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SOCIAL WORKERS' PRACTICE EFFECTIVENESS:
AN EXPLORATORY STUDY ON SELF-PERCEPTIONS OF DIRECT
PRACTITIONERS

by

Debashis Dutta
B.A., B.S.W.

A Thesis
presented to the
Faculty of Graduate Studies and Research
through the
School of Social Work
in partial fulfilment of the requirements for the
Degree of Master of Social Work
at the
University of Windsor

Windsor, Ontario, Canada

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ABSTRACT

This exploratory study examined perceptions of practice effectiveness among twenty-five (N= 25) experienced social workers in Windsor and Essex County. The sample was composed of front line social workers with BSWs and/or MSWs in a variety of human service settings. Using a qualitative design, open-ended interviews covered the following aspects of practice effectiveness: defining effectiveness, research, practice issues, organizational settings and the professional context. Since the sample size was small and regionally limited, generalizability of findings was questionable. Yet, recurrent trends and themes emerged which provided knowledge about the subject matter and the impetus for further research.

Major findings revealed that: 1) social workers' primary perception of effectiveness was based on client outcomes and satisfaction with service; 2) social workers' effectiveness was evaluated in informal ways based on quantitative rather than qualitative dimensions of service; 3) most organizational settings did not allow for autonomous and creative practice, thereby potentially impeding effectiveness; 4) most practitioners do not use research in their practice yet understood the need for it; 5) social workers participated in a number of activities to enhance their effectiveness and were cognizant of their individual areas in which to improve; and 6) workers had a number of qualitative criteria by which they saw themselves as effective.

Main recommendations are: 1) social workers must evaluate their effectiveness within and without the context of the multi-disciplinary team; 2) social workers must be more aware and motivated to participate in research endeavours; 3) human service organizations must incorporate a participatory management model to enhance effectiveness; and 4) organizations should encourage and foster the use of supervision, peer supervision and consultation. Implications are directed toward practitioners (both BSWs and MSWs), social work educators, supervisors and administrators.

ACKNOWLEDGEMENTS

This project was particularly interesting in that it challenged my ways of thinking, writing and keeping sane. Would I do this again? Hmmm ... Yet, there are a number of people to whom I owe many thanks and a lot of food.

The understanding that Dr. Wilfred Innerd showed by stepping in as my external reader on only a week's notice is duly noted. Due to a startling emergency, Dr. Richard Lewis was unable to fulfil this role; however, I appreciate his input into the draft. Dr. Hansen, my internal reader was helpful at a time when his eyes needed the rest. Over and beyond the call of duty, Dr. Michael Holosko, my thesis chair gave his guidance, encouragement, dedication and guilt trips.

My classmates and I endured similar pains, and I often made them very aware of my own. In the final weeks, my thesis-pal, Gina Bulcke and I struggled together to get our theses done as our target date for completion turned from May into June and then August. My absolute respect goes to her. Shonna Bannister ensured my presence at convocation.

At Macdonald Hall where I somehow found myself living, among some very special people in the building were Sean Ennett and Heather Weis. Without Wayne Martins, Jayson Chabot, Trevor Lisoy and Eric Appleyard, I might have had to sleep under the bridge.

You're always in some kind of family. They worry themselves sick about you. I owe mine thanks for being there, for being sick for me and for making me sick of them. Ray Dallaire and Randy Shiga anchored me to the real world as I typed or read. Special thanks to Janet Fotheringham for years of friendship despite playing telephone tag once in a while.

To Nadia Polsinelli, I owe the most. Nadia watched the struggles and was always there. I learned about integrity, kindness, and a heartfelt sensitivity. The friendship developed will be treasured fondly.

DEDICATION

Dear Melissa,

Well, this is it. Finally, after an entire year, I am now finished. I recognize how difficult it has been for you because it has similarly been as difficult for me. You know of my passion for learning. And I truly did learn a lot this year through some of the courses, my placement, the jobs I held, from this thesis and just from the people I was around, generally. But there are a number of things I have also learned that go a bit beyond these aspects of my learning and they all relate to you.

There were times when I was not around to answer the phone, there were times I had to cut conversations short and there were times when I forgot the important things. And I will always remember the times I was so incredibly moronic far beyond human comprehension. I think that if it were anyone else, they would not have put up with me. Instead, you were patient and understanding, and above all, forgiving. This year, I have learned the meaning of your dedication and commitment for me.

Although my classmates and I were alone in this endeavour and that we were our own best support system, you too, were an important source for support for me. Specifically, you were there for me, you understood my need to take time away from you and invest it into a paper or an exam and you simply let me be. These are the things I may have taken for granted. I learned that your giving has been the cornerstone for my success. Somehow, "thank you" just doesn't say it all.

You always kept a humorous attitude throughout the year, you recognized the need for the distance and the time I had to commit to get the work done. You kept the idea of "home" warm in my mind. Above all, you looked beyond the present into the future and saw this as a small sacrifice when compared to the overall gains we could acquire. I learned that because you kept things in perspective and added your light-heartedness, my tension was significantly reduced. I learned that you really cared to see me through this year, in one piece, and in strong spirits.

All in all, I learned that we can do things together and that the struggles of the present will enrich our future together. I can not thank you enough for everything you have been to me and done for me this past year, all the sacrifices you made and all the patience you had. Actually, in a mysterious way, I think the distance has brought me closer to you.

For you, Melissa.
With much love,

D.D.

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**Social Workers' Practice Effectiveness: An Exploratory Study
on Self-Perceptions of Direct Practitioners.**

Introduction

Social work is one of the many professions dedicated toward helping people. A central principle of social work is to empower people to promote change in the interactions with their environment (Yelaja, 1986). Like many of the helping professions in North America, social work has a philosophical base embedded in Judeo-Christian morals, values and ethics.

Historically, the profession has evolved from its early beginnings in England in the 1500s with the passing of the Elizabethan Poor Laws (Turner and Turner, 1986), to Europe in the 1600s and then North America in the 1800s. Its organizational evolution has transpired from church-based activities to philanthropic organizations to voluntary and public auspices. Since the profession is directed toward serving client needs, a main element of the profession's survival has been its ability to adapt to the differing needs of clients in a variety of settings and contexts (Lubove, 1964).

Schools of social work were established in the United States in the late 1800s and the early 1900s in Canada (Turner and Turner, 1986). It became apparent from the standpoint of the profession's practice community that it required a specialized grounding in education and training for its survival. The hallmark of its educational evolution has been

its long standing adherence to a direct practice base framed in a flexibly defined working context of practice (Bartlett, 1970).

From about 1950 onward in North America, BSW and MSW programs, due to accreditation standards, the demands of client needs, as well as agency accountability, began to evolve their curricula in the areas of social policy, community organization, program planning, administration, evaluation and research, all of which are traditionally viewed as the indirect practice areas. Concurrently, both the National Association of Social Work (NASW) and the Canadian Association of Schools of Social Work (CASSW) were increasingly concerned with how the profession was accountable to both itself and society at large. The profession's rapid evolution in North America (from 1900 onward) and growth have caused it to both address and concern itself with a number of relevant practice issues, namely: education and training, theories of practice, interventive approaches, and practice relevance.

Throughout this process however, there has been minimal effort directed toward examining how the profession has progressed, the obstacles it has faced, and the successes it has gained. In this regard, the profession has not systematically assessed practice relevance, that is, whether or not practice is effective, or how effective it has been. This issue has confounded and plagued both educators and

practicing professionals. Indeed, the overriding assumption has historically been that the profession is relevant, meaningful, and can be evaluated. The extent to which this assumption has merit has yet to be determined.

Joel Fischer, in his landmark study entitled, *The Effectiveness of Social Casework* (1976), cast a shadow of consternation about whether social work was effective, and essentially caused an identity crisis for many in the profession. Following a thorough examination of the literature that evaluated social programs and practice activities, Fischer came to the resounding conclusion that social casework (direct practice) was indeed not effective. Essentially, he scrutinized the profession and its work, and then ascertained that whatever professionals were doing under the auspices of professional social work truly had no tangible effects on the people's lives they served (p. 71). Furthermore, he asserted that not only were social workers ineffective, but that clients may be better off if they did not seek services from them (p. 139).

As a result of Fischer's work, some members of the profession began to question their practice activities and intervention, in short, their relevance, importance and viability. In an effort to regain professional status and recognition, social work began to produce research studies about their programs and past activities moreso than at any time in the past (Thomlison, 1984). However, the focus of

these efforts were not directed at assessing practice effectiveness but more so were demonstrated research initiatives to prove the efficacy of social programs.

The consequences of this phenomenon effect three main entities: the profession, its workers and clients. First, with regard to the impact upon the profession, it must be noted that all professions are unique and are based in specific knowledge. Knowledge, in turn is ideally driven by research. Through the reciprocity of the exchange of knowledge and research, the profession or field gains autonomy. Social work research, albeit abundant, is not sufficiently strong to maintain autonomy. In this regard, practice effectiveness studies have been few in the professionally based literature. Consequently, social work lacks the necessary research and knowledge to enhance itself as credible in the realm of the profession. Its autonomy is not actualized which continues to plague its own status as a profession (Estes, 1992).

Second, social workers do not use a common set of criteria to evaluate their practice effectiveness (Hudson, 1988). Professional development is thus hampered by the lack of having such criteria to assess practice effectiveness (Bloom, 1977). Studies such as Fischer's present the assumption that the profession is not effective. The fallout of this points not only to the fact that people often perceive social workers as ineffective, but there also results for the

social workers themselves, a loss of value for their career, a lack of interest in the work and an apathetic attitude toward the profession (Hanrahan and Reid, 1984).

Third, there is a consequence related to the clients social work serves. It is deemed an ethical tenet of the profession that all people have the right to demand effective social services from competent social workers (Tropp, 1974, p. 141). Since the profession, at this point, has no means of evaluating practice effectiveness, there is no real standard for measuring the effects of social work practice interventions aside from the number of clients served. In this regard, current measures of relative effectiveness such as caseload numbers, supervisory sessions, preventative services, budgetary constraints, number of services offered, client perceptions of effectiveness, efficiency criteria, etc., do not in any way reflect the qualitative aspects of practice effectiveness. However, they are frequently used by funding bodies, regulatory bodies, human service organizations and society as the "best estimators" of whether or not social services and subsequently social workers are effective.

Social work has borrowed elements of other professions and fields of study in its development (Estes, 1992). Many of its concepts, terminology and theoretical bases are rooted in biology, psychology and sociology and other fields. As such, there has been [until the last ten years] little significant contribution to the profession by its own members. Much of

the research which has been done in the field of social work evaluation has been done by those with qualifications which are not related to social work. As a result, social work may benefit from establishing its own criteria to evaluate effectiveness.

Purpose

Professional autonomy is directly related to a profession's ability to amass a body of indigenous empirical and theoretical knowledge (Estes, 1992). Social work lacks the quantity, the quality and significance of such research. It is through the process of research that more experience and expertise are gained to add to knowledge. Knowledge, in turn, adds to the profession's theoretical base. Therefore, the stronger and richer a profession's research activities, knowledge and theoretical bases are, the more credible and autonomous the profession becomes.

In the realm of social work education, schools have been tending toward the inclusion in their curricula, courses on: program evaluation, single systems designs, treatment effectiveness, and accountability-based administrative practice. Despite these trends toward, there still are no common consensus agreements for defining the parameters of practice effectiveness. To date, the haphazardly created evaluatory criteria in the curricula are minimal, have not been universally agreed upon and are not competency-based.

Although there have been numerous studies of the effectiveness of social work (Fischer, 1976; Goldberg, 1980; Kane, 1974; Macdonald et al., 1992 Reid and Hanrahan, 1982; Rubin, 1985; Sheldon, 1986; Thomlison, 1984;), the research has ignored the effectiveness of direct practice as perceived by those who deliver it. Practice based on studies of effectiveness of social workers from their point of view may add further to the knowledge base and enhance professional autonomy because effectiveness criteria are then created for social workers by social workers.

This study seeks to explore indicators of social work effectiveness as perceived by practitioners of social work in Windsor and Essex County. Specifically, indicators include: levels of satisfaction, perceived indicators of effectiveness and desired indicators of effectiveness. Semi-structured, open-ended interviews were used to collect data with a sample of practicing front-line social work practitioners. The study purposes were: 1) to understand the perceptions of social workers' effectiveness; 2) to determine whether social workers perceive themselves as effective; and 3) to define a set of criteria which constitute practice effectiveness. The implications of this study are directed toward: practitioners and supervisors in HSOs and social work educators who may utilize and refine the criteria according to their needs.

Rationale. There is little evidence in the literature with regard to the self-perception of social workers'

effectiveness. Criteria used to evaluate social workers' effectiveness are largely based on client outcomes, recidivism rates, intake numbers, frequency of service statistics, and others' perceptions of social workers' effectiveness. The problem is that in all of this, the spirit of social work is lost. Social work needs to establish for itself the criteria which need to be used to evaluate effectiveness and whether these are conducive to the profession's purposes for enhancement and recognition.

The process and results of this exploration may add to the research on social work effectiveness. The link between social work practice and research can be further enhanced by contributing some data about defining effectiveness. Social workers, in learning about themselves might hopefully renew their sense of self-worth within the profession and give to the clients a form of service that is effective to their client and seen as reflective of the roots of social work.

The study appears timely in that there has been no research in the literature that identifies precisely how social workers perceive their effectiveness. There has been a lack in the literature of evidence of social workers assessing their own practice effectiveness. The study therefore, fills a distinct void by adding to the literature on social work practice effectiveness. However, the perspective taken here different in that effectiveness criteria is seen from the social workers' point of view.

This study also purports to focus on the current stresses that social workers face with regard to their jobs, the current economic climate, the direction the profession is taking and their organizational contexts. An exploration of these issues may lead to further insights on how social workers see themselves as effective vis-à-vis the external environment.

Concepts/Definitions

A profession is a form of status that necessitates having a systematic body of theory, an authority which is recognized, a regulatory code of ethics and a significant culture with specific norms, values and symbols (McLaughlin, 1986).

Human service organizations (HSOs) are those organizations whose primary task is to protect, maintain, or enhance the personal well-being of individuals by defining, shaping or altering their personal attributes. They work directly with people and are mandated (Hasenfeld, 1983).

Social services are those components of social work which form the network of institutions and agencies that provide services not directly related to income (Turner and Turner, 1986).

Social work is that profession whose interventions are directed toward the interface of the individual and the environment or at the problems of living generated from the "person-in-situation" interaction and whose process entails looking at the broader context of practice (Compton and Galaway, 1989).

Direct practice is face-to-face interaction with individuals, families, groups and communities, using interventive theories. This is different from indirect practice in that it is not closely related to policy planning, teaching and research (Yelaja, 1986).

Social workers are those professionals who are concerned with the transactions between people and their environments in relation to individuals, families, groups, communities and institutions. The primary focus of social workers is to seek changes in the environment to promote better functioning for all (Garvin and Seabury, 1984). For the purposes of this study, social workers will be those individuals who have earned the BSW and/or MSW degree(s).

Recognizing that social work is a very diverse activity entailing various types of work with various types of client populations, effectiveness can be defined as whether or not intended aims of service provision are achieved (Cheetham, Fuller, McIvor and Petch, 1992). In this study, self-perception of effectiveness will be the key to determining criteria and indicators of practice effectiveness.

Review of the Literature

The effectiveness of social work practice is deemed to be one measure of the profession's efficacy. In order to understand how social work evaluates its own effectiveness, this section reviews the literature on social work effectiveness. The review is organized with a view to: 1) exploring the concept of effectiveness within the realm of social work; 2) examining the contexts in which the evaluation of social work effectiveness takes place; and 3) describing the current trends and issues in regard to assessing the effectiveness of direct practice.

I. Conceptualizing Effectiveness in Social Work

Defining effectiveness. Social workers are constantly pressured by the demands to evaluate their own practice (Fuller and Lovelock, 1987; Siman, 1975). Social work has entered an era which is challenged by the high costs of service provision, budgetary constraints, increased service demands, demand for accountability, public criticism, and the demand for evidence of effectiveness (Briar, 1973; Haselkorn, 1978; Newman and Turem, 1974). From one perspective, this seems to diametrically contradict the benevolent, charitable and well-intentioned initiatives and beliefs from which social work historically emerged.

Attempts to define effectiveness in social work lead one directly to questioning the overall accomplishments of the profession and its members. Therefore, the extent to

which social work activities and interventions have attained their specific goals appears secondary in importance (Gummer, 1988). Thus, effectiveness can be deemed as a measure of the intent of an activity. Since its members work daily with peoples' lives, it is difficult to render an objective measure about whether the quality of life of a client has been enhanced through social work intervention and activities.

Currently, social services, like other services (e.g. education, health care, etc.), are not evaluated according to how effective they are, rather whether or not they actually are effective. Thus effectiveness here, is used dichotomously to justify service existence rather than describe social work activities which can be scrutinized (Gummer, 1988). In short, since social work exists primarily in the public domain, the profession has evolved toward proving that it is effective so as to gain increased public financial support (Siman, 1975).

Since social work practice is variously defined and operationalized (Cheetham, 1992), it follows that the notion of effectiveness may be similarly difficult to define with any degree of consensus (Fuller and Lovelock, 1987). Cheetham (1992) noted the difficulties in defining effectiveness as being: 1) social work tasks have a varied range requiring objectives that contradict one another; 2) social work is a world of contested concepts, so effectiveness to one sector may not be the same to another; 3) the activities of the profession are not made up of structured units which are

easily identifiable and trackable; and 4) the language itself is not indicative of what social work is. Further, he stated that it is due to these issues that the profession has developed so that "the effectiveness of much day-to-day practice will be . . . unmeasurable" (p. 273).

Another perspective of effectiveness is presented from the standpoint of the service or program provider. This is determined by the provider's need to meet efficiency criteria. According to Gummer (1988), "a major criterion of program effectiveness has been the extent to which the service degrades the recipient" (p. 261). Essentially, if a client comes to a social worker for assistance, and a client perceives their status as unchanged, then the worker is deemed ineffective. Thus, in this regard, effectiveness can be conceptualized as the extent to which proposed interventions help a client reach goals in less time and with more positive results than comparable alternatives (Rosenberg and Holden, 1992). Thus, effectiveness may also be defined as a process by which a service is delivered that effects the outcome (Cheetham, 1992). Unfortunately, there have not been any consensus criteria for what defines service effectiveness in social work practice (Haselkorn, 1978; Rosenberg and Holden, 1992; Siman, 1975).

Realizing that there are multi-faceted interpretations of what effectiveness in social work is, it stands to reason that social workers are seemingly exhausted in trying to find one

way to evaluate effectiveness and may abandon the effort (Cheetham, 1992). Thus, the profession must come to an understanding that it can in fact be evaluated through a long process (Cheetham, 1992). As well, credible effectiveness research must arise out of some common effectiveness criteria of social work practice (Haselkorn, 1978). Social workers must also come to the understanding that "the identification of effectiveness is separate from but linked to the practice of evaluation" (Cheetham, 1992, p.282).

Research on social work effectiveness. There have been a few empirical studies done which have reviewed a number of research studies on the effectiveness of certain programs and social work interventive activities in recent years (Fischer, 1976; Macdonald, Sheldon and Gillespie, 1992; Reid and Hanrahan, 1982; Rubin, 1985; Sheldon, 1986; Thomlison, 1984; Wood, 1978). Generally, these reports selected evaluation and effectiveness studies of practice and programs and have made conclusions about whether or not social work was effective. These can be conceptualized according to whether or not social work practice and programs were positive. Simply put, if programs are considered ineffective, then the social workers who implement them are similarly ineffective.

There have been some studies which have found social work to be ineffective, most notable was Joel Fischer's (1976) book, *Is Social Casework Effective ?* (Fischer, 1976; Wood, 1978). These have focused on activities in specific settings

and found that clients' conditions had not significantly improved on the whole, thus casting social work intervention as not achieving its goals. Two pervasive themes underlined such criticisms of the profession.

The first of these showed that the methodologies used in the evaluation of practice were flawed. Specifically, there were non-scientific approaches to evaluation, and in short, the program evaluations were not necessarily conducted according to social science research principles (Knott, 1986). The second criticism relates to generalizability. Social work programs and their clients are highly idiosyncratic and non-generalizable and the extent to which this issue undermines research credibility was very apparent. For example, the profession was composed of diverse activities and there is not one general method to impose intervention and evaluate effectiveness for the entire profession (Macdonald, Sheldon and Gillespie, 1992; Rubin, 1985). Therefore, the question must be posed according to which interventions are effective with which clients and what problems (Rubin, 1985). Since there are a number of highly differentiated problems of social work intervention, each with their own bodies of theory and research, there are substantially different patterns of different results (Macdonald, Sheldon and Gillespie, 1992). These different patterns can not be generalized to all of the profession's other activities, but only applied to those specific activities for which they were defined and derived.

Positive outcome studies on the effectiveness of social work came after 1973 (Reid and Hanrahan, 1982; Thomlison, 1984; Sheldon, 1987) when new approaches to research and practice surfaced in the literature (e.g. single subject design). Thus, Reid and Hanrahan (1982) refined Fischer's original question, "Is casework effective?", to the question, "How effective is a particular type of intervention with a particular type of client?". They found many studies evaluating the effectiveness of social work intervention to be valid and contributory to the generalization that social work is indeed effective. Rubin (1985) found the same conclusion in his report on a number of studies of practice effectiveness in the USA.

Social work researchers, despite facing much criticism from the field and also acknowledging the difficulties involved in this process [of defining effectiveness] have continued to seek approaches to measure intervention effectiveness (Jenkins, 1987). For instance, Hopps (1985) noted that the profession is making gains toward its own capacity for evaluating practice effectiveness. More than anything, the link between research and practice is at least beginning to be forged. Further, those in the field of research are asking those in the field of practice what it is they require in order to become effective and in turn enhance their effectiveness (Meyer, 1992). Practitioners as well, are beginning to realize that to become recognized as

professionals, belonging to a profession that performs effectively, require an empirically-supported knowledge base (Meyer, 1992). Thus, there are some elements of social work which are aspiring to consolidate research and practice thus making those specialized fields increasingly effective.

In the past 20 years or so, the profession has also been generating a body of knowledge which lends support to its claims that it is effective for a large range of interventive methods for addressing psycho-social problems (Reid and Hanrahan, 1982). Although there can be no generalizations made from specific interventions to the entire professional goal of practice, there is a beginning realization that there is some rather convincing research evidence related to practice effectiveness (Goldberg, 1987).

In addition to research which extols or criticizes practice effectiveness, the issue of understanding the relationship between practice effectiveness, research and the activities of practice are underpinned by some universal themes. In regard to the relationship between research and practice, several authors have noted that the strength of this relationship must be maintained and fostered (Goldberg, 1987; Hopps, 1985; Meyer, 1992; Rubin, 1985). Further, it must be interactive and marked by mutual respect (Hopps, 1985). Specifically, researchers and practitioners need to work together to develop criteria which are mutually consented upon as relevant, appropriate and essential in order to

enhance social work effectiveness (Goldberg, 1987). Social workers must take a more active part in evaluating their practice, thus adding to their own interests in their work as well as assisting in contributing to the body of empirical literature (Sheldon, 1986). There has also been the understanding that research on social work effectiveness has been haphazardly arranged, directed, compiled and disseminated. The linking of practice and effectiveness research not only unites factions of the profession (Meyer, 1992; Wood, 1978), but also contributes ultimately to focusing on serving clients with more effective means of interventive strategies (Hopps, 1985).

Another theme noted in Sheldon's (1987) assertion is that even though social workers have gained insight into how to make their individual practice more effective, the members as a whole have not participated in incorporating these efforts in their day-to-day practice. As such, there must be a realization, on at least a conceptual level, that effectiveness research needs to be directed at goals, methods, validity, effects, intervention, activity, and follow-up (Jenkins, 1987). Social work has been charged with ameliorating social problems and its goals are directed toward these ends, however, they are not within the realm of social work to eradicate (Jenkins, 1987).

II. Contextualizing Effectiveness in Social Work

It is important to understand that the profession of social work exists vis-à-vis the broader environmental context. To gain a more complete understanding of where social work exists in relation to its environment, it becomes important to examine the main contexts in which social work is practiced.

Multi-disciplinary context. When examining social work in the face of other helping professions, it becomes apparent that there are more similarities than there are differences (Giannetti and Wells, 1985; Cheatham, 1987). Generally, all helping professions have a similar philosophy or mandate that is oriented toward helping people adjust to their situation or environment in some form or another. Such help is directed at improving an individual's quality of life, or enhancing one's growth and development.

It has been noted that during times of economic constraint, there are frequently initiatives put forward in order to gather and unify the members of the helping professions (usually in one multi-disciplinary unit) so as to better serve their clients, and cut costs at the same time (Gibelman, 1993). The rationale behind this type of approach is based on the notion that a collective force is more effective than any singular one. Further, it is deemed that there is no single professional group that is fully equipped to prevent or to alleviate problems that clients face, thus

the more groups (helpers) involved, the better. In an interdisciplinary setting, social work effectiveness is usually enhanced, if there is a focus toward having the social workers' professional peers (e.g. psychologists, educators, health care workers) assist in the evaluation of the social worker's effectiveness (Radin, 1992). One problem in this however, lies in the perceived mistrust that members of dissimilar professions may have for one another in a particular setting (Gibelman, 1993). However, since professional affiliation does not in any way predict the therapeutic activity or outcome of an intervention (Giannetti and Wells, 1985), it is generally agreed upon that there must be an inclusion of differing professions' input into social work effectiveness (Radin, 1992). Therefore, there must be more research about the place of social work among the helping professions (Cheatham, 1987) in order to gauge its relative practice effectiveness.

Organizational context. Most social workers practice within the context of some organization mandated to deliver services to a particular client population. The worker, as a part of this organization is expected to incorporate within him or herself the goals of that organization, and present him or herself professionally as the agency's policies dictate. As one may surmise, there may be conflicts between the worker's professional, personal and organizational ethics that may limit his or her effectiveness.

At the outset, it must be emphasized the organization's perception of effectiveness may be very different than the worker's (Clare, 1988). For instance, workers in a human service organization (HSO) may complain that managers' demands for productivity and efficiency are too taxing, and managers in turn, may complain that workers do not understand organizational problems that the agency is constantly facing (Weiner, 1988). Because there is no agreement among the differing notions of effectiveness, the entire effort of working cooperatively to be effective is neutralized (Briar and Blythe, 1985).

Further, there is no tangible concept of what defines effectiveness in an organization, so worker effectiveness depends on, and is constructed by the managers of the agency (Edwards, Faerman, and McGrath, 1986). These criteria are defined according to funding goals of the agency's structure, tasks, and functions. Generally, managers in HSOs package their programs according to funding demands and, consequently end up stretching their mandates to meet these taxing demands. Further, there is increased pressure on HSOs to become more accountable and relevant (Lindsey, Wodarski and Greaves, 1986). Therefore, agency managers need to prove that social workers employed in their agencies are effective, and this is where a dilemma arises. Sometimes, managers, under the pressure to prove that agency is effective, will show evidence of effectiveness without realizing that social workers may not

see their intervention as such. Assessing effectiveness becomes further complicated when there is a desired change in a client's development while working with the agency [if the client does undergo some change, is this change attributable to that client or the worker's intervention?]. As a result, it may be difficult to ascertain whether a change was the direct result of the worker's intervention (Hudson, 1988).

The emphasis on accountability has cast further confusion about what organizational effectiveness is (Gitterman and Miller, 1989). The worker is placed in a position of being accountable simultaneously to the client, the funding body, and management. Measurement of an organization's effectiveness is thus, the total measure of these accountability avenues.

Organizational realities. Social workers offer concrete and direct support which can assist clients in the most appropriate and beneficial manner. However, one must consider the reality that an organization may impose limits on a social worker's effectiveness (Tropp, 1974). Unfortunately, because of these organizational constraints, a client may not experience the social worker's actual effectiveness. Such constraints may include inhibiting practice activities, the lack of peer coordination, and/or the utilization of binding interventive activities with clients.

By the same token, the overall performance of an HSO is a direct result of the behaviours of its direct service

workers (Moore et al., 1991). One dilemma for this reality lies in the fact that the organization, on the one hand, relies on its workers to provide effective service to clients. Yet, on the other hand, the same organization restricts activities of the social worker which may actually prove to be quite effective. Thus, the organization will still appear to funding and regulatory bodies as being effective. However, it is the social workers employed by the agency who will feel as though their true resources in being effective will remain untapped.

Organizations are not overly involved in evaluation activities at the present time that assess effectiveness of direct practice (Doueck and Bondanza, 1990). Additionally, there are no efforts to incorporate teaching or training programs in organizations toward these ends. Therefore, organizations have no guidelines or standards for practice effectiveness. In turn, many social workers have no indication as to whether their interventive activities are fundamentally promoting any tangible change.

Lightman (1982) sees social work moving toward an organizational trend of unionization. He perceives social workers uniting in a common force with one sole purpose - professional recognition. Lightman asserted that through unionization, social workers will be involved in a process which brings together not only common concerns about the field of work but as well, the concerns about how to be more

effective. Social workers will have a common ground from which to work in terms of recognizing the need to be effective, both individually and as a whole. Unionization is seen therefore, as a conduit to link effectiveness in the profession as a whole, to all of its members.

In the current economic climate, there is a sense that social work must strive not simply to succeed in working with peoples' lives, but to simply survive so as to be able to provide some service. One model for survival stems from organizational effectiveness, based on enactment, effectiveness, efficiency and ethics (Baum and Parihar, 1984). The organization is seen to espouse both a bureaucratic sense of existence to simply cope with the economic issues faced and a social work nature grounded in the basic roots of effectiveness and ethics. Models adopting this framework are predominant in the literature and organizations use these to guide practice.

Implications for management. In relation to the issues raised above, there are a number of practical suggestions for management to improve worker effectiveness. One important aspect of effective management is the use of supervision (Clare, 1988). To enhance supervision, the role of the supervisor in relation to the worker and organization must be established and encouraged. The focus of supervision as envisioned by Clare (1988), is to have the practitioner set the agenda, rather than the manager. The supervisor ensures

that the practitioner gains the necessary knowledge and has the appropriate attitudes to work with clients effectively. Further, for the supervisor to perform effectively, there needs to be departmental guidelines set to establish the tone for supervision (Beausejour et al., 1988).

Management must also encourage workers to evaluate their own practice effectiveness (Briar and Blythe, 1985; Hudson, 1988; Weiner, 1988). Training methods are suggested so that social workers may evaluate themselves as such (Hudson, 1988). Legitimate support must be given to social workers by management in that self-evaluation becomes a necessary as well as beneficial aspect of the worker's professional development (Briar and Blythe, 1985). Worker developed contracts are an example of such initiatives (Weiner, 1988).

There is also the suggestion that management should also act as the moral agent, encouraging workers to direct their own practice effectively and efficiently, yet maintaining the structure of the agency mandate and the social work code of ethics (Lewis, 1988). In this sense, a manager provides an environment which fosters workers to link their jobs and fit them with the organizations in which they work (Weiner, 1988). An agency can also foster interpersonal networks within in order to enhance personal effectiveness (Gitterman and Miller, 1989). Such networks serve to assist workers communicate within their peer groups in order to discuss cases, interventions, and/or stresses.

Finally, management may actively and collaboratively participate in the development of social work interventions in the HSO. This is deemed to enhance worker satisfaction generally and encourages worker effectiveness specifically (Malka, 1989; Sarri, 1982). These initiatives are developed to encourage teamwork, group decision-making and group problem-solving skills with both management and workers (Malka, 1989). Thus, work tasks and allocations should be defined among staff and management cooperatively so that effectiveness can be enhanced from worker to organization and back (Hudson, 1988). Some managers and supervisors have historically been negligent in fostering a climate of organizational and worker effectiveness. The above literature clearly suggests that they have a vital role to play in this regard.

In many hierarchical HSOs, a worker faces answering to an unseen manager who in essence, does not know the particulars of the worker's cases (Malka, 1989). The worker often, in this process, feels lost and isolated. Thus, HSOs seek employees who will work independently within the mandate of the agency, and recognize the need for accountable and effective service (Sarri, 1982). However, there is a need for some principles that managers should follow to avoid behaviours which may harm the providers of an organization's services and effectiveness - the workers (Lewis, 1988).

In this regard, the essence of the issues about organizational effectiveness can be encapsulated in the following argument by Gitterman and Miller (1989):

"Effectiveness in organizations depends much more upon behaviours appropriate to objective circumstances than it does on indulging in our personal dispositions. The need to be valued and liked sometimes serves to induce and reinforce submissive behaviour. To depend primarily upon others for affirmation and approval bestows enormous power on them. If authority devalues and exploits the clinician, a crossed transactional fit emerges. Fear of being devalued and exploited also serves to induce and reinforce submissive behaviours. To be anxious and fearful of others, at best limits professional effectiveness; at worst it sacrifices self-respect and dignity."
(p. 158)

Occupational context. Within the profession of social work itself, there are many activities in which workers partake. This sub-section of the review will examine what effectiveness means to social workers and others, what prevents effective casework, and what needs to be done in order to enhance practice effectiveness.

Generally, social workers perceive that they are effective in their work with their clients (Grinnell Jr. and Hill, 1979; Grinnell Jr., Kyte and Gorsuch, 1980; Meinert, 1975). However, as compared to the perceptions of other professions, social workers do not see themselves as effective as they really are (Grinnell Jr. and Hill, 1979). Such perceptions emanate from a number of factors including agency support, financial gain, personal self-esteem, job satisfaction and client success (Meinert, 1975). Further, if

a social worker perceives him or herself as effective interpersonally, then there is a greater likelihood of that worker's perception of effectiveness being carried through to the professional realm (Jackson and Ahrons, 1985).

Usually, social workers enter the profession based on idealistic reasons to help people (Abell and McDonnell, 1990; Walz, 1991). One aspect common to most social workers is their ability to relate to other persons by using their own personalities as a conduit (Glicken, 1980; Rhodes, 1979; Wetchler, 1989). It is through these personal characteristics, attitudes and demeanour that social workers are able to assist people in the problems that arise in day-to-day practice.

There are basically two routes a client can take in the process of intervention - failure or success. Either way, a worker has feelings related to both these routes that affect his/her perception of effectiveness. If a client fails or there is some pessimism about a client's progress in the view of the worker, then the worker may feel as though his or her therapeutic skill is not efficient in helping the client ameliorate problems in living (Fortune, Pearlingi and Rochelle, 1992). On the other hand, if a client seems to be progressing well, or if the client succeeds, then the worker may have reactions consisting of joy for the client's success and/or confidence in his or her own effectiveness in being a professional helper. Thus, the perception of self is another

way of determining the effectiveness of individual direct practice intervention.

Barriers to effectiveness. Social work effectiveness is hampered by a number of barriers, the first of which is training. Specifically, most practitioners who receive education or training to evaluate their effectiveness do not do so (Richey, Blythe and Berlin, 1987; Rosenblatt, 1968). With inordinate casework and paperwork demands typical of many direct service professionals, the time, energy and resources spent on evaluation are seen as unnecessary (Brown, 1984).

There is also the issue related to the societal perspectives of social work. Generally, society perceives social work as ineffective, therefore, social workers internalize these attitudes into their personal and professional work, and thus become ineffective (Grinnell Jr. and Hill, 1979; LeCroy and Rank, 1987; Meinert, 1975). Society sees social workers as paid professionals, thus they should be able to handle the stresses associated with their jobs (Gibson, McGrath and Reid, 1989).

Finally, there is the issue of the use of the self in effectiveness research. In this regard, social work often ignores the worker's own personality and use of self as determinants of practice effectiveness (Jackson and Ahrons, 1985; Rhodes, 1979; Star, 1979). Ironically, social work uses the self as the basis of effective casework practice and this very same concept is ignored by the profession when it comes

to evaluating casework effectiveness. In turn, there may be a sense of helplessness and hopelessness (Glicken, 1980; Walsh, 1987) that social workers perceive about their work with clients, in that, they end up feeling that their work with clients not only is, but will be ineffective [a self-defeating prophecy]. Additionally, there are limited opportunities for social workers to learn about the effects of their interventions and themselves on clients (Kurland and Salmon, 1992; Mokuau, 1987; Richey, Blythe and Berlin, 1987; Star, 1979).

There also needs to be a realization and an acceptance as well as the fostering of the fact that the worker's personality does indeed play an important part in the effectiveness of direct practice (Glicken, 1980; Jackson and Ahrons, 1985; Star, 1979). Through these processes, the social worker becomes appreciated not for the skills and knowledge gained with regard to interventive strategies but the real means that the worker uses to incorporate these methods into his or her own self and work. A social service agency will obtain higher worker effectiveness and thus organizational effectiveness when it recognizes the need for worker independence, self-esteem, acceptance and support (LeCroy and Rank, 1987). When administrators appreciate and recognize the social worker, the organization, the worker, and the clients usually benefit because of the enhanced effectiveness of the social worker.

III. Current Directions in Effectiveness

With regard to enhancing effectiveness in social work, there are a number of areas in which social work has taken initiatives. These initiatives have taken the form of practice methods, educational trends, evaluation activities and professional issues. This section will examine the overarching essence of these initiatives.

Practice methods. Although the point may be debatable, the literature concerns itself with the fact that the profession of social work has not yet achieved formal status as a recognized and respected profession (Calvert, 1970). Practice can most certainly be enhanced if the profession can gain this status because there will be a recognition that social work is a profession that does have a legitimate role in society. In practice, therefore, there has been the tendency to absolve the social worker from any counts of ineffectiveness (Tropp, 1974). In such instances, the client is then held responsible for not improving their situation.

If a social worker can help a significant number of people cope more successfully with crises and "uncompromising" situations, then it is deemed that that worker has been both accountable and effective (Tropp, 1974). The worker, in this sense has criteria for practice effectiveness which are not spelled out. Certainly, in this regard, there is an ideal to be reached which is feasible and possible. However, there needs to be delineated criteria in place to make the ideal

into a set of objectives and strategies which are tangible, workable and evaluatable.

The evaluation of social work practice must also be an inherent and standard procedure for practicing social workers. Evaluation provides confirmation for the existence of a particular intervention as well as the rationale for either maintaining it, discontinuing it, or enhancing it (Rosen, 1992). Peers on equal levels, may be a significantly appropriate resource to assist in the process of developing such criteria of practice effectiveness (Weinbach and Kuhener, 1986).

Effectiveness criteria for practice are seemingly important indicators to show the relationship between client participation in the helping process and the effectiveness of the practitioner (York and Itzhaky, 1991). What must develop is a process by which such criteria are indicated in the realm of practice and then identified in other social work settings. Through this, there can then be an established common set of criteria by which social workers can measure their overall effectiveness.

Education. The needs of the organizational and practice realms with regard to effectiveness in social work clearly evolve from a consideration of education and training expectations. There is continual pressure on universities to meet the demands of the agencies in their respective communities to produce students who have the capability to not

only evaluate their own effectiveness, but also to evaluate the effectiveness of the HSO. As a response, many social work educational curriculae offer graduate courses in program and practice evaluation (Gowdy, 1987; Taylor, 1993; Thyer, 1989).

One approach being taken is an "enquiry and action" approach (Taylor, 1993). This problem-based learning encourages students to solve problems in a manner which is professional, ethical, effective and efficient. Its underlying theme rests in its empowerment of social work students to gain autonomy by engaging in the evaluation processes. Through the utilization of the "enquiry and action" approach, not only is there the potential for the production of social workers who evaluate their own practice effectiveness, but there is also established the beginnings of a link between research based activity and practice, thereby creating a path toward the professional acceptance of social work (Taylor, 1993).

Social work education and training must also provide an environment where research oriented practice is seen as a possible area of expertise among social workers, rather than an aspect of a profession traditionally seen as fearful and peripheral (Parsloe, 1990). Teaching the evaluation of social work effectiveness must occur, while bridging the responsibility of evaluation with both workers and agency management. What needs to occur in the field of social work education is training of social workers to recognize the

importance of effectiveness evaluation based on empirically based research methods that are pragmatic and conducive to day-to-day practice realities.

The educational environment must also be one where research is seen as a realistic and tangible element that social workers can learn to develop and master. Confidence in social workers must be conveyed in the assertion that they can indeed do research (Taylor, 1993). The social worker must be encouraged in a supportive environment, to espouse the many facets of the profession so that a repertoire of approaches based on research oriented activity can be extracted, identified, proven effective and fostered (Grinnell Jr., 1994).

Evaluation activities. In the realm of the profession of social work, the use of the single-systems design is widely accepted as a method to evaluate the effectiveness of social work practice (Hudson, 1988; Peterson and Anderson, 1984). By adopting this method, that the profession of social work may utilize this approach in many of its direct practice activities and thus, better meet the needs of their clients, and can in turn, strive to become more effective. Another suggested method to assess effectiveness has been to rely upon peer evaluation. Ideally, peer perception assesses effectiveness based upon mutually agreed upon criteria and indicators of practice effectiveness (Radin, 1992). However, what needs to be done in this regard, is for social workers to

discover the criteria they wish to be included in such a peer monitored and administered method.

Finally, within this professional context, there needs to be a united and collaborative effort with regard to evaluating effectiveness by social work practitioners, researchers and educators. As long there are systems in place that will protect the client from unqualified and unprofessional practice, Giannetti and Wells (1985) claim that a pluralistic system of care is most effective. Thus, practice effectiveness is professionally enhanced when there are efforts in place which stress the importance of collaboration both between and within professions (Radin, 1992).

Professional issues. Social work will also need not only to be able work amongst themselves, but also with other professionals not in social work and as well, in partnership with researchers and educators (Parsloe, 1990). These liaisons will ensure a process of communication which results in understanding the role of social work as seen by a variety of perspectives. The culmination of these efforts could result in formulating criteria by which the effectiveness of social work activity could be evaluated. Working within a variety of resources as such, enables social work to be placed in the "environmental chasm" of helping and as the natural liaison to other professions (Baum and Parihar, 1984).

Social workers need to be able to reconcile struggles between their personal humanitarian concerns, their

professional obligation and ethics, the policies of the organization, and the pressure to produce research to prove, justify and guide effective practice (Calvert, 1970). Performance enhancement in social work agencies requires social workers to practice in order to maximize the performance of the organization (Moore et al., 1991). In this regard, service effectiveness is heralded as the demonstrated criteria for the efficacy of social work (Doueck and Bondanza, 1990). The models for organizations and practice to follow are well outlined and evidenced, however, what remains is to implement these procedures in a research based orientation (York and Itzhaky, 1991).

Perhaps the theme of future effective practice can be encapsulated in Kane's (1974) assertion:

"At present social work is called to account by outsiders to prove its effectiveness in terms of such measurable indicators as a decline in delinquency, decreasing divorce, or even reduction in welfare rolls. Although social workers point out that such measurements are not always appropriate to their goals and that the profession's process is so individualized as to defy a single indicator of success, they are often helpless in providing alternative ways to evaluate their activities." (p. 417)

IV. Summary

Generally, social work has been participating actively in the evaluation of its own effectiveness. There have been numerous and varied initiatives in this regard. The efforts have been in place for at least three reasons: 1) the age of accountability; 2) the need for societal recognition as a

formal profession; and 3) the need to establish the link between practice and research.

In times of fiscal austerity, when cutbacks are the predominant method to save money, the need to prove that a service is effective becomes paramount. Social work is largely a publicly funded activity. There is a need for the government to spend taxpayers' money appropriately and responsibly. As such, those programs and services which the public and government feel are not serving the best interests of society and public money are the ones to be cut.

The profession of social work is largely affected in this endeavour. Increasingly, social work is attempting to prove that its services and programs are indeed serving the communities and that taxpayers' money is being put to good use. Therefore, the profession is attempting to prove that not only is it effective, but that the profession is certainly accountable to the public which supports it.

Effectiveness studies are needed to prove the profession's efficacy. Social work still remains a semi-profession. One of the ways that social work can acquire the formal recognition of being a profession is through the provision of effectiveness studies. Studies on the effectiveness of social work in the various activities of which it is a part, lends its support for the growth of the profession as a whole. Additionally, proven effectiveness in one sector of the profession adds to the entirety of the

profession, a sense of becoming that much closer to attaining professional status. As well, proven methods of intervention can be adopted by other social workers in their own interventive activities with clients.

The activity in which social work has engaged in relation to practice effectiveness has been significant and the reasons are important not only for the profession's growth and development, but as well, for its very survival among the helping professions. However, the research has been stimulated in ways that have largely arisen as a result of threats to the profession rather than the growth of the profession. Since these threats come from outside sources and since social workers are not heavily involved in research, there may have been a loss of focus as to what social work effectiveness represents. The bulk of the literature demonstrating the effectiveness of social work has been based on the perceptions of others except social workers on what social work effectiveness is. There needs to be a shift in the focus of social work effectiveness research. An untapped perspective on practice effectiveness must address what indicators of effectiveness social workers themselves see as espousing.

Research Questions

This study is designed to explore the perceptions of effectiveness among a sample of social workers in direct practice in Windsor and Essex County. This exploratory study poses a number of questions derived from the review of the literature, central to the purpose of the study.

1. *How is effectiveness in social work practice defined ?*
2. *How is effectiveness in social work practice measured ?*
3. *What effect do human service organizations have on social work practice effectiveness ?*
4. *What importance does research about social work effectiveness have on direct practitioners ?*
5. *In what types of activities do direct practitioners participate to enhance their effectiveness ?*
6. *What criteria do social workers consider important in the evaluation of their practice effectiveness ?*

Consistent with the exploratory research, this study sought ideas, concepts and the correct analytic questions (Tripodi, Fellin and Meyer, 1983) in order to come closer to understanding the notion of "effectiveness". In this manner, hypotheses are put forth, questions are raised, concepts are refined and the knowledge base is broadened.

Method

The Setting and Population

The setting for this study is the city of Windsor and the County of Essex, in Southwestern Ontario. The populations for Windsor and Essex County are approximately 264,800 and 134,700, respectively, (personal communication, Windsor Chamber of Commerce, May, 12, 1994). The city is known primarily for the automobile and related industries, and manufacturing. It is a border city, just north of it is the major U.S. metropolitan city of Detroit, Michigan, with a population of approximately four million.

Social work direct practitioners provide the study population. Further, they must have obtained the BSW and/or MSW degree(s). A majority of the social workers in Windsor and Essex County were educated at the University of Windsor. Subjects without the MSW degree will have had at least five years of social work experience beyond their BSW. It is estimated that there are approximately 400 social workers in Windsor and Essex County. Of these, 250 have their BSW, 150 have their MSW, and 200 belong to the Ontario Association of Professional Social Workers (OAPSW), Windsor and Essex County Branch (personal communication, Marcia Weinberg, May 15, 1994).

The Sample

The School of Social Work, University of Windsor, requires its students, as a part of BSW and MSW degree

requisites, to perform social work tasks and activities in supervised field placements. The number of hours, level of difficulty, nature of activities and specificity of tasks vary depending upon whether the student is in the third, fourth or Master's year of the program. For MSW students, the School seeks field instructors who have obtained their MSW degree, and have had approximately three years of social work experience (*School of Social Work, Practicum Education Manual, 1991*). Field instructors supervising third and fourth year BSW students are required to have at least their BSW degree and two years of social work experience (*School of Social Work, Undergraduate Field Instruction Manual, 1989*). For both the undergraduate and graduate degree programs, field instructors are also required to have a demonstrated commitment to the education system and provide ample opportunities for students to participate in social work activities and tasks as negotiated by the field instructor and the student.

Thus, the school maintains a list of social workers who currently supervise social work students. The fields in which students may be supervised are numerous. It is from this list that the primary sample for this study was chosen. The total number of field supervisors was eleven, of which six supervised third year BSW, students, four supervised fourth year BSW students, and one supervised an MSW student during the 1993-1994 school year. Additionally, a snowball sample by

word-of-mouth was also collected. These individuals had either the MSW degree, or the BSW degree and at least five years of social work experience. Further, all were social workers employed in direct practice. The number from the snowball sample was fourteen. Thus, the number of subjects selected for the study sample was twenty-five ($N = 25$), representing the following settings: hospitals, adolescent services, schools, women's services, child and family services, mental health, child welfare and protection, rehabilitation services, gerontology, legal assistance and advocacy, crisis intervention, and corrections.

The Procedure

For the primary sample, the field instructors were categorized into the many different service areas as listed above. Those field instructors practicing in Detroit and Essex County were eliminated from the lists due to difficulties in accessibility. For each category, the first person on the list was contacted to determine their willingness to participate in the study. The aim was to get at least one subject from all fields as listed above, with a maximum of three. Prospective subjects were informed of the purpose of the study, the approximate length of the interview, and what the project entailed. Additionally, they were informed that confidentiality would be assured. If the subject did not consent to participating in the study, the next individual on the list was contacted. If the subject was

willing to participate, a date was set up to conduct the interview. Interviews were conducted usually at the subject's place of work. However, some preferred to be interviewed at sites other than their organization, such as at the School of Social Work, the University of Windsor, or at some other mutually agreed upon place. The subject was presented with the cover letter and a human consent form. The completed and signed human consent form was collected. The researcher briefly recapitulated the purpose of the study and began the taped interview part of the study. Following the interview, the researcher distributed and collected the completed demographic questions part of the study. The subject was thanked for their participation in the study. After all the data was collected and analyzed, the tapes were destroyed as per the agreement on the human consent form.

The Questionnaire

Items on the questionnaire. The survey had two sections - a demographic part and an interview part. In total, there were thirty-three (33) questions.

The interview questions were divided into a number of sub-sections, based on the literature reviewed. Under **Defining Effectiveness**, the respondent was asked to provide definitions of and reasons for evaluating effectiveness. In **Exploration of Studies on Effectiveness**, questions pertaining to the use of research in practice to enhance effectiveness were asked. In **The Professional Context**, issues of the social

worker being evaluated by members of multi-disciplinary teams and social work peers were raised. The **Organizational Context** consisted of questions which looked at how the subject's organization was evaluated, how much the organization affected the practitioner's practice effectiveness, accountability, unionization and regulation of the profession, and supervision, all in relation to enhancing effectiveness. Under **Occupational Context**, personal feelings and the use of self of the subject were elicited in relation to practice effectiveness. The final **Summary** questions were designed to elicit what the subject perceived they needed to do in order to further enhance their practice effectiveness, and a question of general comments and observations on effectiveness.

The demographic questions explored aspects of the subject such as their education in social work, their years and types of social work experience, their income, age, and gender. There was a section on whether or not the practitioner took courses beyond their last social work degree and whether or not these courses enhanced their practice effectiveness. Supervision and research were also addressed. Finally, the subject was asked to list three factors they felt should be used to evaluate their effectiveness.

Pretesting the questionnaire. The cover letter, human consent form, demographic survey and interview questionnaire were distributed to the researcher's ten fellow MSW students

at the School of Social Work for revisions and changes. From the six returned, their comments were then considered and utilized to edit the final version of the survey.

The demographic part of the survey (Appendix C) was constructed by the researcher in conjunction with his thesis supervisor. Most of the questions were fixed choice items, where the respondent selected from given choices. The cover letter (Appendix A) was also distributed with information pertaining to the purpose of the research. The human consent form (Appendix B) is a standard consent document. There was a section for dissemination if the subject wished to receive the results of the study. The interview part of the survey (Appendix D) was constructed from questions based in the review of the literature. The list of questions was revised a number of times to reduce the length and make the interview questions more open-ended.

Results and Discussion

This section will present the results and discussion of the data collected. It is organized as follows: 1) a description of the sample; 2) perceptions of social work effectiveness; 3) the practice context; 4) the organizational context; and 5) the professional context. In qualitative analyses of this nature, large amounts of descriptive data were collapsed into numerical categories and analyzed accordingly. Statistical analyses were performed at School of Social Work at the University of Windsor using the Statistical Package for Social Sciences/PC+ (SPSS/PC+). Analyses of significance, strength and correlation were conducted. However, they are not included due to the small sample size and conceptual nature of the research.

I. The Sample

Of the twenty-five subjects in the sample, 24 % were male and 76 % were female. The age range of the sample was between 28 and 55 years, with the mean age (\bar{X}) being 42.2 years. The majority of the sample (28 %) was between 50 and 54 years of age and 56 % of the total sample were over the age of 45. Further, 32 % had a BSW only, 28 % had a MSW only and 40 % had obtained both degrees. Consistent with ensuring that the sample were experienced social workers [a requirement of the study], those with only a BSW had an average of ten years of professional social work experience. Most of the respondents in the study (56 %) had held at least two

positions since graduation. Further, of the total, 24 respondents worked full-time while the other respondent worked more than one part-time position. The median income range was between \$ 45,000 and \$ 49,000, as 28 % reported their incomes to be within this range. As well, 76 % of the sample earned between \$ 40,000 and \$ 54,000.

Table 1 shows the various activities in which members of the sample were and are currently engaged. Again, consistent with the requirements for sample selection, it reflects that all of the respondents (100 %) have been and are currently involved in direct practice activities.

Table 1
Previous and Current Social Work Activities in Which Respondents Have Been and are Engaged (N=25)

| Social Work Activities (*) | Previous | | Current | |
|-------------------------------|------------------|----------------------------|------------------|----------------------------|
| | Frequency (f) | Relative Percent (%) | Frequency (f) | Relative Percent (%) |
| 1. Agency Direct Practice | 25 | 100 | 25 | 100 |
| 2. Supervisory Position | 21 | 84 | 15 | 60 |
| 3. Community Work | 9 | 36 | 7 | 28 |
| 4. Administration | 9 | 36 | 6 | 24 |
| 5. Consultation | 7 | 28 | 1 | 4 |
| 6. Program Evaluation | 6 | 24 | 5 | 20 |
| 7. Social Work Education | 5 | 20 | 1 | 4 |
| 8. Private Practice | 4 | 16 | 2 | 8 |
| 9. Social Work Research | 3 | 12 | 1 | 4 |

Note. (*) These activities are not mutually exclusive of one another.

Although the study was directed at social work direct practitioners, Table 1 shows that some practitioners were

previously and are currently involved in other social work activities, notably administration, social work research and private practice. Upon examining Table 1, it is found that subjects' current involvement in all social work activities other than direct practice is less frequent. That is, there are fewer subjects who reported currently being engaged in non-direct practice activities than before.

Table 2 illustrates the number of respondents who took professional development courses and workshops since graduation.

Table 2
Respondents Who Have Taken Professional Development Courses
(N=25)

| Areas (*) of study | Continuing Education Workshop/Seminar | | | |
|------------------------------|---------------------------------------|-----|-------------------------------|-----|
| | Frequency Relative Percent | | Frequency Relative Percent | |
| | (f) | (%) | (f) | (%) |
| 1. Advanced Practice Methods | 3 | 12 | 17 | 68 |
| 2. Research Methods | 2 | 8 | 1 | 4 |
| 3. Statistics | 2 | 8 | 1 | 4 |
| 4. Program Evaluation | 1 | 4 | 3 | 12 |
| 5. Single Systems Design | 1 | 4 | 2 | 8 |

Note. (*) These areas are not mutually exclusive categories.

Table 2 reveals that more subjects have taken professional development courses in the form of workshop/seminars. Further, the majority of them were in the area of "Advanced Practice Methods". Additionally, there were more continuing education courses than workshops/seminars taken in the fields of research methods and statistics.

Discussion of the sample. The ratio of females to males in social work is 2.5:1 (McDonnell, 1987; Thomlison, Watt and Kimberly, 1980). This study had a ratio of females to males of approximately 3:1 which reveals a somewhat higher male sample. The age range of social workers in this study was between 28 and 55 years which compares favourably with other studies of graduated BSWs and MSWs working in South Western Ontario (Perry, 1991). However, the majority of this sample was over the age of 45 whereas comparative regional data indicate the average age of experienced professional social workers in Ontario to be under 45 (Dobrowlosky, 1986). Thus, although somewhat speculative, this sample is composed of relatively older social workers.

It was expected that most of the sample would have both degrees and that some would have either BSWs or MSWs only. The modal income range in this study was reported to be between \$ 40,000 and \$ 50,000. Comparative provincial data indicate the modal income ranges of experienced social workers with the BSW degree to be between \$ 33,000 and \$ 42,000 and for MSWs to be between \$ 40,000 and \$ 50,000 (Melanie Hopkins, Ontario Association of Professional Social Workers OAPSW, personal communication, July 18, 1994). Given that the sample was somewhat older, that most had MSWs and that they had been in the field for more than ten years, the sample's above average income range was not surprising and consistent with the provincial and regional data. Further, it was expected

that all social workers in the sample would be employed full-time. One subject however, worked more than one part-time position [which could be considered as full-time].

Table 1 reflected the types of activities in which social workers in this study had been and were currently involved. As expected, and due to the criteria for sample selection, all of the subjects were and are involved in direct practice in human service organizations. The fact that all of the activities in Table 1 (both direct and indirect) had fewer social workers involved in them currently than previously could be explained by three plausible reasons.

First, in these times, organizations are struggling for survival, let alone success (Briar and Blythe, 1985; Edwards, Faerman and McGrath, 1986). This success is largely based on the accountability of client numbers as opposed to accountability of service quality. Further, many social workers are not allotted sufficient time to engage in activities which are not directly related to clients' progress. Therefore, activities such as social work research, consultation, and education have fewer social workers involved in them now than before.

Second, Table 1 reveals minimal change in previous to current involvement in community work and program evaluation. The fact that there is minimal change in program evaluation activities may be attributable to the trend that HSOs are constantly under pressure to justify their services by

demonstrating their effectiveness (Briar, 1973). Consequently, more HSOs encourage their social workers to engage in program evaluation activities to place the HSC in a better position to receive continued funding. The lack of change from previous to current activity in community work points to the traditional and ongoing idealism of most social work endeavour, that is, work that takes place within the context of the community (Garvin and Seabury, 1984).

Third, a possible explanation for the change in the number of social workers who were and are involved in the activities listed in Table 1 may be attributed to the sample characteristics themselves. Specifically, this is an older sample with a significant number of years of professional social work experience. It follows then that the range of activities in which the subjects were previously involved may reflect the need for these social workers, early on in their careers, to obtain experiences in many types of activities in order to enhance their subsequent employability.

Table 2 reflects the types of continuing education courses and workshops/seminars that social workers in the sample had taken. Four noteworthy issues arise out of this table. First, in regard to which types of courses were taken more subjects tended to take more "Advanced Practice Methods". This was an expected finding because of the requirements of the sample selection procedure. Since there was a conscious effort on the researcher's part to select those subjects who

were direct practitioners only, it would follow that to improve their effectiveness, these social workers would engage in professional activities that may increase their interventive knowledge base. It also follows that since these subjects were involved in direct practice, they tended to take such courses to further enhance their effectiveness. This reflects the trend noted by Parsloe (1990) that social workers, in an effort to be more effective, will select opportunities to enhance their practice.

Second, the sample took far fewer continuing education courses than they did workshops/seminars. This points to the possibility that social workers, having been required to attend classes in social work in the academic setting for a number of years, have little or less desire to continue their development in a classroom setting (Stone, Holosko, Trim, Hansen and Taylor, 1991).

Third, in relation to training in "research", "evaluation" and "statistics", fewer subjects reported taking such opportunities. This finding is consistent with another local study (Perry, 1991) which found that social workers in administration tended to take courses relevant to policy, research and supervision, whereas social workers in direct practice tended to take courses specific to enhancing their work with clients.

Fourth, the fact that more workshop/seminars were taken over continuing education courses may be a reflection of

currently restrained economic resources in HSOs (Patti, 1987). Specifically, there is a larger cost to continuing education courses, requiring more of the social worker's time and commitment. Further, the social worker is engaged in such courses over a longer period of time. Therefore, HSOs are likely to support and/or choose the least expensive, least time-consuming and more accessible opportunities for the professional development for their employees.

II. Perceptions of Social Work Effectiveness

In order to ascertain the perceptions of social work effectiveness, the sample were asked four open-ended questions. These responses were categorized into an overall perception of effectiveness within the contexts of: self-perception, client perception, organizational perception, academic perception, and community perception. The first of these questions was:

1. What does practice effectiveness mean to you ?

Most respondents prefaced this question by acknowledging that activities in social work are different for different professionals. As well, they indicated that because defining social work was difficult in and of itself, so too was defining practice effectiveness. The responses to this question were collapsed into three discrete categories, shown in Table 3.

Table 3
Responses to the Question "What Does Practice Effectiveness Mean for You ?" (N=25)

| Interest Areas (*) | Frequency (f) | Relative Percent (%) |
|-----------------------------|---------------|----------------------|
| 1. Client Related Interests | 25 | 100 |
| 2. Worker Related Interests | 8 | 32 |
| 3. Organizational Interests | 6 | 24 |

Note. (*) These interest areas are not mutually exclusive categories.

As indicated in Table 3, the entire sample said that serving clients' needs was the key to understanding practice effectiveness, followed by worker related interests (32 %) and organizational interests (24 %).

2. *Why do you believe there is a need for social workers to evaluate their effectiveness?*

The responses to this question were collapsed into categories relating to: accountability, the profession, the worker's self, and the evaluation of interventive methods. Of the sample, 64 % gave responses related to accountability, 52 % for profession-related responses, 44 % for self-related responses and 36 % for methods evaluation responses.

3. *To what extent do you use research in your practice ?*

The majority of the sample (40 %) stated that they did use some research in their practice. Those who used next to none or no research in their practice amounted to 32 %. Only 28 % of the sample responded that they used research in their

practice extensively. On the whole, therefore, 72 % did not use a great deal of research in their practice.

4. *What can be done to strengthen the link between research and practice ?*

Data for this question were grouped under three mutually exclusive categories: worker motivation, academic links and agency motivation. Eighty percent perceived that the use of research in practice could be enhanced through the encouragement, support and endorsement of the organization. Further, 56 % perceived that worker motivation would enhance this link and 64 % perceived that academic links would enhance the relationship between research and practice.

Discussion of perceptions of effectiveness.

i) *The meaning of practice effectiveness:* Understandably, some respondents noted that defining social work effectiveness was indeed difficult because defining social work itself was difficult as has been noted by others in the literature (Cheetham, 1992; Fuller and Lovelock, 1987). In response to the question about the meaning of practice effectiveness, Table 1 reflects the categorization: client interests, worker interests, and organizational interests. Figure 1 shows this basic understanding of effectiveness as being anchored in these three related concepts.

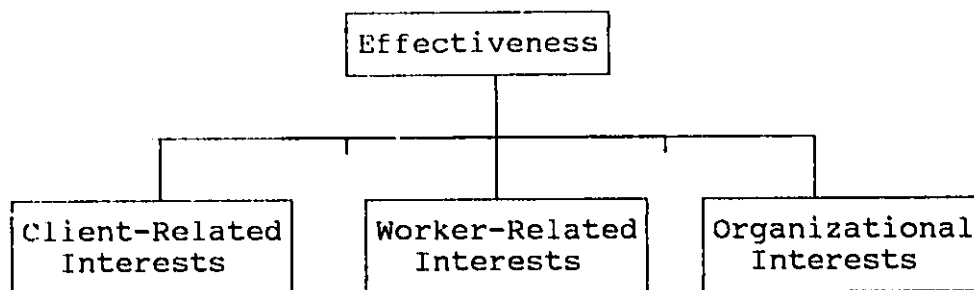


Figure 1. Primary Level of Analysis of Understanding Effectiveness

To further elaborate on this figure, client related interests were interpreted to be those which were related to the "client's success" in achieving his or her treatment goals. Thus, effectiveness was perceived as a measure of how well needs were met within the context of actual treatment goals and services offered. Upon further exploration, a further indication of effectiveness was the client's own sense of progress or satisfaction beyond basic service provision. This was seen as being assessed by the practitioner's sense of the client's positive functioning and the client's self-reporting of their particular successes. As indicated by a respondent:

"I learned a long time ago that the measure of effectiveness isn't what *I* see as having been accomplished."

The theme here, focused on empowering the client to set out, work toward and achieve specific goals. Indeed, for one respondent, effectiveness depended on:

"the client's willingness to go on a self-exploratory trip."

That the entire sample claimed effectiveness was related to the client was expected, which coincides with the altruistic orientation within which social workers are trained. Further, the literature reflects the subjects' meaning of social work effectiveness as rooted in helping clients achieve their goals (Rosenberg and Holden, 1992).

Of particular interest under client related interests, some workers said that further interpretations of effectiveness related to the "client's perception" of their own progress. This would assume that clients have some sense of awareness and are able to articulate issues related to their own progress. Explanations to this are two-fold. First, a social worker who ascribed to this meaning reflects one who works within a setting where the client population has some self-awareness and ability to effect change in their lives [a biased world view]. For example, mentally disabled, psychiatrically disabled and older adults with Alzheimer's disease may not have the same comprehension of their progress. Second, the assumption that social workers make about their clients having enough self-awareness and articulative ability to express their own situation can indeed place unrealistic expectations on their clients.

Subjects responding under the second category of worker related interests cited the primary measure of effectiveness as the "worker's satisfaction" of a client's progress. Specifically, these persons saw themselves as effective social

workers if their clients were reaching goals that the workers themselves had informally set out and hoped they would achieve. Additionally, these persons thought of themselves as effective if they had experienced a perception of having "made a difference". The main self-interest that such workers related to their own effectiveness was their own satisfaction and pleasure in their client's successes. The following sentiment exemplifies this point:

"I like to know that I've done a good job. If I know I've done well, then I'm motivated to go on."

From another perspective, such worker satisfaction may be related to worker expectation, transferred on to client goals. For instance, some respondents said that aside from the client's satisfaction, there must be some satisfaction for the worker to confirm his or her effectiveness. Such an expectation may emanate from the worker's own bias of where they believe their clients should be during treatment, which speaks to the need for workers to recognize that they have made a difference in people's lives, indeed seeking the difference that makes the difference (Holosko and Holosko, 1991). In turn, this provides affirmation that what workers do is in fact measurable and relevant for them. Thus, expectations may be set up for clients to meet the needs of the worker in seeking the difference rather than allowing clients' needs to prevail.

Under the category of organizational interests, workers saw themselves as effective if they "fulfilled the mandate" of

the HSO. Further, if the organization continued to thrive, had increased admission numbers, placed more clients on social workers' caseloads and avoided legal issues, then the subjects perceived that they were meeting organizational measures for effectiveness.

At another level, respondents pointed toward altruistic ends as another perception of organizational effectiveness. Specifically, many subjects said that if the organization survived and if it could show some change in better meeting the needs of society, then their efforts as social workers (within the HSO) were deemed constructive, practical and worthwhile. These speak to some of the tenets to which the profession of social work ascribes (Biestek, 1957; *Code of Ethics*, Canadian Association of Social Workers, 1984). Essentially, some social workers saw effectiveness as rooted not only in individual client success, but toward the betterment of society as a whole, and thus the HSO was deemed a vehicle to operationalize this mandate.

From another perspective, there was evidence of an interrelation between the three concepts of: the client's observed reported success, the worker's perception of success and the organizational mandate. Figure 2 outlines a linearly associated relationship between these facets of effectiveness.

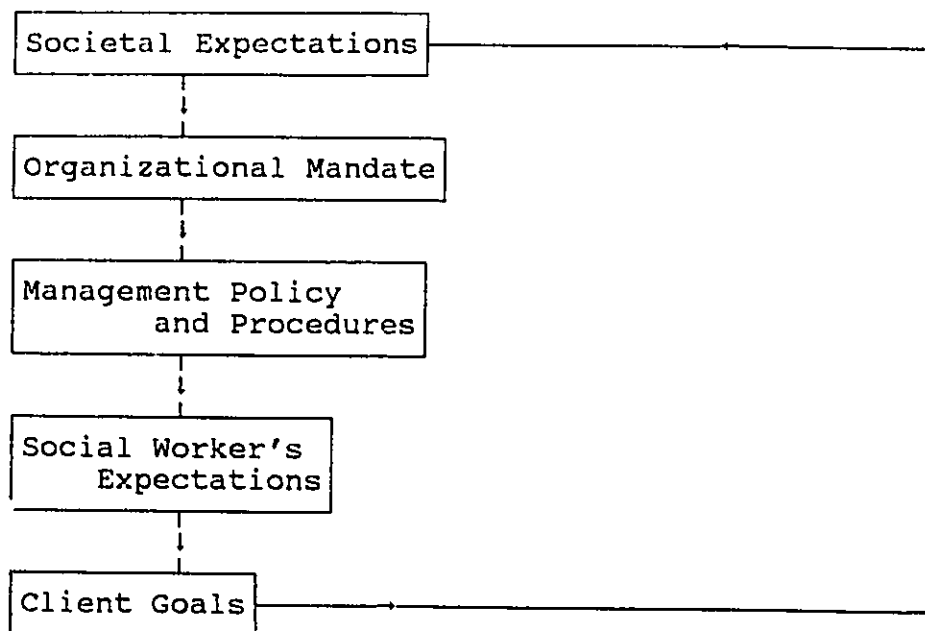


Figure 2. The Formation of a Client's Goals

As one knows, society has certain norms and values to which people are expected to subscribe (e.g., democratization, free choice, right to fairness, right to freedom, etc.). Different HSOs promote different services to help people to adjust better in society, and set up mandates which basically serve three purposes. One is to help clients, the second is to put the HSO in a positive public light through accountability and the third is to meet larger societal needs of social control and socialization (Piven and Cloward, 1992). Organizational mandates are then translated into policies and procedures which management directs. Social workers, in their day-to-day encounters with clients, follow such mandates. In turn, the procedures are translated by workers into developed expectations [treatment goals] for the clients in order to

receive service. In this perspective, clients receive service as delivered and structured by all the above institutions and structures.

Thus, although effectiveness may be viewed in terms of discrete treatment goals that clients apparently set out for themselves, it becomes clearer upon further analysis that this may not be entirely true. Indeed the client's formulation of his or her goals may in fact, be the culmination of a number of variables interrelated with one another.

Ironically however, social work intervention takes place for a relatively short period of time. Further, clients may leave service under the assumption that they have made significant progress only to fall back into former distressing and potentially destructive paths, and may consequently need the services of social workers again. As well, one HSO may specialize in serving one particular need of a client. Therefore, the client ascribes to one aspect of societal expectations. However, when another specified need is identified, the client must seek out another HSO to help meet that need. Thus, the emergence of the so-called "revolving door syndrome" of social work services. Additionally, within an organizational mandate, the social worker may unintentionally move treatment along at a pace too quickly for clients to follow. Consequently, if worker interests are not tempered with the organizational interests and led by the client, then social work effectiveness becomes questionable.

ii) *Reasons to evaluate practice effectiveness:* The most frequently cited reason for the need for social workers to assess their effectiveness was accountability (64 %), foremost to society and clients. A respondent noted:

"Our profession, being so nebulous and isolated [we do practice it in a room], needs to be put in some sort of concrete framework because our subjectivity isn't always so accurate."

The majority of subjects saw their profession as one which is under constant public scrutiny. In this regard, they saw evaluations of effectiveness as a means by which service provision was justified (Perry, 1991). Aside from the public, social workers saw accountability to their clients as a strong reason to evaluate effectiveness. Specifically, the sample saw the clients as the ultimate target for effective service provision, thus they saw a distinct obligation to evaluate their effectiveness (Grinnell Jr., 1994).

Of the sample, 52 % of the respondents who offered explanations that fell into the profession related category cited enhancing the profession of social work as a reason to evaluate effectiveness. Specifically, they saw the importance of validating the profession as integrally rooted in efforts that evaluated service effectiveness. If the social work service was demonstrated to be effective, then the profession of social work would gain a stronger foothold on becoming accepted, respected and recognized, as indicated in the literature (Bloom and Fischer, 1982; Fisher, 1976; Haselkorn, 1978; Hudson, 1982; Rosenberg and Holden, 1992; Siman, 1975).

Additionally, other helping professions (e.g. medicine, nursing, nutritionists, etc.) were noted as having observable and objective criteria by which they were regularly evaluated. Consequently, social work was seen as lacking in this area which may result in attributing its ambiguous status to that of a semi-profession (Calvert, 1970). In this regard, social workers in this study said it was important to evaluate themselves at least to enhance their professional status and autonomy.

Further, the need to standardize practice and connect practice to theory was seen as crucial for the enhancement of the profession itself as well as for the clients. Since knowledge is deemed the basis for a profession's growth, evaluation of effectiveness might enhance credibility for the profession so that directions for the future could be outlined. The literature in this area suggests this connection (Bloom and Fischer, 1982; Grinnell Jr., 1994)

In this study, 44 % of the respondents saw the reasons to evaluate effectiveness as related to the self. In this regard, evaluation was associated with the subjects' own self-identification as competent and effective social workers. Specifically, they perceived that social workers wanted to know if what they were doing was in fact working. The desire for such tangible evidence was therefore, another motive for the evaluation of effectiveness. Thus, if such assessments proved that social work activity was working, then the workers

felt that they could continue to work and enhance their own practice.

Finally, 36 % of the sample said that a reason for evaluating effectiveness was in relation to the evaluation of methods. The first reason cited in this regard was to "assess" their interventive methods and the second was to "compare" their methods with others. The sample understood that a multitude of interventive methods was the key to successful and effective intervention. However, they did have concerns about the methods they were currently using and whether or not there were more viable alternatives. Many of the subjects realized that although an eclectic approach was considered ideal in interventive processes, they did have specialized techniques, and the evaluation of these techniques were deemed as contributing to their workers' overall effectiveness. Essentially, some methods were more effective than others and the subjects in concurrence with the literature (Macdonald, Sheldon and Gillespie, 1992; Rubin, 1985) said that evaluation was necessary to compare interventive methods.

Essentially, to evaluate the effectiveness of social work intervention methods is to speak to the issue as stated by one subject:

"Is what you're doing what clients want?"

iii) *The use of research in practice:* A large percentage of the sample (72 %) used little or no research in their day-to-day practice. Research is noted to have either direct or indirect applicability to practice (Makris, 1987). However, only 61 % of research in an overview of five years of social work research in the core social work journals published in the literature was found to be aimed at direct practice (Makris, 1987, p. 54). Other areas in which research was directed were: policy, administration, social planning and education. Given this, it was not surprising to find that this sample was not actively participating in research activities. Essentially, the work of these social workers is related directly to practicing with clients, yet somehow they perceived that the work of research is not.

Ironically, most of the sample understood the need for research in practice. Further, they realized that the gap that existed in social work between research and practice is partly attributed to them, again, a finding consistent with the literature (Grinnell Jr., 1994). Specifically, they said that this kind of activity, be it reading research, or conducting research would ultimately widen their knowledge base and strengthen their utility of interventive techniques. Consequently, practice effectiveness would be enhanced, however, respondents cited heavy workloads, the lack of time, and organizational constraints as the main problems associated with their lack of participating in such research activities.

This finding was directly parallel to what was found by Perry (1991) in his study of the use of outcome measures by family service workers.

Another issue noted was the scepticism about research itself and the research process overall. Some of the sample said that they were doubtful of the process and procedures and further, were cynical of research findings in relation to enhancing practice. Two respondents specifically cited a "fear" of research. Specifically, they saw research as a vehicle by which organizations could justify employment dismissals and the public could further scrutinize and criticize social workers. However, there were a few respondents who also claimed to use research increasingly as their practice expanded. The acknowledgement of "not knowing everything there is to know" and the need to "increase the knowledge base" were frequently cited as the reasons for the need for research in day-to-day practice.

iv) Improving the link between research and practice:

Figure 3 outlines the factors that subjects in this study identified as crucial in strengthening the link between research and practice in social work.

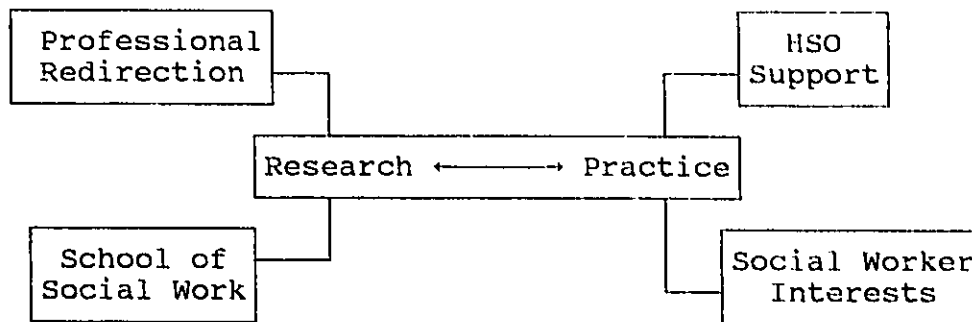


Figure 3. Aspects of Strengthening the Link between Research and Practice in Social Work.

Most of the sample (80 %) cited organizational constraints as the primary force behind strengthening the connection between research and practice. For example, time was the crucial element upon which social workers felt their organizations impinged. Since agencies had particularly heavy accountability criteria to meet, workers were not allotted sufficient time, if any at all, to indulge in research oriented activities. As stated by one respondent:

"When you're working all day with people, you get tired. After your day, you go home and you really don't want to read social work journals. That's not reading for enjoyment."

Furthermore, subjects confirmed the assumption that their organizations did not allocate resources, and/or opportunities for them to learn about the effects of their interventions and themselves on clients. Similarly, few respondents were satisfied with the encouragement received from their organizations in regard to supporting research activities. Here, it was suggested that agencies must devote more time to research oriented activities and not only encourage, but

"force" social workers to read and participate in research activities. Agency efforts to send workers to workshops on research were suggested in this regard. Computerization and automation were seen as viable methods toward enhancing the use of research. The key here was to make research more accessible and meaningful. This seems to be consistent with what the literature reports as the lack of opportunities for practitioners to learn about the effects of their interventions and themselves on their clients (Kurland and Salmon, 1992; Mokuau, 1987; Richey, Blythe and Berlin, 1987; Star, 1979). Additionally, this speaks to the fact that social service organizations are involved moreso in trying to meet criteria established for continued funding, therefore, other efforts in organizations are suppressed, research activity being one of them.

In regard to worker motivation, 56 % of the respondents perceived that the potential for the link between research and practice in social work to be realized was in part, a responsibility of social workers themselves. Indeed, many of these subjects cited a legitimate lack of interest in research. As well, a lack of knowledge about the process of research and interpretation of findings further discouraged workers to be stimulated by research as they know it. Although many perceived the need to learn more about research processes and methods, for most, research seemed foreign to them, or it was not seen as a primary social work activity.

However, the need and importance of worker participation in research was stated by one respondent:

"Too many social workers don't take the field seriously. They need to be less sceptical of research and its processes. Workers need to be convinced about the merits of research."

As noted in the literature, workers in this study understand that to become recognized, they need stronger research based activities (Meyer, 1992; Taylor, 1993). Further, worker motivation was seen as low in this regard. Again, this alludes to the point made earlier about the notion of social work research being incongruent to specific goals of social work intervention.

Finally, 64 % of the respondents saw this gap in social work as a result of poor academic links. Specifically, they saw this gap to be directly attributed to the gaps made between those who conduct research and those who conduct practice. A major problem observed by the sample was that research and practice are conducted in isolation from one another. Some respondents wanted researchers to come out into the field, noting that those who teach must also practice or at least consult with social workers in agencies.

Most subjects reported that the School of Social Work at the University of Windsor should also be primarily responsible for establishing relationships with agencies in the community so that research activity could take place. In addition, subjects said that social work students should be heavily involved in conducting the research needed by their agencies.

Consequently, some social workers perceived that the priority and emphasis of social work research in students' undergraduate work would be realized, entrenched and fostered. Faculty-based leadership and a mentorship process for students and graduates of social work programs were also suggested.

The final point related to academic links that respondents referred to in this question was related to the structure of research in general. Specifically, these subjects noted that researchers needed to write for social workers, not other academicians, something pointed out in the literature (Briar 1968).

In regard to the use of research in practice, the recognition of the need for increased involvement in research oriented activities coincided with what the literature asserts about strengthening the relationship between practice and research (Goldberg, 1987; Hopps, 1985; Meyer, 1992; Rubin, 1987; Sheldon, 1986). Specifically, the sample acknowledged that for the most part, they were not doing as much research as they should be doing. Essentially, social work research has largely been perceived by both the public and social workers themselves as an activity which takes place outside the practice environment. This, coupled with the notion that research activity is not pertinent to the goals of social work (Meyer, 1992) is evidenced in the minimal research activity in which the sample was involved. As noted by Meyer (1992) and reflected in this study, social workers saw the need for

stronger communicative efforts between researchers and practitioners. Further, the sample's identified needs of research based activities reflect Jenkins's (1987) ideas of research being directed at goals, methods, validity, effects, intervention, activity, and follow-up.

III. Practice Context

The next set of questions that explored the practice context of social work effectiveness examined perceptions relating to: the multi-disciplinary team, evaluations of social workers, client outcomes and supervision. The responses were categorized according to how the multi-disciplinary team format effected their practice, whether or not they preferred evaluations by this team as opposed to peers in social work, perceptions about client success and failures, and issues in regard to supervision.

5. Have you ever been a part of a multi-disciplinary team ?

A large majority of the sample (84 %) report currently being or previously having been part of a multi-disciplinary team of professional helpers. Four respondents (16 %) reported never having been on such a team. Further, two respondents said they belonged to such a unit "in theory".

6. How does the multi-disciplinary team enhance/impede your effectiveness?

Twenty-three respondents (92 %) found the multi-disciplinary team to enhance their effectiveness, while two (8 %) found this format to actually impede their effectiveness.

Table 5 shows the responses of how the members of the sample for this study perceive being a part of a multi-disciplinary team impacts on their effectiveness.

Table 4
Contributions of Multi-Disciplinary Format to Respondents' Effectiveness (N=25)

| Responses (*) | Frequency (f) | Relative Percent (%) |
|------------------------------------|------------------|----------------------------|
| 1. Gives more than one perspective | 23 | 92 |
| 2. Clarifies role of social worker | 10 | 40 |
| 3. Provides expert consultation | 5 | 20 |
| 4. Complicates the issues | 1 | 4 |
| 5. Impedes on social work model | 4 | 16 |

Note. (*) These responses are not mutually exclusive of one another.

7. *How appropriate do you feel it is for social workers' effectiveness to be evaluated by non-social workers, and would you prefer a social worker to be evaluating your effectiveness?*

On the whole, most social workers (76 %) interviewed did not have any objections to being evaluated by non-social workers. However, most (80 %) preferred evaluation by a social worker.

8. *When a client is seen to be successful or progressing in your intervention, to what extent do attribute this success to the client and to yourself?*

All respondents (100 %) said that they gave the client all the credit when it came to successful intervention.

Clients were seen as doing all the work in order to reach their goals and be content. Thus, social workers in this study gave themselves little credit and saw their main contributions to the process of treatment as facilitating, empowering and encouraging. Noteworthy here, was the relative ease and conviction in which the sample acknowledged the successes of their clients.

9. What are your feelings when a client is successful and not successful ?

All respondents reported positive feelings when their clients were successful. Words mentioned were "elation", "thrilling", and "great". Some mentioned a "feeling of relief". If the client was not successful, feelings of "hope", "frustration" and "acceptance" were reported.

10. Is supervision a good way to enhance your practice effectiveness and what are you looking for in it?

A little over half the respondents (52 %) in the sample reported being "somewhat satisfied" with the supervision they have received over their practice years. Table 5 outlines the levels of satisfaction that workers have had with supervision. All of the respondents said that some form of regular supervision would enhance their effectiveness. However, 60 % specifically preferred supervision, whereas 40 % preferred more of a consultative approach to enhance effectiveness and practice.

Table 5
 Respondents' Evaluation of Supervision (N=25)

| Evaluation | Frequency (f) | Relative Percent (%) |
|---------------------------|------------------|----------------------------|
| 1. Very satisfying | 7 | 28 |
| 2. Somewhat satisfying | 13 | 52 |
| 3. Somewhat dissatisfying | 3 | 12 |
| 4. Very dissatisfying | 2 | 8 |
| Total | 25 | 100 |

Discussion of practice context.

i) Multi-disciplinary activity: The fact that the majority of the sample (84 %) has been or are currently participating in a multi-disciplinary team signifies the current trend in the social services of incorporating such teams in the service delivery system (Giannetti and Wells, 1985). Such teams are noted be efficient as well as effective. Further, the ultimate justification of such teams is based in the perceived stronger level of service for the client and greater accountability.

However the two respondents who said they belonged to "theoretical" multi-disciplinary units point to a core issue. Specifically, it would seem that there are some organizations who ascribe to the model of the multi-disciplinary team as the unit of help for clients, but do not use them in reality. For example, clients in one organization were assigned to the next available professional helper without attention toward the

particular presenting problems. Additionally, each professional helper seemed to work independently of the so-called "team". In essence, therefore, there was no real multi-disciplinary team, and different professionals seemed to work in isolation rather than together as equal contributors to a process directed toward serving the needs of the client.

From another perspective, organizations have rather flexible mandates and policies which can easily be altered to better fit the perception needs as they arise. For example, an organization may subscribe to the multi-disciplinary model and hire professionals from different disciplines so that they may receive fiscal support from funding bodies. Another reason to ascribe to this model is to gain public support. Yet, in reality, within the organization, there may be no real elements of a multi-disciplinary team.

ii) Contributions of the multi-disciplinary team: Respondents cited the following contributions from working on the multi-disciplinary teams: additional perspectives, role clarification, expert consultation, complication of the issues and social work model restriction. As indicated in Table 4, 92 % of the sample said that the multi-disciplinary team format enhanced their effectiveness by giving them more than one perspective. Supplementary perspectives were seen to enrich the client's psycho-social situation and foster new ideas regarding appropriate and relevant intervention.

Further, respondents related the strength of being a part of a multi-disciplinary team provided further knowledge and worked to serve the needs of the client in a "more eclectic fashion". Additionally, the inclusion of additional perspectives to a situation was found to be a means to avoid the social worker's isolation and insularity. Some subjects said that in such teams, the social worker learns to develop skills to advocate for the client. In doing so, the social worker learns skills of facilitation, negotiation and communication. Further, this format helps the social worker to articulate their particular position and profession as a relevant contribution to the team process.

Social workers play the roles of advocate, counsellor, facilitator, teacher, etc. Indisputably, these roles require a mastery of skills related to analysis and communication. Social workers saw the multi-disciplinary unit as a vehicle through which these skills could be learned and mastered. Further, social work is seen in one respondent's view as a "helper to the other professions." The team provides the opportunity for social workers to negotiate, clarify and promote their roles as social workers and justify to the team that their contributions are important in helping the client.

A few social workers noted the advantages of being a part of a multi-disciplinary team to be on a more extrinsic level. They saw the team as an opportunity to achieve expert consultation on certain aspects of a client's psycho-social

functioning. As well, the team was a way for professionals to engage in a "reciprocity of resources". Thus, the strengths seen by social workers in the study found in relation to being a part of the multi-disciplinary team suggest that they have followed the trend of this therapeutic format (Giannetti and Wells, 1985). The knowledge that subjects gained in these work units reflected social work's fundamental affinity to the systems orientation. Moreover, social workers are trained to use a "person-in-environment" approach when assessing client situations and the multi-disciplinary team seems to adequately espouse this ideology (Howe and Herranen, 1981).

Social work is an activity which is more community-oriented than is realized. Therefore, this team, as noted by some, provides the opportunities for expert consultation and an exchange of resources. However, an unintentional positive fallout of this is the fact that social workers can also be seen by other members in the community as professionals of excellent calibre.

One-fifth of the sample reported the multi-disciplinary team in fact impeded the social worker's practice effectiveness. Among the rationales included were that it imposed on time that could be better spent on helping clients, and the team complicated issues and made intervention unnecessarily intricate when simplicity was called for:

"Too many cooks spoil the broth, and my time is better spent helping the client directly rather than sitting around for an hour talking about it."

The reasons of wasted time and complication of issues point to two issues. The first is that some social workers do not see the team as fruitful. Indeed, not all situations call for the team approach. Specifically, these respondents noted that their time would be more valuable in developing a working relationship with the client, exploring the problem with the client and helping the client to achieve treatment goals. The team approach seemed, in the view of some respondents, to "confuse the issues". The second issue relates to the perception that social work is not a respected profession and that in such teams, the social worker's contributions are minimized and not as much significance is valued in the social worker's opinions on client issues.

iii) Evaluation by non-social workers vs. social workers: Generally, those who had no objections to being evaluated by non-social workers stated that it would be appropriate and essential for them to at least be knowledgeable about what social work entails - values, ethics, clientele, theory and effort. Such evaluations would be considered only in the context of the multi-disciplinary team:

"If someone's going to evaluate me on what I am doing for them or with them, I've got no problem with that but they can't evaluate me on what I'm doing with a client because they just don't know."

Indeed, much of social work takes place in isolation and respondents noted the need to be evaluated by others to avoid this isolation, insularity and potentially "incestuous" behaviour.

Those who did not agree to being evaluated by non-social workers found it inappropriate generally. Further, social workers who preferred being evaluated by members of their own profession cited their reasons as being that social workers shared the same values, ethics and knowledge base. Thus, their evaluations would be preferred and valued. Those who had no preference (20 %) said that objective evaluation, be it from a social worker or otherwise, was welcomed and not something about which they were hesitant.

At a further level of understanding, the fact that most social workers did not object to being evaluated by a non-social worker, yet more preferred evaluations by social workers may point to the issue of mistrust among professionals. That most do not diametrically object to these evaluations shows that they value the input of other professionals into their practice and effectiveness (Giannetti and Wells, 1985; Radin, 1992). Those that regard a social worker's evaluation of their effectiveness as more valued, although accepting of other evaluations, may not be as comfortable with them. Specifically, this inconsistency may arise from a mistrust among professionals resulting in social workers not wanting interdisciplinary evaluations (Gibelman 1993). Certainly, a reason for this may be due to the fact that social work does not have the societal recognition as do other established professions. Therefore, one perception may be that evaluations serve to devalue social work further.

Furthermore, this inconsistency may relate to a type of fear or anxiety. Subsequently, such fear may arise out of the profession's own lack of self-esteem. Since the profession is not formally established, it is not socially recognized. Therefore, the public is less confident in its abilities and competencies. This will further contribute to the low self-esteem of social workers and consequently, the maintenance of social work at the status of a semi-profession (Makris, 1987). It follows then, that evaluations connote examinations which in turn, imply successes or failures. Consequently, any evaluations by persons other than in the field of social work may be regarded as possible trials from which social workers can not hide. Clearly, this perception must be challenged.

iv) *Workers' perceptions about client successes and failures:* Figure 4 illustrates the various perceptions of clients' successes as indicated in the sample's responses.

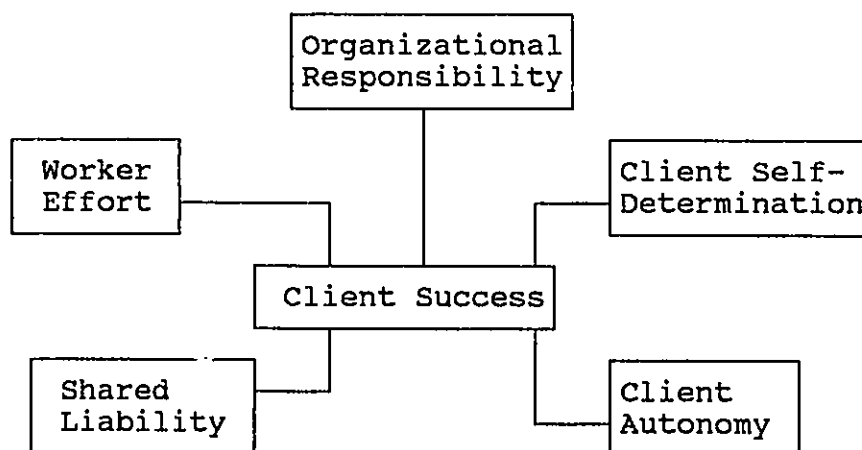


Figure 4. Perceptions of Client Success

Issues regarding client success and failure became critical to this study. For instance, all of the social workers sampled attributed client success to the client's own work in the treatment process. As such, they saw their role as facilitators of this process. Moreover, they usually reported positive feelings about client successes. Generally, this sentiment concurred with the literature which indicated that workers have a feeling of joy as well as an affirmation that what they are doing is correct (Fortune, et al., 1992).

In relation to dimensions of client success, the sample generally echoed the sentiment expressed by one respondent:

"Great, good for them, now let's move on to the next one."

One worker noted being happy, mixed with caution. Others reminded themselves that there were other clients to serve. Another respondent had expectations that their clients would succeed and was not surprised by their successes. Generally, all were proud of their clients for succeeding, were glad that their clients were better off, and wanted to move on to the next. One worker reported being quite removed from success and wanted to "just go on to the next one."

In relation to clients not progressing or failing, sentiments were generally more sombre. The sample reported being "sad", "hopeful", "resigned" and "frustrated". Most frequently in this regard, respondents recognized that failure does occur and felt strongly about the client's self-

determination. One respondent reported taking a client's failure particularly difficult and personally. Overall however, workers recognized that clients have choices and the right to choose among treatment options. Thus, if the client did not choose a path of action which was more productive than another, it was judged to be their own prerogative. Some workers said that their clients probably needed to "hit bottom" before any tangible intervention and progress could take place. One respondent said:

"I have to look at myself and my patience. If I get too frustrated, then I have to ask myself what measuring stick I am using - the client's or mine. If I'm using my measuring stick, then I'm using the client to accomplish my goals. That is not social work."

When it came to a client's lack of overall success, the majority of the sample attributed this to the client's self-determination. In the same way that client success could not always and wholly be attributed to worker intervention (Hudson, 1988), failure as well was similarly not attributed to workers alone. As reported in the literature (Fortune, Pearlingi and Rochelle, 1992), the sample generally reflected on their on role in the therapeutic, treatment or intervention process and contemplated what other avenues of intervention they might have taken to avoid failure. Further, all, except one respondent did not bear any blame or responsibility for the client's success and failure. This worker however, reported taking the client's failure somewhat personally.

At another level of analysis, self-determination was related to responsibility and liability:

"Because so much of a client's progress is incumbent on a client's self determination, when they succeed, they deserve the credit. When they regress or relapse, they have limited liability because sometimes, that relapse is due to factors outside the client's control. The client is therefore, not totally responsible for success or failure. He or she operates within a total environment. But limited liability and limited credit, in no way means limited accountability."

Furthermore, the issue of liability also extends to the social worker according to this respondent. It was noted that if the worker took credit for success, they could be liable for this success. Accordingly, by the same token, if the worker takes credit for a client's success, then they must take credit for the client's failure as well and consequently be liable for this failure. However, the one respondent who took clients' failures somewhat personally said this of social workers:

"Essentially, you have the burden of helping when someone comes to you for help. Attributing a client's non-success to their own self-determination only, is simply passing it off."

This subject acknowledged self-determination to be a key determinant in the helping process, but also questioned the "inactivity" of the social worker and the organization in relation to help the client succeed. Thus, client failure was partly a result of organizational failure. This subject said that social workers placing too much emphasis on self-determination needed to take responsibility for their part.

v) *Supervision and consultation:* Of the sample, 60 % preferred supervision and 40 % preferred consultation. Many of the workers wanted consultation, not supervision because they said that at a certain point in one's career, supervision is inappropriate. All agreed that some form of "professionally-based" communication was necessary in order to enhance practice effectiveness. Whether or not respondents preferred consultation over supervision, there were four common components encompassed by three overarching principles. Further, there were different specific requirements for both the groups, yet the general criteria remained the same, as illustrated in Figure 5.

Enhancement of effectiveness depended on the role of the supervisor in relation to the worker. Further, within the organization, there must be recognition that this process is important as well as productive and conducive ultimately, to client success (Beausejour et al., 1988; Clare, 1988). Consultation, on the other hand, is seen as important for the more "seasoned" professional. As identified in the literature, peers at similar levels may be a significant resource to assist in evaluative assessments of this nature (Weinbach and Kuhener, 1986).

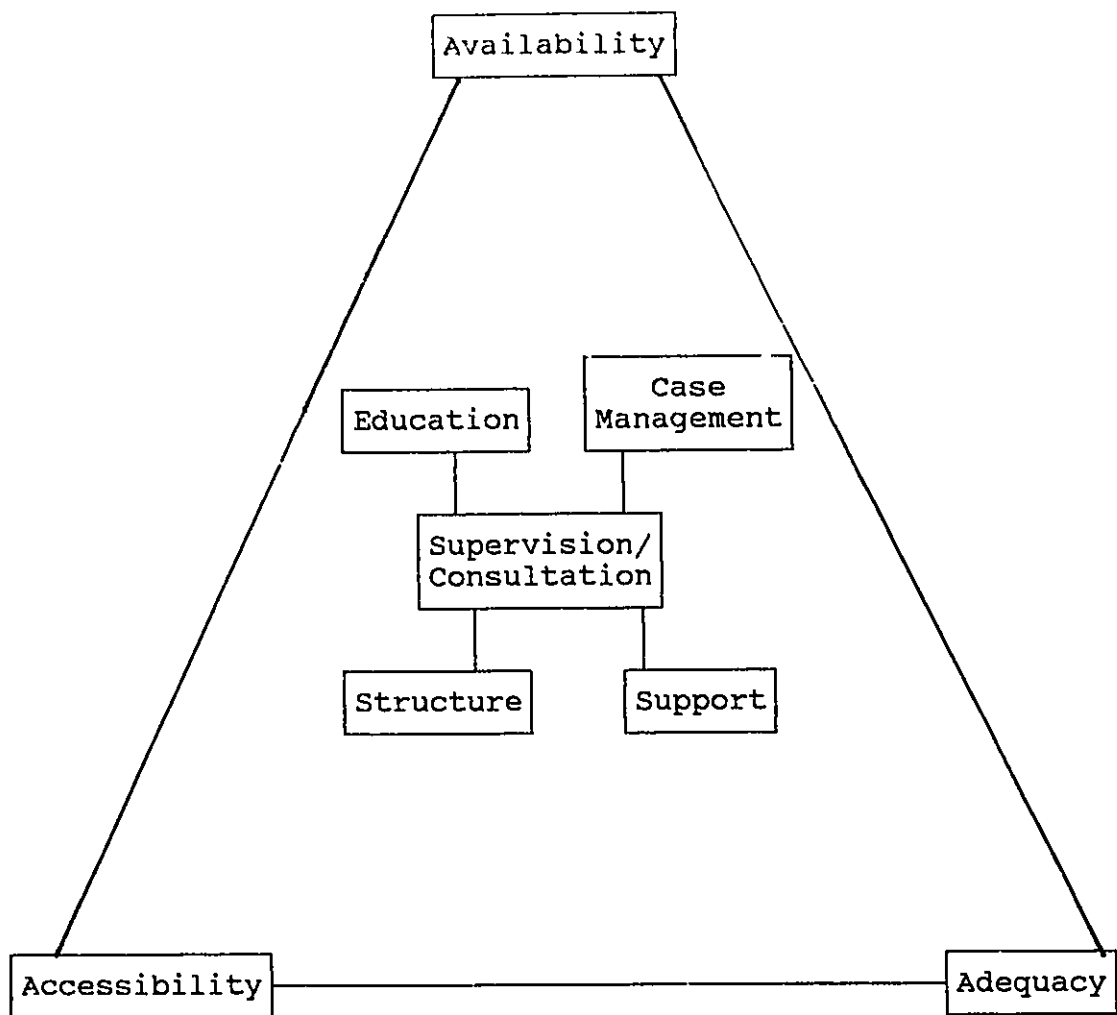


Figure 5. Ideal Components of Supervision and Consultation

In regard to education, those subjects who preferred supervision wanted the opportunity to learn from their supervisor various methods and options and draw from the supervisor's expertise. In addition, the sharing of this type of knowledge was seen as important. The educational component for consultation involved more than anything, a sharing of knowledge, information, perspectives, and ideas. One social

worker said they wanted to discuss things on a more structural level, a level which was more related to societal issues rather than direct practice issues.

The second component was support. Subjects wanted their supervisor to be supportive of the worker's actions, offering options and ideas, not directives and strictly defined methods by which to practice. The support aspect of consultation was not altogether crucial because:

"After being in this field for so many years, I think I'm confident enough to not need support per se. But having peers to share some of the frustrations is quite welcome."

The third component was case management which entailed for supervision, helping the supervisee to assist in resolving issues in the cases for which he or she was case manager. Case management for consultation was not seen as highly important because most of the consultation would not be held in the agency setting. Furthermore, social workers at this level felt confident enough in their intervention that they did not place the importance of consultation on case management as a priority.

The fourth component was structure. The workers wanted some consistent and specified allotment of time set out for supervision (say, once every three weeks for one or two hours). As well, they wanted supervision on an ongoing basis, informally for emergencies and support. The agenda for supervision sessions would ideally be set by the worker, focused toward the worker and the professional and personal

development of the worker. Structure of consultation was seen to occur within a peer group of like-minded professionals, all of whom had practiced within the same framework and at similar intellectual, experience and age levels.

At another level of analysis, the issues identified from the sample in regard to the need for appropriate supervisory and consultative processes are best described in three words: availability, accessibility, and adequacy.

Availability was cited as most important. Some workers said that they had no opportunities for supervision. Indeed, organizational constraints demanded that all workers were involved in direct practice duties and no supervisors were hired. The other aspect of this was that supervision was focused on case management only, and they needed their supervisors to be present for more than just case management discussion.

For those who preferred consultation, the lack of people at similar career level, age groups, and intellectual understanding created difficulty in finding appropriate peer groups. Additionally, whereas supervision takes place in the agency, on agency time, consultation does not. Therefore, the structure is more intricate and depends on the personal schedules of those involved.

When supervision was available, accessibility was cited to be a problem. Organizational demands impeded supervisors' time to devote to social workers in relation to the issues

identified above. Many social workers reported that in their careers, the supervisory component had taken far less of a priority over the years as supervisors have been dealing more and more with administrative duties focused on the successful operation of the organization.

In regard to consultation, many social workers who found people with whom they wished to form consultative relationships encountered difficulties associated with time, primarily. Further, some social workers were aware of consultation at a "fee-for-service" basis. Finally, such consultation was not always at close proximity to the social worker's area of residence.

A number of subjects reported that even if supervisors were available, they were not seen as helpful to the social worker. Thus, the issue of adequacy was seen as important for social workers to address. One main problem noted was that many supervisors did not have social work education, training and/or experience. As one respondent noted,

"There's no way I'm going to see my supervisor. I have scheduled time every week, but I've gone only once. My supervisor is not a social worker. So [he/she] doesn't know my values and ethics. [He/she] comes from [his/her] own perspective. But you know what's worse than that? [He/she] doesn't want to know what social work is all about. I find that to be insulting to me as a professional and as an individual."

Some in the sample said that again, because of the lack of time, supervisors did not devote sufficient time to all the elements of supervision that were ideally sought after.

IV. Organizational Context

Consistent with predetermined sampling criteria, the entire sample worked in HSOs. In regard to perceptions of effectiveness within the organization, questions were asked addressing: accountability to groups, knowledge of how organizations are evaluated, and how they affect practice.

11. To whom do you see yourself as accountable ?

This question was presented with a list of four groups cited in the literature to which social workers may feel accountable. These results are reported in Table 6. Some placed accountability to the self in addition to the groups listed. This was omitted from the table, but is discussed later in this section. In all cases, the client was placed first in the accountability hierarchy. The final response lists organization as first, because the workers perceived no clear and/or particular allegiance to either the client or their organization.

Table 6
Order of Accountability to Groups by Respondents (N=25)

| Reported Rank Order of Importance | Relative | |
|--|------------------|----------------|
| | Frequency (f) | Percent (%) |
| 1. Client, organization, profession, society | 9 | 36 |
| 2. Client, organization, society, profession | 5 | 20 |
| 3. Client, profession, organization, society | 6 | 24 |
| 4. Client, profession, society, organization | 2 | 8 |
| 5. Organization, client, profession, society | 3 | 12 |
| Total | 25 | 100 |

12. In what ways that you know of is your organization's effectiveness evaluated?

Responses from this question are shown in Table 7. Since all HSOs in which the sample were employed were publicly funded, all confirmed a method of organizational evaluation as being the criteria set out by funding bodies, largely based on number of clients served. Besides this, some respondents reported that quality assurance surveys were distributed to clients after their treatment ended. Relatively few organizations used community feedback surveys. Most noted informal and internal mechanisms as the prominent means through which the organization was evaluated. Informal evaluations consisted of unsolicited feedback from clients, associates of clients, and other community professionals. Internal organizational mechanisms include peer auditing, the commonplace grievance and complaints procedures, accreditation processes and strategic plan updates.

Table 7
Respondents' Perception of How Their Organizations Were Evaluated (N=25)

| Evaluation Sources (*) | Frequency (f) | Relative Percent (%) |
|----------------------------|---------------|----------------------|
| 1. Funding bodies | 25 | 100 |
| 2. Informal methods | 17 | 68 |
| 3. Quality assurance | 16 | 64 |
| 4. Internal mechanisms | 12 | 48 |
| 5. Community questionnaire | 8 | 32 |

Note. (*) These methods are not mutually exclusive of each other.

As indicated in Table 7, funding bodies and informal methods were the most frequently reported forms (of which respondents were aware) that organizations were evaluated. Interestingly, there were fewer quality assurance methods reported in this data set.

13. *In what ways does your organization enhance and/or impede your ability to maximize your effectiveness?*

Eighteen respondents or 72 % said their organization, in some ways enhanced their effectiveness. Only 12 % reported that the organization did not enhance their effectiveness in any way and 16 % stated that their organization neither enhanced nor impeded their effectiveness.

Discussion of the organizational context.

i) Perception of accountability: Most respondents (88%) placed the client first in their hierarchy of accountability. It was clearly noted that this was the foremost group to which they were obligated. They said that the clients deserved recognition and dedication of service. The commitment of workers to their clients was undoubtedly the primary motivation to justify service effectiveness. Because the social work profession is based on service provision toward the betterment of individuals and society, it was expected that the sample would be accountable to the client, first and foremost. Further, since the sample was wholly made up of direct practitioners working in HSOs, it was also expected that their allegiances to the organization would be strong.

Of the sample, 56 % cited accountability to the organization as second. The organization was seen by the subjects as the representation of the public interest. Thus the effectiveness of the social worker was defined by the effectiveness of the organization (Edward, Faerman, and McGrath, 1986). However, as reflected in the literature, many workers found that the organization's perception of effectiveness was quite different from their own (Clare, 1988). As noted by one respondent:

"they're the ones that hire us, pay us, and keep us in the job, so you've got to have some allegiance to them."

Those who placed society and the profession after client and organization reflected the public context in which social work exists (Siman, 1975). Because the profession is so highly dependent upon public funding for its activities, its members, therefore, would likely place accountability to the organization as higher in relation to the profession and society. Further, subjects reported they had weaker links to the profession and that they did not feel that they had anything tangible to owe the profession. Additionally, many said they were accountable to society as it was society's opinions and judgements which they had to face before the profession's:

"I see the profession as being a loose nebulous realm. I don't feel any accountability or allegiance to the profession."

Where subjects placed the accountability to the profession in higher regard (32 %), the main reasons were seen as being attributed to the profession's future. One social worker said:

"In the long run, if you prioritize the profession, your work becomes far more valued."

Further, some subjects saw an ethical and professional dilemma in placing accountability to the organization higher than the profession. As noted by one subject:

"The type of profession we are in, we have a humanistic oriented basis and if the organization is at cross-purposes with that, we can't continue to work. It should ideally become easier to drop the organization before the profession."

Moreover, comparisons were made between various professions in this response set. It was noted that in professions such as medicine and law, the workers are accountable to their respective professional bodies as licensing and regulating authorities. Further, unprofessional conduct usually results in revoking their privilege to practice. Although there are simiolar procedures in place for the profession of social work, since it is not formally regulated, it may be argued that social workers may not perceiue accountability to the profession as their highest priority.

Accountability to the self was noted by a few (20 %) of the respondents in their continuum. They placed the self either above all the other groups or in combination with the client. One respondent said:

✓

"If you're not true to yourself, then you're not true to anything else, and you're not genuine which goes against everything social work stands for."

Therefore, accountability was a difficult subject for most of the subjects. As Gitterman and Miller (1989) noted, the worker is placed in a position of being accountable simultaneously to various groups. Thus, the variation of responses to this question reflected the fact that the profession must contend with escalating costs, budgetary constraints, higher demands for service, demand for accountability, public criticism and proof of effectiveness (Briar, 1973; Newman and Turem, 1974; Haselkorn, 1978).

ii) Methods of organizational evaluation: For the most part, respondents were not fully aware of the particulars of how their organizations were evaluated. Most speculated that such evaluations were based on client numbers and funding criteria. Few knew what such evaluations entailed. They reported being asked periodically to submit records of the number of hours per week or per day spent on counselling, field work, consulting, reading, etc. In addition, the workers noted that client satisfaction surveys and community feedback surveys were used; however, they were unaware of the details of such surveys. Further, most workers reported never seeing the results of such evaluations.

Of particular interest in this regard was the noted relative lack of enthusiasm that many in the sample had for evaluations of any kind. As stated by one respondent:

"Yes, I do them. And yes, I read them. But honestly, there's a pile over there that they go into. That pile is as useful to me as kindling. I don't need it. It's useless and not related to what I do."

This speaks to the relevance of such organizational evaluations for subjects. More specifically, the organization is the body under which the worker is employed. Therefore, evaluations of this nature, depicting the organizational success, failures, impacts and issues are on a general level which is not at all appropriate or relevant to the day-to-day practice activities of social workers. Thus, evaluations need to be specific, first to the individual social worker, and second to the practice activities performed.

iii) How the organization enhances and impedes effectiveness: In relation to enhancing practitioner effectiveness, organizations were seen to primarily provide the mandate, policies and procedures for such activities. Some agencies were noted as having a higher regard for social workers, thus enabling them to work in a more collaborative fashion with others. In this regard, worker interests were supported, autonomy was granted, independence was espoused and creativity was encouraged. The informal organizational environment of some organizations was less hierarchical and encouraged participatory management where administrators valued the input of social workers. In other settings, an environment where evaluation was not perceived as threatening provided for the consistent provision of excellent service.

By contrast, those who perceived their organizations impeded their ability to practice effectively noted many issues, namely: 1) no organizationally provided supervision; 2) little opportunity for professional development; 3) little regard for the work of the social worker; 4) a bureaucratic gap between front line work and administration; and 5) the lack of participatory management. As a result, respondents noted that creativity in intervention was stifled, recognition of effort was not acknowledged and a quantitative nature to evaluation negatively impacted on social workers trying to do the best job they could. Issues surrounding negative feelings of workers toward their organization is best described by what one respondent termed "*the corporate culture*":

"It develops informally. Beneath it, there is a milieu of a way that things have always been done. It provides a traditional way of doing things and discourages change."

As well, time spent on intervention and not prevention led to a type of "learned helplessness" best explained in the following quote by a subject:

"When everything is an emergency, nothing is an emergency and you don't know what to address. When you don't know what to address, you address nothing and nothing gets done."

Figure 6 illustrates the components that respondents in this study reported as essential to the realization of an ideal organization that promoted effectiveness.

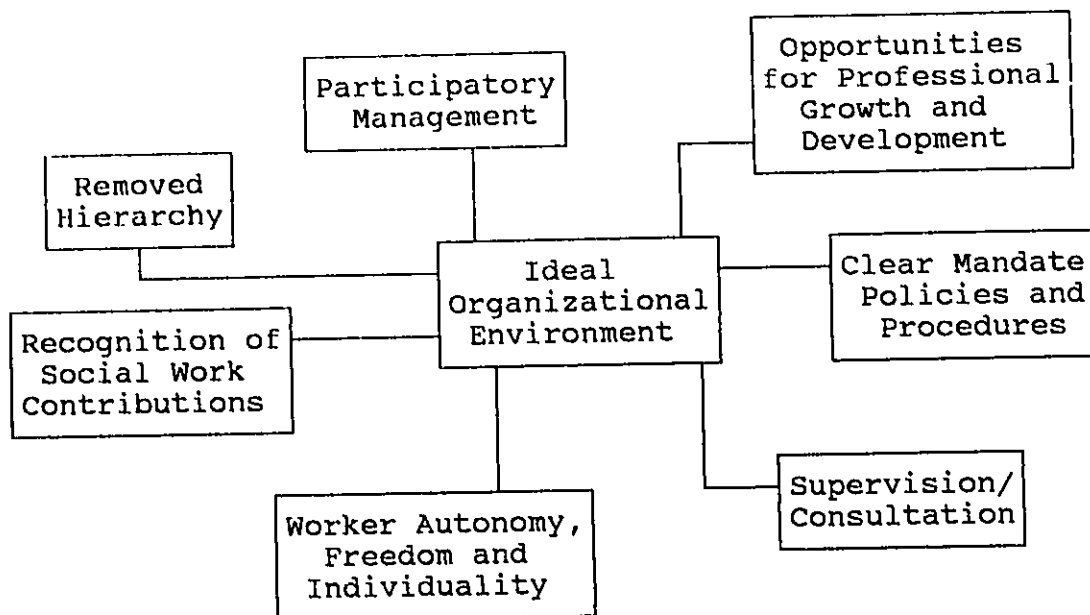


Figure 6. Components of the Ideal Organizational Environment

Social workers' perceptions regarding the organizational impediments on their effectiveness led to a further concern expressed by some subjects and reflected by Tropp (1973) that because of such organizational issues, clients would not truly experience the social worker's effectiveness. Social workers in the study who cited ways in which their organization impeded their effectiveness referred to a "traditional way of doing things" as the primary motive for the lack of change and the workers' subsequent lower professional self-esteem.

V. Professional Context

The final set of questions was based on the professional aspects of social workers' effectiveness. The sample were asked questions related to the societal perceptions of social work, the regulatory and unionization efforts posed by the

profession and their impact upon their practice, the use of the personality and self in social work practice, what they perceived were the best measures of their practice effectiveness and general comments.

14. *What do you see as the societal perception of you, the social worker and how does this affect your practice and effectiveness?*

Table 8 indicates the result of how social workers perceived the societal view of what they do professionally. Most of those sampled (48 %) perceived the societal perception of social work to be negative, whereas 40 % saw it to be mixed and 12 % said that society saw them in a positive light.

Table 8
Respondents Impressions of the Societal Perception of Social Work (N=25)

| Societal Perceptions | Frequency (f) | Relative Percent (%) |
|-----------------------|---------------|----------------------|
| 1. Generally negative | 12 | 48 |
| 2. Mixed | 10 | 40 |
| 3. Generally positive | 3 | 12 |
| Total | 25 | 100 |

15. *In what ways do you believe that regulation and unionization in social work can enhance/impede effectiveness ?*

The results to this question are summarized in Table 9. Interestingly, the majority of respondents said regulation

would enhance their effectiveness, and a parallel majority who said that unionization would not.

Table 9
 Respondents' Perception of Whether Regulation and Unionization would Enhance Social Work Effectiveness (N=25)

| Response Categories | Regulation | | Unionization | |
|---------------------|---------------|----------------------|---------------|----------------------|
| | Frequency (f) | Relative Percent (%) | Frequency (f) | Relative Percent (%) |
| Yes | 19 | 76 | 10 | 40 |
| No | 5 | 20 | 14 | 56 |
| Unknown | 1 | 4 | 1 | 4 |
| Total | 25 | 100 | 25 | 100 |

16. Do you believe that your organization and the profession encourage you to use your personality and yourself to enhance your effectiveness?

The results of this question are reported in Table 10. This question was posed to elicit ideas social workers had about the particular element that social workers use - their own selves and personalities to enhance practice and effectiveness.

Table 10
 Respondents' Perceptions of Organizational and Professional
 Encouragement of Use of Self in Practice Effectiveness (N=25)

| Response Categories | Organization | | Profession | |
|------------------------|------------------|----------------------------|------------------|----------------------------|
| | Frequency (f) | Relative Percent (%) | Frequency (f) | Relative Percent (%) |
| yes | 17 | 68 | 12 | 48 |
| no | 3 | 12 | 11 | 44 |
| unknown | 5 | 20 | 2 | 8 |
| Total | 25 | 100 | 25 | 100 |

17. What do you need to do to further enhance your effectiveness?

A range of responses was offered about how the subjects could further enhance their own practice effectiveness. First, many said they wanted to do more reading. For instance, they understood the need for reading literature about theory, practice, methods, and professional issues. Second, many saw the need to attend more workshops, seminars, etc., for professional development. Third, many perceived the need to seek out supervision or a group of peers with whom they could collaborate. Fourth, the need to better promote the profession was emphasized. Fifth, taking care of the self (physical and mental) was seen as important. Many social workers noted a feeling of possible burnout and recognized that they need to further separate their work from other aspects of their lives. Sixth, a general openness about life

experiences, learning and growth was noted as essential. This related to the continued need for learning, understanding and building on experiences.

18. *What do you believe are the three best characteristics which describe your practice effectiveness?*

A large list was gathered from the responses to this final question on the demographic questionnaire. The items were then summarized and categorized, presented as follows:

Client-related

- client satisfaction
- treatment outcome
- goal fulfilment
- client evaluation of process and outcome
- client's personal growth
- client self-rating
- pre-post intervention rating scales
- client empowerment
- change in client behaviours

Worker-related

- worker satisfaction
- willingness to learn and change
- personal growth
- professional growth
- controlled emotional reactivity (objectivity)
- self-perception

Evaluation-related

- evaluations
- helpfulness to colleagues and peers
- supervised observed intervention sessions
- case presentations to multi-disciplinary teams
- feedback from client, peers, professionals,
administration
- continued client contact post intervention
- practice congruent with basis social work values

Organizationally related

- referrals through satisfied client
- increased usage of program
- ability to work effectively within the organization

Societally-related

- change in social policy
- change in societal attitudes about clients

Competency, skill and ability related

- ability to engage clients
- ability to assist clients in setting and reaching goals
- ability to advocate for client
- concern for clients
- clinical skills
- ability to articulate client needs to community
- stimulate clients from emotion to logical thought
process

19. *Do you have any other general comments or observations about practice effectiveness?*

The following are the verbatim responses of those social workers that addressed this question posed at the end of the interview.

"I think social work has spent a lot of time doing and not a lot of time thinking about what they're achieving. We need to be much more focused on one's own part in the client system and how one affects it effectively."

"We need to zero in on effectiveness and productivity which you don't hear about in our field. We never talk about how productive we are. We need to link our effectiveness with our productivity."

"I recognize that there's a fine line between those that sit in the client's chair and those that sit in the social worker's chair."

"I guess overall, if social workers felt better about themselves, we could get somewhere. We all suffer from a collective sense of inferiority."

"I believe that people are either meant to be social workers or they're not no matter how much book learning or education they've received or claim to have. You either have it or you don't. I guess that's why I don't feel as accountable to the profession as much as I do to myself and the people I try to help."

"A social worker needs to be ready and willing. It's difficult for clients to go through what they do. If the social worker can't respect the person in their office, they're not effective and they should leave the profession."

"Social work is a way of thinking, not just a job, so effectiveness is not easy to measure."

"I think the key to effectiveness is the overall ability to be open and aware of other things."

"I think that when you're going through social work training, you can't help but take some of the training as part of your personality. It's very hard to distinguish who you are from who the social worker is. That serves as both an advantage and a disadvantage to effectiveness."

"Social workers in general are quite modest and tend to put themselves down. I try to fight that all the time. I wish more of us would see how worthwhile we are."

"A link needs to be established between professionalism and effectiveness. Unfortunately for social work, at this point, you can be one without the other."

Discussion of the professional context.

i) *Societal perception of the social worker:* Three respondents said that the societal perception of social workers was positive. They perceived that generally, people thought they were doing a good job, that they were helpful and that they deserved to be recognized.

"Under-valued, under-rated, and under-represented" - this was the response from one respondent which best summarized the responses for those who perceived that the societal perception of social work was largely negative. The words that many social workers said that society generally used to describe them were: "bleeding hearts", "do-gooders", and "tree-huggers". In this regard, social work was not seen to be taken as seriously as other professions. In addition, one respondent said:

"Since we mete out social resources, since we fight for the underclass, we are valued for it. But we are harshly blamed for every social problem that exists. I'm not paid enough or respected enough or trusted enough to take that kind of blame."

A large proportion of respondents (40 %) said that the societal perception of social work was neither positive nor negative. Some reported that it was "confused" due to a lack of general knowledge of what social workers do. One worker saw this same observation contributing to a "limited" perception of social work because social workers were seen only to be "welfare workers". Some subjects felt that the societal perception of social work depended upon which section of the population was examined. For example, clients generally were seen to appreciate social workers, while taxpayers did not. Among professionals, there would be a mix as well. Some would value social workers, others would not.

Overall, 88 % of the sample did not perceive of the societal evaluation of social workers to be absolutely positive. The negative perception arises out of the following observations: 1) social work's poor definition and creation; 2) the negative public outlook; 3) evaluations illustrating social work as ineffective; and 4) negatively associated social work roles (e.g. "shit disturbers", "child snatchers", "welfare workers").

In regard to the largely negative societal perception of social work, not one respondent encountered this in a correspondingly negative sense, contrary to what the literature notes (Grinnell Jr. and Hill, 1979; Meinert, 1975; LeCroy and Rank, 1987). Social workers did indeed see themselves as effective in their practice which corresponds to

the findings in the literature noted (Grinnell Jr. and Hill, 1979; Grinnell Jr., Kyte and Gorsuch, 1980; Meinert, 1975). For the most part, that society saw social workers as ineffective was not internalized into the social worker's own professional work. Instead, respondents saw this as a challenge:

"I suppose if everyone thought I was great, there would be no need to improve."

Ultimately, social workers are evaluated by both groups in society - those that require services and those who pay for them. Therefore, social workers who perceived that society perceives them as ineffective have justified reason to believe so as reflected in the literature (Grinnell Jr. and Hill, 1979; Meinert, 1975; LeCroy and Rank, 1987).

Also, 68 % reported felt that the societal perception, be it positive, negative or mixed, did have some effect on their practice and effectiveness while 32 % responded that the societal perception did not have any effect on them whatsoever. Some perceived that their work was affirmed. They reported feelings of confidence and conviction in what they were doing. They were encouraged to continue on with what they were doing.

On the other hand, some social workers said that they had to work harder than other professions to achieve a similar amount of respect. Some saw the need to promote themselves and what they do in the community to those who are ill-informed. Some were compelled and determined to prove their

efficacy. Some saw the need to promote themselves more in professional groups as effective practitioners. A common theme was the unification of social workers in a collective voice to promote social work.

For all respondents, the societal perception of social work, be it positive, negative or mixed had no effect on their practice and effectiveness whatsoever. As stated by one subject,

"I work as a social worker. I know my job and responsibilities., I am obligated ethically and legally to provide a service and regardless of what others think of me, I do what I do to the best of my ability, within the parameters which I am directed and paid."

Ironically, although social workers say that they are ultimately obligated to their clients, and although they have a stronger allegiance to their profession, most of their efforts seem to be directed at trying to establish a much-desired status that arises out of a serious lack of recognition, fostered by a professional lack of self-esteem.

ii) Unionization and regulation: From the sample, 76 % of the subjects said that regulation of social workers would enhance effectiveness. Moreover, they were confident in their abilities to perform competently as social workers however, there were some benefits of regulation reported which included: 1) a more stringent policy to determine who is permitted to enter the profession; 2) legalized licensing of who can call themselves social workers; 3) the legitimization of the profession; and 4) protection "from being associated

with incompetent people who claim to call them social workers."

On another level, regulation would demand that social workers engage in ongoing professional development to maintain their certification. A body would have to be created that would oversee the activities of those who practice under the realm of social work. Societal and professional recognition, an important benefit of regulation, were seen as bringing "honour" to this profession.

Those who said regulation would not enhance effectiveness alluded to the fact that regulation has been an issue that the profession repeatedly attempted to bring to the attention of the government to little avail. One subject said:

"I've earned two degrees in social work. I'm competent and effective. I do not need some body to tell me I'm a social worker. More than that, I'm not willing to pay the three hundred dollars to take a test."

Another social worker indicated a fear that regulation would take away from the profession's unique nature in the helping field:

"Other professions are somewhat removed from their clients. If we regulate ourselves, we would be widening an already existing gap between our clients and ourselves. It brings a status that I do not want."

Those that perceived unionization as beneficial to enhancing social work effectiveness cited three reasons. First, unionization was a means by which workers in the profession could have control over the direction that the

profession would take in order to gain recognition. Second, it related directly to job security. Workers felt that if they knew their jobs were protected, they would not have to spend time worrying about that aspect; the time could be better divested into the energies dedicated to serving the needs of the clients. Third, unionization was seen to have bargaining power in wages earned work conditions and seniority.

Those who said that unionization would not enhance effectiveness point to the following reasons in that unions: 1) have outlived their usefulness; 2) were seen to homogenize people; 3) fostered deprofessionalization; 4) stifled creativity; 4) discouraged individuality; and 5) endorsed mediocrity. Furthermore, unions concentrated on workers and focused away from the serving the client to promoting the rights of the workers. One worker saw unions as "a fraudulent manifestation of workplace democracy". The goals of the union do not become client focused. As described by a subject,

"One of the roles that social workers play is that of the mediator. The other thing we do well is work with systems. Unions are generally not systems focused. They want to protect a certain group and I think that goes against our values."

In both regulation and unionization, one respondent did not provide any response to the issues. They did not know the issues well enough to judge or that they simply did not know how to answer the question or that they did not want to comment on the issue. The issue in relation to the societal

outlook on social work and the professional issues that social work faces are outlined in Figure 6.

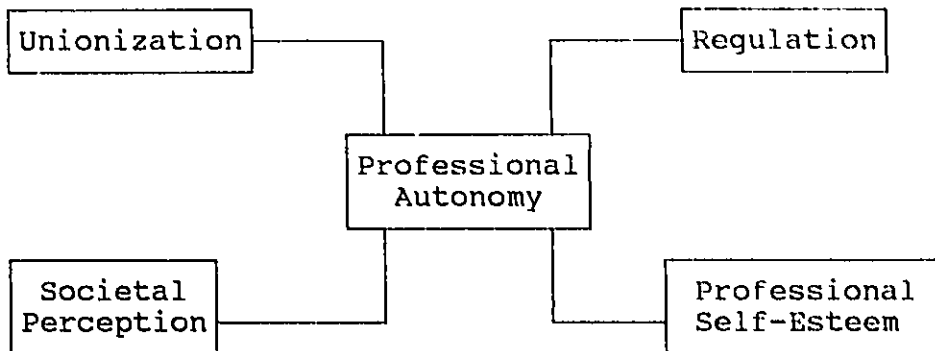


Figure 7. Components of Professional Autonomy

iii) Use of the self: There was also acknowledgement among respondents that a particular strength of social workers rested in their ability to use their selves and personalities to form productive connections with their clients which serve to facilitate goal attainment.

The organization was seen to encourage the use of self in allowing for and promote worker individuality. Some organizations promoted a rather strong "infantilizing" approach to worker autonomy which stifled the use of the self. Some said that their organizations neither encouraged nor discouraged the use of self.

The profession, through the use of students, professional associations and literature does have some influence in promoting the use of self. Others said that it did not play a strong part in their lives since they graduated. Yet others could not comment. In the words of one respondent:

"There's not nearly enough emphasis on one's emotional functioning. The focus is on the client. As I become aware of my own functioning, I improve in the clinical context and I believe there's not enough focus on the contribution of the clinician."

In regard to the use of self, the point made about organizations not strongly addressing workers' personalities and self in practice is supported in the literature (Glicken, 1980; Rhodes, 1979; Wetchler, 1989). However, whereas 48 % of the respondents in this study noted that the profession does encourage the use of self, the literature notes that for the most part, the worker's personality and use of self are ignored by the profession (Rhodes, 1979; Jackson and Ahrons, 1985; Star, 1979).

iv) Future endeavours for practice effectiveness: Certainly, the areas of improvement that the sample set out for themselves reflect a degree of considerable self-evaluation, understanding and professional constructive criticism. This not only reflects the strong sense of awareness that social workers have regarding their practice and effectiveness, but also points to the responsibility social workers take to improve themselves. Specifically, the multitude of responses offered by each in response to the question bring to light the sincere dedication that they have toward their clients, their profession and their organization.

However, there must be a point made as to who else must take responsibility for such development. Evidently, the subjects are working in the best interests of their clients.

Yet, organizations can help to reach some of these goals by addressing the needs identified by the social workers. Further, the profession of social work can contribute to ameliorating these issues by assisting social workers. The HSO and profession, in conjunction with the social worker must identify the needs for professional development and provide the necessary time, resources and energy to these ends.

v) *Indicators of practice effectiveness:* The list gathered regarding what respondents saw as the best indicators of their practice effectiveness are grouped according to related aspects of what social work entails. Further, it is interesting to note the variety of responses received. More specifically, there is not one indication of effectiveness as measured by number of clients served. Moreover, the respondents identified qualitative characteristics that they feel best assessments of their practice effectiveness.

vi) *General comments:* The general comments taken from the interviews reflect a group of social workers who have thought about their profession, its many aspects and how they are affected by the many facets of it. Further these comments show the workers' specific ideas, opinions and attitudes about professionally oriented issues, the basic values and ethics of social work, the occupation context and the clients service provision. Figure 7 illustrates the culmination of all of the issues identified in this study which, when accumulated, sum up practice effectiveness.

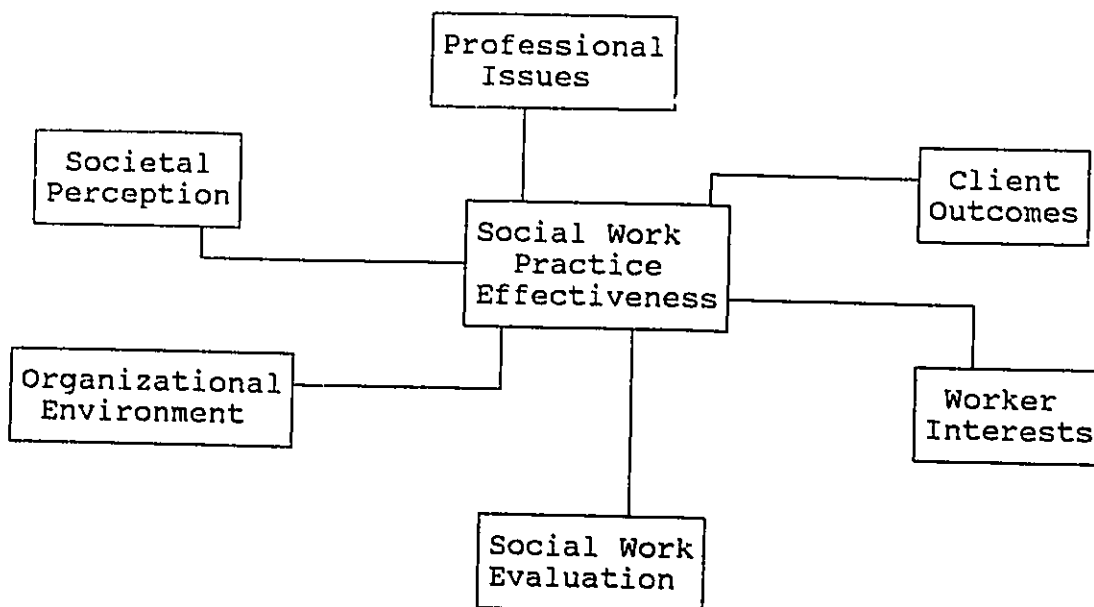


Figure 8. Components of Social Work Practice Effectiveness

Figure 8 adequately summarizes the main concepts and aspects of practice effectiveness covered by the scope of this study. However, at another level of analysis, this figure also represents a holistic equation of practice effectiveness. Specifically, the ideal of practice effectiveness is not simply any one of the components above, rather it is a summative concept, one which requires a complete and exhaustive approach. Finally, through this analysis, as one comes closer to exploring the concept of effectiveness, it becomes apparent that it is a multi-faceted concept, one which is more than the "sum of its parts".

Conclusions

This section presents the conclusions of the study as related to: 1) the review of the literature; 2) the research questions; 3) the limitations of the study; and 4) the recommendations.

I. In Relation to the Review of the Literature

The review of the literature categorized issues under: conceptualizing effectiveness, contextualizing effectiveness and current directions in effectiveness. A discussion of each follows.

Conceptualizing social work effectiveness. Literature in this area focused on how effectiveness was defined in social work. The literature conceded to the fact that social work is a profession composed of various activities and objectives. Since social work, in and of itself is variously and difficult to define, its evaluation is similarly difficult to define.

In the current era, social work has evolved from its humanitarian and socially conscious roots to a profession which is not evaluated on the activities which it performs, but rather on whether it does anything at all. More specifically, it appears that social work is more stringently scrutinized by organizations, funding bodies, other professions and society. Thus, the profession focuses on demonstrating its units of service (to funding bodies) but not necessarily on the quality of such service.

As well, social work has not received the societal status, or at least recognition awarded to other professions due to a number of issues. One main reason for this relates to its minimal indigeneous research activity. When research is conducted, it is more directed to evaluating programs than the practice activities of the profession.

Social work has been criticized for not following scientific criteria in conducting research-based activity. Further, what has been advanced tends to lack generalizability. Thus, there are a number of isolated studies published, few of which are generalized toward the advancement of professionally-based knowledge.

The literature also noted that there exists a large gap between research and practice. Some authors asserted that links between academics and practitioners must be established, maintained and strengthened. The process through which this can be facilitated has been identified as a reciprocity of resources, ideas and questions. Through such a collaborative process, not only will the link between research and practice be forged, but there will also be research which is specific to the field and day-to-day practice.

Contextualizing social work effectiveness. In regard to understanding social work effectiveness within its practice context, the literature was sub-divided into examining social work in inter-disciplinary settings, organizations, management issues, and the occupational context as they relate to

effectiveness. In relation to the multi-disciplinary aspects, the literature found this trend attributed to the financial constraints that organizations face. However, it was noted that such formats also help to better serve clients in general, as exemplified by the adage, "two (or more) heads are better than one". Thus, the quality of service delivery of multi-disciplinary teams and units was noted by the literature as a means by which social work effectiveness was enhanced.

However, issues arose regarding the evaluation of social work practice in such settings. It was noted that social workers were somewhat apprehensive about being evaluated by non-social workers as all professions are different.

Further, most social workers were employed in organizations in which they must practice within the realm of the organizational policies, procedures and methods and the overall organizational milieu. The literature asserted that organizational perceptions of effectiveness were largely based on those criteria that funding bodies set out for the organization's continued funding and survival. Thus, in an organization's struggle to become more accountable, relevant and recognized, the notion of effectiveness will differ significantly from one HSO to another. Specifically, organizational perceptions of effectiveness were based on purely quantitative criteria of client numbers and outcomes which in large part, had little to do with understanding practice effectiveness of social work.

Further, social workers may not improve their effectiveness as organizations for the most part do not provide opportunities for training and/or professional development. In this way, it was noted that many organizations have no set criteria on what effectiveness is and thus, social workers are provided no direction by which to guide their practice development and hence, effectiveness.

Additionally, the literature suggested that the role of supervision and peer consultation remained an untapped resource through which social workers may improve their practice effectiveness. As such, management needs to lead and direct practice in ways beneficial to all stakeholders: clients, workers, organization and funding bodies. A collaborative, participatory management model was cited as one means through which such effectiveness may be enhanced.

Within the occupational realm of practice, the literature noted that most social workers believe that they are indeed effective in their day-to-day practice activities. The professional use of the self and personality were strongly facilitative in understanding the effectiveness of the helping process for social work. The literature reported that social workers had judgementally biased opinions in regard to their clients' successes and/or failures. Some were related to the client, while others were focused on questioning the self. Indeed, self-perception was noted as one way in which practice effectiveness may be assessed.

Generally, social work research largely ignored the aspect of personality and self in regard to understanding practice effectiveness. The literature reported that if the social workers were recognized for their individual personalities and differential use of self, then they could become more effective, thus contributing to organizational efficiency and overall professional effectiveness.

Current directions in effectiveness. The literature cited societal recognition as a key factor in understanding practice effectiveness. When society viewed social work as a viable, important, relevant and unique profession, then social work attained status, recognition and acceptance through which it potentially become more effective.

Evaluation activities were also seen as important as part of the normal activities of practitioners. Further, such evaluations must be based on peers, supervisory and management input. Evaluation criteria should reflect indicators of effective practice as well as efficient practice.

HSOs and universities are urged in the literature to forge links and incorporate practice and research in a symbiotic relationship. Questions from the field should be taken to researchers and answered. In turn, answers should be tested in the field and more questions developed. Additionally, research must be asserted as a more tangible and important part of the educational curricula for social workers during their education and training.

Evaluation activities themselves must also be research based. Social workers must be involved in evaluative activities which are grounded in research orientations and contribute to an overall body of social work knowledge. It is asserted in the literature that this type of activity will enhance social work's overall effectiveness.

II. In Relation to the Research Questions

1. How is effectiveness in social work practice defined ?

In this study, respondents primarily defined effectiveness in terms of client's goals being reached. Essentially, if clients were satisfied with the services they received and if their goals were achieved, then workers thought they were effective. In addition, worker satisfaction and organizational success were also seen as measures of worker effectiveness.

2. How is effectiveness in social work measured ?

The sample cited many modes through which the effectiveness of social workers was measured. First, in the multi-disciplinary team, the social worker was evaluated based on his or her contributions to the overall team effort in meeting the needs of the client. Second, funding bodies had strict quantitative criteria which were used to gauge the effectiveness of organizations and social workers. Third, within organizational settings, some workers reported the use of client satisfaction surveys or quality assurance questionnaires [many of which they never saw]. Fourth, there

were some internal and informal means through which the sample reported being evaluated. These took the form of supervisory sessions, client feedback, and referrals through past clients. Fifth, all respondents reported being involved in a continuous process of self evaluation and reflection. This kind of process purportedly always helped respondents to consider ways in which they might have intervened in the future to enhance their effectiveness. Finally, social work effectiveness was perceived by the societal perception that existed. Currently, according to the respondents, this perception ranged between a negative and a mixed one.

3. What effect do human service organizations have on social work practice effectiveness?

HSOs were seen by the respondents to both simultaneously enhance and impede social workers' effectiveness. Most notably, HSOs provided social workers with an administrative structure, mandate, policies and procedures by which they could carry out their day-to-day practice activities. Some agencies were quite supportive of their workers while others impinged on worker autonomy, thereby stifling creativity. Unionization in some settings was seen as a productive component of the organizational setting although most believed it as relatively unnecessary. Some organizations were seen to encourage the use of self, while others did not acknowledge this. Generally, the organizations in which respondents worked were mixed in having a participatory management model

of operation, although this was suggested as a main mode of effective practice.

4. What importance does research about social work effectiveness have on direct practitioners?

All respondents understood the need for research in their practice however, few incorporated a significant amount of research activity into their interventions. Most cited scepticism about research, and a general lack of interest and time as the main impediments preventing them from involving themselves more in research-based activities. Additionally, subjects saw the potential for strengthening the links between research and practice as lying within the cooperative efforts of the School of Social Work in Windsor and the local agencies. Essentially, subjects saw the lack of research activity as directly related to the University's lack of cooperation. They reported that researchers and practitioners must work together to better answer questions from the field, propose new, productive and relevant interventive methods. Moreover, research was seen as needed to be directed by the day-to-day practice activities of practitioners.

5. What activities do social workers participate in to enhance effectiveness ?

Social workers in this study were found engage in a number of activities to improve their practice effectiveness. First, some were involved in supervision and consultative activities with peers they had sought out, outside the realm

of their respective organizations. Second, the sample were increasingly involved in efforts to regulate the profession. Third, subjects acknowledged the need to read more about their field. Many recognized the professional importance of integrating research into their practice. Fourth, social workers in the study cited the need to engage in professional development activities such as attending workshops and seminars. Fifth, the subjects realized that they must work hard in promoting social work so as to challenge some of the pervading myths and stereotypes that societal groups may have about social work. Finally, many social workers acknowledged the need to take care of themselves (physically and mentally) so as to be more productive and effective in their practice.

6. What criteria do social workers consider important in the evaluation of their practice effectiveness ?

A rather large list of characteristics and indicators of practice effectiveness was compiled from this responses received to this question. The responses were generally related to the client's successes, the worker's professional success, the personal feelings and perspectives of the worker and external resources. Not one subject cited client numbers as a measure of his or her effectiveness.

III. Limitations of the Study

The first limitation of this study relates to the rather modest sample size of twenty-five (N= 25). Because the number of respondents was small, the findings were not readily

generalizable to other samples of social workers. Further, this study was regionally bound as it was conducted with social workers in the Windsor and Essex County area which further limited its generalizability.

Additionally, there was a mix of subjects with the B.S.W. degree, the M.S.W. degree and both. Although the conditions for subjects holding only the B.S.W. degree were that they must have been in the field for at least five years, there might be some discrepancies relating to the educational experiences of Master's versus Bachelor's degree professionals. There was also the issue pertaining to where respondents earned their degrees. No questions were asked about whether social workers received their degrees from, Ontario, Canada, the United States, or elsewhere. This may have impacted on the findings of this study as some universities are oriented in certain ways which may influence the social worker's practice perspectives.

Second, although the original demographic and interview questionnaires were pre-tested with the researcher's classmates, there was no specified indicated method for feedback. A structured format for feedback would have enhanced the study questionnaires. As well, a pre-test using a small sample of M.S.W. practitioners may have also helped refine the instrument.

Third, the method of data collection may have been flawed. Specifically, one part of the sample was collected

through the School of Social Work's list of active field supervisors. Third and fourth year students are supervised with social workers who are monitored through the school. The other part of the sample was collected through a snowball sample. The fact that subjects were collected by word-of-mouth, no controls were maintained on how social workers came to be in this study.

Fourth, the questions on the demographic part of the questionnaire may have been confusing to subjects although few noted any difficulties. Some of interview questions were also perceived as what confusing, as some were open-ended and others were closed. The open-ended ones provided no directions for the sample to provide answers and thereby may have confused them. The closed-questions seemed to be too closed at times.

Fifth, this was a qualitative study. Using a quantitative instrument in addition to these questions may have brought an enriched set of data/information. Therefore, multiple measures with different approaches would have enhanced the study.

The sixth issue relates to organizational constraints of the study. Of the 25, 22 interviews were conducted in the worker's organizational environment. This context may have prevented the subjects from answering some of questions as honestly as they might have. As well, respondents did not receive any aspect of the questions on the demographic or

interview parts before the researcher met with them. This may have prevented workers from answering as completely and comprehensively as they might have. If the workers had received the questions some time before to study them and formulate their responses, different results may have prevailed. As well, most were constrained by time. If the sample were to have more than one hour to answer questions in the study, different responses may have been elicited providing for greater depth and understanding of issues.

Seventh, this was a qualitative study. Researcher bias will have undoubtedly influenced the creation, wording and presentation of the questions. The creation of the questions reflected the researcher's interests rather than completely objective motives for the study. The wording of the questions may have been leading. Finally, the presentation of the questions (intonation, body language, interests, follow-up questions, questions for clarification) may have influenced the responses of the subjects in the study [despite the attempt to standardize and control for this on the part of the researcher].

Eighth, there was the lengthy process of transcribing and interpreting of tapes. Although the essence of what respondents said were reflected in these results and discussion, there might have been specific issues missed or unintentionally disregarded.

IV. Recommendations from this Study

Upon completion of this study, many issues have arisen that can direct a number of agents. These recommendations are directed toward: social work practitioners, human service organizations, the profession of social work and the field of social work research. First, with regard to social work practitioners, social workers are invited to examine their practice and relative effectiveness in relation to other professions. The use of evaluative methods such as the single systems design is also encouraged. They must also embrace the notion of the multi-disciplinary team as this will be the norm in client service provision rather than the exception. In such teams, social workers must further assert themselves as viable and relevant contributors to the process and be willing to be evaluated by other professionals and their peers. This will add to the credibility of the social worker and the profession at large. Social workers must also be willing to participate in research projects, continue to read research so as to broaden their knowledge base and incorporate research findings into their own practice. Social workers are also encouraged to form peer groups with other social workers who are at similar professional and personal levels and meet regularly.

Second, in regard to human service organizations, participatory management models are suggested in order to enhance effectiveness in social work practice and produce

workers who are more productive than in traditional hierarchical and bureaucratic operation of services. HSOs are thus encouraged to adopt this style of management. HSOs must also provide time for social workers to read about research, rather than continue in ineffective and interventive methods which do not lend themselves to evaluation. Organizations must also attempt to encourage links between and within other organizations so that social works can network with others to discuss issues. A peer supervision model is suggested in this regard. Additionally, HSOs must also incorporate some type of supervisory process by which social workers may gain some insight into their practice. Of course, this supervision must be appropriate and productive to the needs of the social worker. HSOs must also acknowledge, address and encourage a social worker's individuality and the differential use of the self. Organizations must also adopt formal client satisfaction and quality assurance surveys so as to periodically and constantly evaluate practice effectiveness. Such data should include input from front-line practitioners and data should be fed back to them. Finally, organizations must seek out professional development opportunities and encourage workers to attend workshops, seminars and courses and share the findings among other members of the organization.

Third, the profession of social work must realize that regulation is not unanimously agreed upon as a means by which

social work can be an established profession. If the profession is to encourage regulation, the concept must be made more tangible to the social workers, with professional and personal benefits and advantages specified and outlined. The profession must also provide professional development opportunities for social workers so as to improve individual and collective effectiveness.

Fourth, the field of research must make changes to improve effectiveness among social workers. The School of Social Work at the University of Windsor is one avenue for such research to develop. Organizations call for the University to strengthen communications with them so as to forge links to produce research which will be helpful to: the organizations, the School's reputation as a research based institution, the students who will gain real experience in the field of research, and the field of social work in general. Social work researchers must begin to write in ways that can be easily understood by the social work practitioners. Apparently, academics conducting research writing for other academics appears inappropriate and irrelevant to the everyday social worker. Additionally social work research needs to be focused in the field, in everyday practice and methods.

Finally, social workers were consulted in this study. A comparison groups of non social workers should be included for future studies to see how perceptions and attitudes differed. This would establish some comparative baselines.

V. Final Words

Social work effectiveness criteria here were perceived by social workers currently in the field. It is noted that funding bodies will probably not include qualitative criteria in their requirements, neither will HSOs. However, these must be considered a part of the professional criteria to evaluate effectiveness. Social work students are chosen based not only on academic excellence and intellectual abilities, but also personalities and the self. In supervision, students are taught to use their selves and be aware of how the self can enhance as well as impede interventive processes.

Yet, this nurturance of qualitative strengths ends when the student graduates. No longer are there opportunities for social workers to include quality of service as much as quantity. Coupled with the high public scrutiny that social workers face, this potentially adds to social workers' lower sense of self-esteem. In the end, workers' effectiveness is hampered. This study explored the ideal to which social work could have aspired. However, the reality of the profession is best encapsulated in the following words of a respondent:

"I think sometimes the paper data that people are often forced to use to examine their effectiveness may not be answering the questions that we need to find out. Frankly, I don't think that that would ever come to complete fruition. Often, the rationale for utilizing any instrument to measuring effectiveness is not honest and accurate as to what it's truly looking for. What may be behind the message is a bean counter. Accountability of numbers in no way reflects the accountability of practice effectiveness."

APPENDIX A

Cover Letter

Self-Perceptions of Social Workers' Effectiveness

Dear participant,

I am a Master's student at the School of Social Work, the University of Windsor. As a graduate requirement, I am conducting a thesis which explores the self-perception of social workers' effectiveness.

Specifically, this research seeks to explore social workers' perceptions of their practice effectiveness, what criteria they use and what criteria they would like to have used to evaluate their effectiveness as social work practitioners. The results of this study are directed toward social work practitioners, supervisors and educators. It is hoped that results can be utilized to develop a set of criteria for social workers by social workers to evaluate their practice effectiveness.

Data collection includes administering a face-to-face, open-ended interview which will be tape-recorded and analyzed. Names of individuals will not appear anywhere on the questionnaires and the tapes will be destroyed after they are analyzed. Thus, confidentiality will be assured. If you like a copy of the results of the study, please indicate so on the enclosed consent form.

If you have any questions or concerns about this please contact me by letter at the School of Social Work, Lambton Tower, 7th Floor (Graduate Inquiries Office), University of Windsor, Windsor, Ontario, N9B 3P4 (phone number 253-4232, ext. 3064).

Thank you for your anticipated cooperation in this matter.

Sincerely,

Debashis Dutta
B.A., B.S.W.

APPENDIX B

Informed Consent Form For Respondents

Self-Perceptions of Social Workers' Effectiveness

I, the undersigned, understand that the purpose of this research being conducted is to collect data and information regarding the perceptions of social workers' practice effectiveness among a sample of practitioners in Windsor and Essex County.

I understand that the information collected will form a composite data base and the source of information will remain anonymous. Thus, confidentiality will be safeguarded.

I agree to voluntarily take part in this study by participating in a 20 to 30 minute interview which will be tape-recorded, and by completing a questionnaire, conducted by the researcher, which will be analyzed later. The tapes and questionnaires will be destroyed upon completion of the study to protect confidentiality .

I understand that this survey is a research undertaking, being supervised by Dr. Michael Holosko through the School of Social Work and the Faculty of Graduate Studies at the University of Windsor.

Date: _____

Signature: _____

Name (print): _____

Thank You

Debashis Dutta
B.A., B.S.W.

If you would like to receive the results of this research project, please provide your address:

APPENDIX C

8. In what types of social work activity are you currently involved? (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> agency direct practice | <input type="checkbox"/> social work research |
| <input type="checkbox"/> private practice | <input type="checkbox"/> community work |
| <input type="checkbox"/> administration | <input type="checkbox"/> program evaluation |
| <input type="checkbox"/> supervisory position | <input type="checkbox"/> consulting positions |
| <input type="checkbox"/> social work education | <input type="checkbox"/> other (identify) |

9. What is your gender ? male female

10. What is your age ? _____ (years old)

11. What is your income range ?

- | | |
|---|---|
| <input type="checkbox"/> \$ 20,000-24,000 | <input type="checkbox"/> \$ 45,000-49,000 |
| <input type="checkbox"/> \$ 25,000-29,000 | <input type="checkbox"/> \$ 50,000-54,000 |
| <input type="checkbox"/> \$ 30,000-34,000 | <input type="checkbox"/> \$ 55,000-59,000 |
| <input type="checkbox"/> \$ 35,000-39,000 | <input type="checkbox"/> \$ 60,000-64,000 |
| <input type="checkbox"/> \$ 40,000-44,000 | <input type="checkbox"/> \$ 65,000 + |

12. (a) For each of the following continuing education courses, please check the ones which you have taken and the total of all continuing education courses taken since your last social work degree:

- | | |
|---|---|
| <input type="checkbox"/> Research Methods | <input type="checkbox"/> Advanced Practice Methods |
| <input type="checkbox"/> Statistics | <input type="checkbox"/> Single Systems Design |
| <input type="checkbox"/> Program Evaluation | <input type="checkbox"/> Other (identify) |

Total _____

(b) Do you believe these courses helped to enhance your practice effectiveness ?

- yes no not applicable

13. (a) For each of the following workshop courses, please check the ones which you have taken and the total of all workshop courses taken since your last social work degree:

- | | |
|---|--|
| <input type="checkbox"/> Research Methods | <input type="checkbox"/> Advanced Practice Methods |
| <input type="checkbox"/> Statistics | <input type="checkbox"/> Single Systems Design |
| <input type="checkbox"/> Program Evaluation | <input type="checkbox"/> Other (identify) |

Total _____

(b) Do you believe these courses helped to enhance your practice effectiveness ?

- yes no not applicable

14. Since graduating from your last social work degree program, please evaluate the supervision you received in the social work positions you have held.

- | | |
|---|--|
| <input type="checkbox"/> very satisfying | <input type="checkbox"/> somewhat satisfying |
| <input type="checkbox"/> somewhat dissatisfying | <input type="checkbox"/> very dissatisfying |

15. How many research reports have you read on the effectiveness of social work practice since graduating from your last social work degree program ? (e.g. program evaluation, practice evaluation, reports about effectiveness)

_____ (number of research reports)

16. What three characteristics do you believe are the best measures of your practice effectiveness ?

1. _____
2. _____
3. _____

APPENDIX D

Interview Questions

1. What does practice effectiveness mean to you ?
2. Why should social workers evaluate their effectiveness ?
3. To what extent do you use research in your practice ?
4. What can be done to encourage the link between research and practice ?
5. Have you ever been a part of a multi-disciplinary team ?
6. How does the multi-disciplinary team enhance/impede your effectiveness?
7. How appropriate do you feel it is for social workers' effectiveness to be evaluated by non-social workers? Would you prefer a social worker's evaluation ?
8. When a client is seen to be successful or progressing in your intervention, to what extent do attribute this success to the client and to yourself?
9. What are your feelings when a client is successful and not successful ?
10. Is supervision a good way to enhance your practice effectiveness and what are you looking for in it?
11. To whom do you see yourself as accountable ?
12. In what ways that you know of is your organization's effectiveness evaluated ?
13. In what ways does your organization enhance and impede your ability to maximize your effectiveness?
14. What do you see as the societal perception of you, the social worker and how does this affect your practice and effectiveness ?
15. In what ways do you believe that regulation and unionization in social work can enhance effectiveness ?
16. Do you believe that your organization and the profession encourage you to use your personality and yourself to enhance your effectiveness ?
17. What do you need to do to further enhance your effectiveness ?
18. Do you have any other general comments or observations ?

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