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1

Revisiting our History post-‘Celtic Tiger’: So, What’s New?

Caroline McGregor and Suzanne Quin

Introduction

The past decade has been a time of unprecedented change in Irish society, which has had a significant impact on the organization and practice of social work. Global trends in the structure of work in the public sector, and the focus on statutory registration and monitoring of professions within the EU have also been of major relevance. A key theme has been the impact of privatization and ‘market think’ on the provision of social services in general, and social work in particular. Overarching the discourses of managerialism has been the challenges to developing and maintaining a quality service in the context of globalization and neoliberal responses by governments to defining and responding to economic crises (Broadhurst et al., 2010; Lees et al., 2013).

Certainly, the economy has been the dominant feature in Irish society during these years, with the swift change from ‘boom to bust’ resulting in the bailout and its programme of austerity. Writing at the peak of the Celtic Tiger, Fahey et al. (2007, p. 10) described a now unrecognizable Irish society thus:

Subjective well being and national morale are among the highest in Europe; living standards have risen and have done so more or less for everyone; jobs have become astonishingly abundant and have improved in quality; people are now flocking into rather than out of the country; young adults are forming couples and having children at an exemplary rate by rich country standards; and people are physically healthier and as far as we can tell from the rather patchy evidence, generally feel good about their lives and the society around them.

At the same time, these authors pointed out that life was not equally good for all and that public services had considerable room for improvement. Moreover, there was the underlying concern as to whether or not the good times would remain, as reflected in Fahey et al.'s (2007, p. 10) comment that 'there is the niggling worry that the whole edifice of economic growth may come crashing down about our ears at some time in the future'. This, of course, is exactly what has happened. Evidence of the impact of this crash on the wellbeing of individuals and the socioeconomic context of a range of service users is plentiful. Data for the Growing Up in Ireland study, as just one example, shows that between late 2008/early 2009 and 2011, families (with children aged three years old) reporting financial difficulties rose from 44% to 61%. Indeed, if we consider the changes in Irish society generally over the past decade, whether politically, culturally, socially, intellectually or institutionally (in other words, the genealogical context), it seems fair to say they have been immense. But when considering 'transformations' care must be taken that we are not overpolemic about the enormity of change, because in and among the acknowledged major shifts and developments of the past decade, some persistent and enduring continuities are also evident, as shown in this chapter. This relationship with history and the present is an approach well rehearsed and applied to social work (e.g. Skehill, 2004, 2007; Garrity, 2010). While this chapter does not explicitly carry out an archaeological or genealogical discourse analysis consistent with a history of the present (see Foucault, 1977, 1980; Dean, 1994), the general principles of the approach have been integrated to illuminate some important observations about the present by reference to key moments in the past (see Garland, 1992; Skehill, 2007; Garrity, 2010). In particular, we are interested to consider present challenges in terms of the extent to which they represent continuity through our history or a shift away (discontinuity). We are interested in considering the construction of discourses of social work (archaeology) in terms of its main activity, nature and potential, as well as the dominant social, political, institutional, intellectual and cultural discourses (genealogy) that surround and shape both the potential and limit of the profession at any particular moment in time (see Skehill, 2007). We are using history of the present as a conceptual device to emphasize that the present cannot be totally separated from the past but neither is it a mere product of it. We should be neither progressive nor revisionist in our approach (Dean, 1994) but rather seek to problematize the present using the past as a critical device. Thus, the interest in history is not to generalize or judge if things are 'better' or 'worse' but something more complex. For example, in some ways we see progressive developments in social work, while in others we can observe 'reversals in historical pathways'. Through identifying key moments or themes, we are able to illustrate and illuminate elements of social work that appear significant at present. In so doing, we

are mindful of making the distinction between what social work aspires to be and how it actually appears to be now. Such an assessment provides a sound basis on which to consider possibilities and limitations as we look to the future.

With this framework in mind, what follows are a set of themes that illustrate some of the main developments in social work in the past decade. In each instance, we comment on the changes and then connect this back to other key moments in the history of social work to get a sense of the nature of that ‘change’ or ‘continuity’. The discussion that follows draws on this analysis to address the core questions that are of central concern for this book. This will inform our conclusion as to how history can continue to offer us a critical tool for analysing the various new ‘presents’ we find ourselves in. The four themes we focus on are: demographic change and its impact; service expansion and retraction; managerialism, registration and accountability; and champions of social justice and human rights.

Demographic change and its impact

The so-called ‘Celtic Tiger’ was responsible for immense changes in the demographic profile of Irish society within a short space of time. After decades of net emigration, Ireland became an immigrant nation (Office of the Minister for Integration, 2008). Net immigration was at its peak in 2006 when over 100,000 immigrants came to Ireland, the majority coming from countries that had joined the EU since 2004, the remainder being returned Irish emigrants and ‘rest of the world’ category, mainly from Africa and Asian countries (Considine and Dukelow, 2009). The vast majority were ‘economic migrants’ attracted by the relatively high wages and work opportunities Ireland could offer. Social work migrants formed a small cohort of this category. Within the two-year period 2004–05, the National Social Work Qualifications Board accredited 259 social workers with non-national qualifications (NSWQB, 2006).

By 2006, 10% of the overall population was non-Irish and, while demographic change occurred throughout the state, it was particularly evident in the Dublin area where the migrant population accounted for 13.3%, resulting in an immigrant population that was five times greater than it had been in the previous decade (Fahey and Fanning, 2010). Ireland had changed from an almost monocultural society to a multicultural society within one generation. Moreover, while the majority were economic migrants, others had come seeking refuge, often alone and leaving behind in their country of origin family members in vulnerable circumstances. Social workers and their employing agencies have had to engage in a steep

learning curve on service provision to what has become an ethnically and culturally diverse community. It is welcome to note the increase in grounded and relevant research into important fields from Irish scholars and practitioners related to this, such as experiences of asylum seekers and refugees in the child protection and welfare system in Ireland (Dalikeni, 2012), practice with unaccompanied asylum seekers (Christie, 2002, 2011; Christie and Burns, 2006) and asylum seekers and resettlement (Kinlen, 2013). Publications regarding the wider field of cultural competence, such as the work of Ní Raghallaigh (2011, 2013; Ní Raghallaigh and Sirriyeh, 2014), have opened up challenging themes such as cultural diversity and spirituality in social work. Indeed, when we look back to the history of social work (e.g. Skehill, 1999), the monocultural nature of society – and thus practice – meant that the cultural diversity theme in practice was often limited to indigenous ethnic minorities such as the Travellers and overly broad aspirations towards ‘anti-racist’ social work as required by the Central Council for Education and Training in Social Work, the UK organization responsible for accrediting social work in the Republic of Ireland up to the early 1990s (see Kearney, 2005).

Service expansion, retraction and social work expertise

The provision of social work services grew, albeit from a low base, during the era of the Celtic Tiger. A survey of social work posts (NSWQB, 2006) found that there were a total of 2,237 whole-time equivalent posts, with the Health Service Executive (HSE) being the largest employer of social workers. It was still a predominantly female profession and, linked to the discussion of immigration above, nearly one-third of social work practitioners had qualifications obtained outside the state. In spite of the economic high tide of the time, ‘budget allocation and employment ceilings’ were cited as obstacles to getting much needed additional posts sanctioned. As well as the established areas of practice, new developments indicated the need for increased numbers of social workers; for example, the projected need for up to 600 social workers in primary care as the plan for establishing primary care teams throughout the country unfolded (Department of Health and Children, 2004). However, this was not to be. The economic crisis of 2008 put a stop to ambitious plans for this and other such expansion. In relation to primary care, the projected roll-out of primary care teams was greatly curtailed so that by 2010, only 350 teams in varying levels of development had been established. Moreover, not all the primary care teams had social workers attached and there was evidence to suggest that social workers were increasingly under threat of redeployment

to the similarly underresourced child welfare and protection services (Ní Raghallaigh et al., 2013).

It was not only in the area of primary care that social work services were curtailed by the catastrophic economic downturn. Public service embargoes prevented even existing posts being filled when they became vacant or, if considered essential, they were only filled on a temporary contractual basis. Those in permanent posts were less likely to move to another social work post than in the boom years (Redmond et al., 2011). This at least promised better continuity of service but was offset by the increasingly larger caseloads of the remaining staff and severe cutbacks in social services more generally. There is little prospect this will change in the short term despite some improved economic indicators. The HSE had to be given a supplementary budget in December 2013 to enable it to provide essential services while facing a further budget cut for the following year, thus making 2014 a challenging year for health service providers and users.

Looking at this issue from a present perspective suggests retraction and reversal in historical pathways. As social workers, we are sharing the experiences of those across the public sector, and indeed much of Irish society more generally, of retracted services and protracted growth. However, in terms of the areas of expertise of social work, the primary care developments also point to an important discontinuity with the more recent past (that is, from 1970 to 2000). Taking a longer look back to the *Committee on Social Work Report* (Department of Health, 1985), for example, an incredible shift has occurred, long advocated for by many in social work, whereby primary care and adult community care services finally received the recognition so lacking during the 1970s and 80s, when the primary focus was on the developments within the child and family field of practice. While the argument developed by Skehill (2004, 2005) around expertise in childcare and protection continues to hold sway (addressed more fully in Chapter 4), it is also a notable shift in social work developments in the past decade to observe a wider expansion of the profession within primary care services.

It is interesting that while primary care developments have been arrested in light of the wider socioeconomic context, developments in the child and family arena of practice have progressed despite the recession, although of course not unaffected by this in terms of employment restrictions, public service pay cuts and so on. Skehill (2005, p. 141) argued that

it is difficult to deny the impact of genealogical factors in the 1990s which created major opportunities for social work in the field to expand. However, by looking further back in history, one might also attribute the present positioning of social work in part to its own archaeological construction as an expert strategy and mediator in the ‘social’.

Both possibilities remain when we consider developments since, and a simplistic deductive approach is to be avoided. However, it would seem that, through the rise and fall of the Celtic Tiger, another momentous process occurred alongside this in the wider genealogical context, resulting in massive challenges to the cultural, social, political, intellectual and institutional discourses of our child welfare service at multiple levels. This included:

- disclosures of horrific abuse and human rights violations in Catholic-run institutions (see Government of Ireland, 2009; Holohan, 2011), leaving Church and state culpable of unacceptable wrongdoing by their actions or lack thereof (see Powell et al., 2012; McGregor, 2014a)
- exposure of failures and limitations within the child protection and welfare system in terms of responding to serious child neglect and abuse concerns (e.g. HSE, 2010)
- deaths of children known to the child protection and welfare services (Shannon and Gibbons, 2012).

The *National Children's Strategy* (Department of Health and Children, 2000) highlights the explicit attempt to move from a residual, reactive discourse of child welfare to a proactive, children's rights orientation. This shift is reflected in the plethora of developments relating to independent representation for children via the Office of the Children's Ombudsman in 2002 to the 2012 Referendum on Children's Rights and the Children and Families Bill, which legislated for the establishment of an independent agency to deliver comprehensive child and family services. Such developments are detailed in Chapter 4. For this chapter, a few points can be emphasized.

First, the greater social and public profile of child abuse as a political and social issue has resulted in increased media attention to social work in the past decade. In terms of media focus on social work, a review of Irish print media by Gaughan and Garrett (2011, p. 276) found that 'reporting of social work and social services was focused on work with children and families and, more specifically, child abuse cases'. Media reporting of the deaths of Sharon Grace and her two children (2005) and the Dunne family (2007) highlighted the lack of social work out-of-hours service as well as the repeated calls by social workers for the establishment of such a service to try to prevent such tragedies from occurring (Gaughan and Garrett, 2011). The *Roscommon Child Care Case: Report of the Inquiry Team to the Health Service Executive* (HSE, 2010) drew negative media attention to the fact that social workers had been involved with a family over a prolonged period of time during which the children continued to suffer severe abuse inflicted by their parents. Cumulatively, reports such as these 'raised public awareness,

increased demands for better protection and placed child protection social work under increased scrutiny’ (Featherstone et al., 2012, p. 56). However, McNulty (2008) points out that, with some exceptions, social workers have not been at the receiving end of negative publicity compared to that experienced by social workers in the UK.

Second, it seems that, as in the case of the 1991 Act and its implementation being largely influenced by the outcry after the *Kilkenny Incest Investigation*, the current emphasis on developments in child and family services, over primary care for example, can likewise be best understood within the wider social and political context in which the change is occurring. The simplistic discourse of ‘purging the past’ in this new development is palpable and in need of problematization (McGregor, 2014a).

Third, while not denying the dominance of a political discourse on the development of the new agency for child and family services, its implementation also confirms a continuity of the now well-recognized expertise of professional social work as frontline practitioners in child protection and welfare practice, especially at the socio-legal interface of risk management and family support (Skehill, 2004). Tusla, the Child and Family Agency established on 1 January 2014, poses a number of challenges and opportunities for professional social work but has not questioned the centrality of the profession to the front line of the risk management dimension of the service. This leadership role implies the need to ensure that child protection is maintained as part of a continuum of family child and service interventions (using Meitheal, for example, the Tulsa-led national practice model), and not a marginalized ‘end point’ of the ‘rain-bow’ of intervention. This is a responsibility social work and its managers must prioritize. And finally, those ‘outside’ the agency, such as those in HSE primary care, have the potential to be leaders in promoting interagency cooperation and ensuring against segregation of services, one of the concerns of social work and social care practitioners reflected in a recent survey (McGregor, 2014b).

In considering how this leadership can be maximized, one significant and positive factor for social work in Ireland within the past decade has been the increase in social workers who have moved on to senior management positions within the HSE and the NGO sector, giving the profession a stronger leadership position than has been evident in any moment in its past (see Skehill, 1999). This has brought a more pronounced social work perspective on the development of services within the agencies. In terms of structures, as detailed above, it is planned to dissolve the HSE at some unspecified future date, with the Department of Health taking direct responsibility for service provision. For many social workers, however, this change will be immaterial, as they now form part of Tusla (a conjunction of the Irish words for new (tús) and day (lá)).

Managerialism, registration and accountability

Alongside the positive potential indicated in the increased visibility of social work at management level (to some extent), the discourse of managerialism is, in itself, one that has been a matter of major concern in Ireland in the context of the introduction of new business processes, the Health Information and Quality Authority and the general ethos of managerialism that has imbued social services. Of course, this is a matter of concern far beyond current Irish developments. Since the 1990s, focus has been placed on the impact of managerialism on social work practice in many jurisdictions. Referring to social work practice in the English context, for example, Rogowski (2012, p. 928) comments that ‘recent changes to social work’s organization and practice have amounted to deprofessionalization because the overriding concerns have been with encouraging managerialism and the social work business’. This echoes earlier concerns raised by Munro (2004) about the impact of audit on social work practice. Similarly, in relation to social work in Australia, Burton and van den Broek (2009, p. 1328) refer to the ‘abundance of process, procedures, monitoring and audit systems which feature strongly in much of the new public management schema’. Moreover, they argue, ‘increased scrutiny by the media has also exacerbated focus on benchmarks and performance indicators’.

The landscape of business process modelling, quality assurance and increased accountability denotes a significant discontinuity in the history of social work and represents a wider neoliberal trend reaching far beyond the country and the profession. Indeed, it is remarkable to note, for example, the interface between social work developments in the four UK jurisdictions, especially England, and the Republic of Ireland. At one and the same time, debates in the UK emphasize the overreliance on procedures and the need to re-emphasize relationships (e.g. Munro, 2011), while debates in Ireland lament the potential loss of the same. Both positions require a historically informed context to avoid polemic positioning that regulations and procedures are, in themselves, good or bad and show the benefit and importance of opportunities for shared learning across jurisdictions, especially neighbouring ones. Featherstone et al. (2012, p. 59), for example, argue that Ireland can gain the benefit of hindsight by considering the consequences of England’s decision to ‘privilege the management of institutional risk over the improvement of practice’. Such shared learning would help problematize the issue and avoid overly simplistic or deductive analyses that wrongly imply that procedures, regulations and accountability are bad things. This would hardly be sustainable in light of the shocking evidence we have of what can happen in an unregulated system, as highlighted in the report on child abuse (Government of Ireland, 2009; see also Skehill, 2011), and equally myopic arguments about the importance of relationships, as if it

were a newly derived contemporary concern as opposed to a historically continuous feature of social work, taking particular prominence at certain moments in time (e.g. Perlman, 1979; see also McGregor, 2014c).

A related area where social work can benefit directly from prior experience, and cross-border collaboration in particular, is that of registration, as this has been required in the UK and Northern Ireland for some years. The Northern Ireland Social Care Council, which is responsible for the registration of social workers and social care workers, was established under the Health and Personal Social Services (Northern Ireland) Act 2001. In the Republic of Ireland, the Social Workers Registration Board (SWRB) was set up in 2010, the first such board to be created under the Health and Social Care Professionals Act 2005. This Act provided for the establishment of 12 separate professional boards in the so-called ‘allied health professions’, under one umbrella council. Unlike the UK, separate boards are to be created for social work and social care.

The overall objective stated in the 2005 Health and Social Care Professionals Act is to ‘protect the public by fostering high standards of professional conduct and professional education, training and competence among registrants of that profession’ (Article 27(1)). The SWRB comprises 13 members, the majority of whom are lay, with the remaining representing managers, educators and social workers delivering frontline services. The register for current practitioners closed on 31 May 2013, from which date only those registered, or who had applied for registration, are able to use the protected title of ‘social worker’. The SWRB is also the competent authority for qualifications obtained outside the state. Its Annual Report 2012 lists the number of applications received/processed for that year as a total of 29, the majority of whom came from Great Britain or Northern Ireland, with the next highest proportion coming from Poland. This relatively low number of international applications is in marked contrast to figures for 2006 quoted above. Over 3,000 social workers were registered by the SWRB by the end of 2014.

The main reason why the Social Workers Registration Board was the first board to be established under the Act was that its role was partly preceded by the National Social Work Qualifications Board and its predecessor, the Central Council for Education and Training in Social Work (CCETSW), showing a strong continuity in the professional accreditation of social work as a strategy. As far back as the 1970s, there had been pressure to establish a national board to oversee social work education and training (Kearney, 2005). In 1990, the UK’s CCETSW withdrew from the accreditation of social work courses in the Republic of Ireland, which resulted in the setting up of the National Validation Body on Social Work Qualifications and Training, to be replaced by the National Social Work Qualifications Board (NSWQB) in 1997. In turn, the NSWQB ceased to function on 9 March 2011, the date on which the Social Workers Registration Board was formally established. In its

last Annual Report, the then director of the NSWQB commented that ‘the landscape of social work is a changing one, it requires national oversight to ensure relevant and comprehensive information is gathered to inform policies and decisions’ (NSWQB, 2010).

However, the Health and Social Care Professionals Act does not allow for this broad scope. In this way, social work has lost out on the capacity to contribute to policy by engaging in projects such as those undertaken by the NSWQB in relation to social work posts (NSWQB, 1999, 2001, 2006), the mobility of social workers in Ireland, North and South (O’Brien, 2001), and the induction study on the needs of newly qualified social workers (NSWQB, 2003). What has been gained, on the other hand, by the creation of the SWRB is the formal system of registration, the protected title and the inbuilt requirement of continuing professional development, which will help to ensure that practitioners will be up to date in their knowledge and skills.

Linked to this, fitness to practice is obviously an area for concern for social workers, given the difficult and complex situations with which they must engage. Evidence from England and Northern Ireland, however, would indicate that there is less to fear than might be thought. In Northern Ireland, where over 21,000 social workers and social care practitioners are registered, there were just 258 complaints, 22 of which were the subject of conduct hearings (NISCC, 2014). In the same year, the Health & Care Professions Council (England) (HCPC, 2014) pointed out that only 0.64% of registrants had a complaint made against them. Further interrogation of these figures did show that, of the range of professional groups included, social workers (including those engaged in social care work) had a higher percentage than average, with a complaint rate of 1.22%, but also had the largest number of cases closed because the concerns raised did not meet the standard of acceptance.

Champions of social justice and human rights

Social work as a profession defines itself internationally as a practice of promoting social justice and human rights (IFSW, 2014). Likewise, in an Irish context, we have always (rightly) aspired to emphasize our advocacy, value-based and justice orientation. The past decade has tested the profession in this regard and in many ways helped to expose our persistent continuity as well as the major changes we have found ourselves affected by, or influencing. While there are different views on the extent to which promoting social justice and human rights has ever been a core practice of Irish social work, it seems fair and accurate to say that the voice of the social work profession has not been evident in highlighting the devastating effects of cutbacks in services to its most vulnerable clients. It must be acknowledged that this is partly a governance issue, whereby individual social workers are limited from

speaking about specific practice by their employee status. It is also evident that the Irish Association of Social Workers has had limited success in engaging media interest in social work issues and, more generally, representing the critical voice of social work during times of key social debates – such as the cuts to respite care for persons with disability or the lack of political will to address the increasing number of families experiencing serious deprivation as a result of the ongoing impact of the recession and the associated austerity measures. Other organizations have emerged to make some contribution in this regard, for example the Social Work Action Network, founded in the UK and now with established branches in Ireland. An important factor that influences the limited involvement of social workers in promoting social justice outside their individual day-to-day practice is that Irish social workers are not required to join their professional association and many choose not to do so; for some, their union provides the necessary representation they require. Thus, a relatively small professional voice is further diminished. This is not unique to Ireland. Marston and McDonald (2012, p. 1030) point out social work’s ‘relative lack of profile compared to other professions’. They comment that ‘the British Association of Social Workers has not been able to operate as an effective mass-membership organization, thereby limiting its ability to affect the destiny of the profession’.

Conclusion

The ethos of using history to inform the present that has informed this discussion is perhaps best reflected in the following statement from McGregor’s recent commentary on the use of history to critically reflect on social work in the UK (McGregor, 2014c). Here, McGregor (2014c, p. 10) argued that to develop a critical and informed understanding of the present with reference to the past ‘necessitates an engagement with history that acknowledges both achievements and failures ... some reasons to be ashamed ... and other reasons to be proud’, and that ‘it necessitates the promotion of history not as an “add on” contextual dimension but as a core and central element that informs social work research, education and practice’ (Shaw, 2008, cited in McGregor, 2014c, p. 10).

This chapter has allowed us to only briefly highlight some of the major changes in social work that have happened in the past decade. In so doing, we have taken an embedded history of the present approach to ask what are the main issues and challenges in social work post-Celtic Tiger that represent our ‘key moments’. We chose four illustrative themes that highlight some of the continuities, discontinuities and challenges. It seems we can say that, to some extent, there has been a transformation in the nature and form of social work in recent times, with some notable discontinuities from the

past, such as the impact of managerialism and the relatively greater power to influence gained by social work's professional status and recognition. Alongside this, some persistent continuities remain in the core nature and form of social work. We hope that our discussion has contributed to each of the questions posed in this book. However, by way of a focused discussion and conclusion, we have chosen here to concentrate in more detail on one particular question: How can Irish social work advance a critical analysis and a progressive politics? In response, we wish to respond to this with a summary of how a critical engagement with the past can indeed advance such critical analysis.

There are a number of messages arising from the themes considered in this chapter that indicate how social work can contribute to the advancement of a critical analysis and progressive politics. With regard to the impact of demographic change, it would seem that it can be through a continuation of research on this topic, and the development of education and training around cultural competence, diversity and the promotion of rights of marginalized ethnic groups and asylum seekers that we can advance a critical approach. This work can build on excellent resources from elsewhere (e.g. Sue, 2001; Laird, 2008) as well as lead on the particular challenges in practice in Ireland, specifically in light of its monocultural and rather unchallenged past experience of ethnic diversity outside the indigenous population.

Regarding the second theme, service expansion, retraction and social work expertise, it seems that a major contribution we can make to informed critical analysis and a progressive politics (with a small p) is to engage more critically and assertively with the historically continuous tension that seems to have occupied too much space in our past: that is, the question of whether we are best to develop as a specialist (child welfare oriented) or generic profession. Too explicit a distinction between both dimensions of social work offers an unhelpful dichotomy that seems to have become part of our received history and thus our present distinction between 'child protection and welfare' and the 'rest'. The genealogical conditions of social work at present, in light of new structures of delivering services for children and families and primary care, offer a great opportunity to lead in breaking down the false dichotomy between supporting adults through primary care/mental health services and working with children/families, embracing and accepting that it is a bit of both (generic and specialist). The challenge is ensuring that we contribute to enhancing and leading on interagency cooperation between the independent Child and Family Agency and the HSE primary care services and embrace a life course approach, whereby we promote and recognize the importance of expertise across the life course for generic practice while valuing the expertise that has already been well established (e.g. in child protection and welfare).

Regarding the third theme, this is an area where we can genuinely attempt to connect wider critical theory (e.g. the impact of neoliberalism, globalization, managerialism, the risk society and so on) and social work practice to help problematize the current developments within this wider societal context. One continuity in the history of social work generally, and indeed a defining characteristic of social work education and training, is the balance required between a form of ‘academic learning’ and ‘practice learning’. How knowledge has been transmitted and applied over time and space is a subject for a paper in itself. Just focusing on the specific problem in the present, adapting to more overt managerial contexts for practice, it would seem there is the possibility to create opportunities for shared learning about the wider dynamics of this context, including a re-establishment of a closer critical relationship between Irish and UK educators and practitioners, wherein the potential for mutual learning and advancement of critical perspectives is immense.

Finally, regarding the fourth theme, we are unsure of the answer to this. It is challenge, because a look back to history shows two elements:

1. An aspiration towards this wider justice role reinforced by the international definition of social work (IFSW, 2014).
2. Evidence that, notwithstanding some excellent pockets of evidence of human rights and social justice practice, at almost every point in its history, this has not been the dominant discourse of social work practice and training.

While appreciating the challenges for the profession during the past decade, we must not be overly ‘rose-tinted’ to deny that we also have to question if enough has and is being done to advocate within the profession, to the wider social and political context, for those most affected by the recession. The overt contexts of utter injustice are alarming and difficult sometimes to comprehend from a 21st-century perspective. Sadly, some scenarios seem too closely reminiscent of periods in the past where the economic circumstances of the vast majority of services users was the most pronounced influence on all aspects of their lives and wellbeing. The IFSW statement of ethical principles (2012) is unequivocal about the responsibility of social workers to seek the redress of such scenarios. Article 4.2.4 stipulates that ‘social workers have a duty to bring to the attention of their employers, policy makers, politicians and the general public situations where resources are inadequate or where the distribution of resources, policies and practices are oppressive, unfair or harmful’. The renewed definition of social work by the IFSW in July 2014 states that:

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment

and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels.

This statement sets a strong challenge for us to aspire towards practice underpinned by human rights and social justice, although we have some way to go before the laudable principles are clearly evidenced in dominant mainstream practice.

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