’s much more to be learned and it is often more complicated than what I make it out to be. Instead of approaching problems with a set solution in mind, this class has taught me to listen, to pause, and to learn how to learn from others.”

Twelve students (29%) discussed their improved ability to understand how to analyze policy and therefore how to analyze a major structural force (competency three). One focus here was on assessing the values and ideologies that drive policies. Students wrote that through their increased comprehension of the values that drive the welfare state, they were better able to analyze policies. For example, one student discussed how learning about utilitarianism enabled an improved understanding of why eligibility requirements for different policies, like Medicaid, exist the way they do. She said doing so led her to view Medicaid's goals more positively, enabling what she felt was a more informed evaluation of the legislation's strengths and weaknesses.

In addition, students reflected on an improved ability to understand the relationships between social problems and social policies. One wrote, "Throughout the summer I learned that stopping at just knowing that 'food deserts cause obesity' falls short of doing anything about these problems. I learned how to identify the policies that created these realities for people; I learned to look at what motivates policy makers to [act] the way they do." She continued on to discuss the role ideology—a structural force—can play in policy making and why she felt it was important to be able to name and identify ideologies that contribute to policy decisions.

Eleven students (27%) indicated increased competence in competency two—improving understanding of how structural forces have implications for social work practice. Most prominently, this related to feeling better equipped to hold the myriad of structural forces that can impact a client's life in future provider-client interactions. As one student explained:

Every lecture on the different policies was presented in a way that taught me how to identify and understand structural influences that affect...people, communities, and individuals... [As] these structural forces directly and indirectly influence how much a social worker will be able to provide the best resources and help...having this knowledge will better prepare me to go into the field.

This student specifically reflected on learning about anticipated changes and challenges to Deferred Action for Childhood Arrivals (DACA). She discussed previous time spent volunteering

to help people renew their applications, lamenting the number of lives that would be affected by a reversal, and professed a commitment to staying up to date with relevant policies and re-authorizations in her future social work practice.

Competency four, however, was less discussed. Seven students (7%) touched upon how the class helped bring awareness to the ways in which they could personally impact policy and other structural forces—some even specifically mentioning community organizing and participation in social movements—but these reflections were often wrapped up in accompanying reflections of feeling overwhelmed by the complexities and problems found in the systems presented to them throughout the course. For instance, one student reflected that her biggest class “take away” had to do with the shortcomings of policy “in almost every area we studied,” and wrote that every class left her with questions to be answered. Though she and others would end these reflections with optimistic sentiments (e.g., “if we use the tools and knowledge given to us by this class, we can be the ones to fix these failing systems”), their sentiments of hope were rarely concrete examples of how interventions could enhance wellbeing.

For the six students (5%) who were unable to successfully articulate how they had become more structurally competent through the course, the primary cause tended to lie with their difficulty articulating what structural competency actually was. One notable area of confusion was the difficulty some had with teasing out the difference between structural and cultural competence.

In addition to the quantitative and qualitative information on student learning, we examined course satisfaction via anonymous course evaluations in both the pre-SC course and the SC-course. The mean class endorsement was higher in the SC-course than in the pre-SC course for four items: “Course content meets stated objectives” ($p < .01$); “Course objectives are clear” ($p < .05$); “Papers and written assignments are instructive” ($p < .05$); and “Instructor promotes critical thinking” ($p < .05$). Seven indicators (“Course is well organized,” “Course is challenging,” “Readings are instructive,” “Information presented is up-to-date,” “Course addresses human diversity content,” “Standards for student performance are reasonable,” and the items that measured “overall course quality” and “overall

teaching effectiveness”) did not significantly differ between course iterations. Student responses suggest that the SC iteration may have provided students with a clearer understanding of the course’s goals and intent, and improved capacity to critically understand the material presented, while not detracting from any other course aspect.

Influence on instruction. Teacher reflections on the structural competence framework were predominantly positive. The framework provided an anchor, absent in the previous iteration of the course, from which each lecture could be tethered. The Structural Competence Portfolio was a particularly useful final assignment for helping students to comprehensively assess what they had gleaned from the course and to identify which areas of the course most resonated with them. By utilizing the framework, students seemed better capacitated to understand how the causes and consequences of social welfare policies fit into social work practice. They also seemed to understand how different forces intersect to impact the lives of the people and communities they may one day serve—they were able to voice understanding of how forces had intersected to impact their own communities and lives to date.

We also noted three challenges to integrating the framework. The first related to the difficulty in managing the amount of information presented to students. Each lecture, students were asked to absorb novel information about intricate systems like healthcare, child welfare, and K–12 education, which is a difficult task on its own. They then were asked to learn about the structural forces that shape the policies within these domains and how the policies within these domains are structural forces in and of themselves. Adding the dimension of structural competency to the policy content and incorporating associated trans-disciplinary literature thus provided extra layers of novelty and complexity to already challenging coursework. Further, for undergraduates, envisioning the influence of policies on social work practice required a level of experience that many students did not have. Instruction required extra patience and vigilance around clarity and concept-reinforcement throughout; it also made time management critical, but difficult.

The second challenge related to identifying how structural inequalities manifest in the classroom. Given structural competence’s attention to how social and economic forces can interact

with one another to influence interactions and produce client outcomes, teaching it requires conscientiousness regarding how said forces exist in the classroom space itself. Choosing the voices and viewpoints represented in course material, being mindful of power dynamics between students and instructors, and considering the structures that impacted student capacity to learn and meet course requirements all necessitated structural competency in their own right. In order to integrate multiple perspectives, we went beyond selecting a single textbook—instead selecting readings from a variety of sources. Though this was a more laborious approach, the identification of over 19 different readings as student “favorites” in the final Portfolio assignment suggests that the variation was helpful to not only provide an interdisciplinary understanding of policy, but also for catering to an array of preferences and viewpoints.

The third challenge related to the fourth competency—striving to identify or conceptualize policy interventions that enhance wellbeing. Retaining student optimism and promoting creativity with respect to interventions for improving complex policies and systems was an arduous task. This was, in part, due to the difficulties associated with incorporating sound examples of macro-interventions that improve structural forces for the purposes of promoting welfare. While we found discussion of social movement successes (e.g., the Civil Rights movement and the passage of the Civil Rights Act) helpful, or the benefits of structurally competent assessment (e.g., an example of how Racial Equity Impact Assessments could be used in response to school district restructuring in Minnesota; see Toney & Keleher, 2013), these examples were relatively few and far between. Ultimately, the structural competence framework, with its focus on structural forces, did not lend itself to identifying examples of individual practitioners who modeled structural competence or what their structural competence looked like in practice.

Discussion

This study sought to reinvigorate conversations regarding structural models for social work by evaluating the capacity for and impact of the structural competence framework for a social welfare policy course. Results illustrated one way of adapting structural competence for students of social work studying

social welfare policy and revealed implications for student learning and instruction. Results indicated that application of the framework to the study of social welfare policy is one way in which social work educators can equip their students to holistically understand the range of “upstream” forces that have significant “downstream” impacts on wellbeing. At the same time, results also indicated structural competence was not a silver bullet for addressing the structural gap in social work and came with several challenges.

Prior to unpacking our results and structural competence’s strengths and weaknesses, some limitations to our evaluation should be noted. To start, the pre-SC course occurred during the first year that the instructors taught the course, while the SC-course occurred during the instructors’ second time teaching the course. Thus, it is possible that there was some improvement from the pre-SC course to the SC-course (unrelated to the use of the structural competence framework) that contributed to positive differences between the two years. For example, some course assignments and course material were refined from the pre-SC course to the SC-course. The slightly smaller class size in the SC-course versus the pre-SC course also created space for instructors to provide more individual attention to each student in the SC-course iteration, which may have impacted student learning. As such, related-findings should be interpreted with caution.

As for our findings, several course adaptations seemed fundamental to embracing a structural competence approach. These adaptations included diversifying the readings, assigning the final structural competence portfolio, beginning the course with the foundational principles of structural competence, and utilizing the last class of the course to discuss and reflect on the framework. Because Metz and Hansen’s (2014) structural competence model was originally intended for medical practitioners, it required some reconceptualization for social work. Other social work educators may benefit from looking more prominently to the writing of social work-specific scholars, such as Wood and Tully (2006) and Mullaly (2007).

When it came to structural competence’s relationship to student learning, student perceptions, and teaching, the approach seemed beneficial in several ways. It helped expose the multifaceted drivers of the social problems that social welfare

policies seek to address. Students also expressed the ability to personalize issues they previously thought irrelevant to them, understand how policies impact micro-level social work, engage in policy conversations with non-social workers, and better assess policies overall.

We also found limitations to the model. First, information management was a major hurdle to framework implementation. Instructors interested in adapting a structural competency framework to social work education may benefit from minimizing the sheer volume of information presented to students, so as to help facilitate knowledge retention. Schools of social work interested in adapting the framework would ideally strive to implement the approach across curriculum, so that the burden of learning does not fall onto one course. Second, instructors of social work wanting to adapt the framework should embrace structurally competent pedagogy. This requires keen awareness of the variety of ways in which structural inequalities manifest within syllabi and classrooms, and the ability to address how structural forces converge to shape social work and social worker-client interactions, and teaching and instructor-student interactions.

Third, students struggled to express concrete examples of what structural competence would look like in action. Students voiced improved command for four out of the five structural competencies, but had difficulty identifying interventions that enhance wellbeing. Some students lacked optimism around social welfare policy's potential to enhance equity at all. Further, while many were able to express a general understanding that structurally competent practice involves understanding the impact of structural forces on client wellbeing, many lacked a more specific and tangible articulation of structurally competent practice. The limited degree to which students could articulate structurally competent interventions and practices suggests that structural competence in its current form may be less practical than it appeared prior to application. Future iterations of the course may benefit from reifying how structures can reduce barriers to health, equity, and wellbeing in a more systematic way by setting aside dedicated time each class to identify proposed legislation aimed at enhancing wellbeing, assigning readings that illustrate successful interventions, or identifying practitioners who successfully put structural competence into

action. Like cultural competence, identifying what structural competence looks like in practice and tying those actions to outcomes is a challenge to the framework's utility that warrants further attention.

Conclusion

Our experience adapting structural competence to the social work classroom leads us to conclude that structural competence can provide a unifying framework through which structural social work may be articulated and anchored. Specifically, in a policy course, this approach seemed to enhance student understanding of how policies fit within and interact with other structural forces to affect clients and social work practice. We also found that while structural competence facilitates understanding how structural forces influence social outcomes, it lacks a clear articulation of structural practice. Structural competence requires further development to translate knowledge into tangible skills for enhancing equity or, in other words, to make social workers competent in structural practice.

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