Reviving Therapeutic Social Work

Andrew Cooper

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What has happened to the relationship between social work and psychoanalytic psychotherapy? Twenty years ago social work trainings rooted in psychoanalytic casework flourished in several parts of the UK, and certain social work agencies like the Family Welfare Association and Family Service Units were a key part of the ‘supply chain’ for psychoanalytic training institutions. I myself left frontline social work practice in 1987 to work in a social work training school that was part of this network of interconnections between psychoanalysis and social work. But the decade that followed saw a radical decline in the fortunes of psychoanalytically informed social work practice and training. By the time I moved to the Tavistock in 1996 to lead the social work discipline, there was a sense that the Tavi was a final frontier for clinical social work in this country. Key training programmes had closed, the casework model came under attack in the context of ‘care management’ approaches, and psychiatric social work as a speciality had lost its leadership and organizational footing. Many BPC members started their careers as social workers, and still retain some identification with and fondness for their profession of origin. But what is the state of play in social work in 2015, and what might we learn from the rather turbulent history of psychoanalytic social work in Britain? Might there be opportunities for a revival of this important tradition?

Of course there never was a ‘golden age’ of psychoanalytic social work in Britain, just a healthier landscape in some respects than the one we occupy now. In the 1970s and 80s social work went to war with itself, with psychoanalytic casework and ‘radical social work’ entrenched on opposite sides of a seemingly unbridgeable divide. Everyone was a loser in this painful period, which merely weakened social work and helped soften it up for later assaults by unsympathetic governments pursuing an ideological agenda against the public sector and its professions. Nevertheless, the Group for the Advancement of Psychodynamics and Psychotherapy in Social Work (GAPS) was a flourishing professional association into the 1980s and 1990s, and spawned the Journal of Social Work Practice which survives (flourishes in fact) to this day. Anyone who doubts whether good therapeutic social work exists any longer should just access a few recent issues of JSWP which is full of profound, theoretically well informed and moving accounts of contemporary clinical practice. The journal’s scope and range of preoccupations has indeed widened beyond psychoanalysis, but not to the latter’s detriment. This widening of perspectives reflects both an altered psychotherapeutic landscape more generally, but also the strategy a number of us adopted in order to rescue clinical social work from the predicaments it faced as the 20th century drew to a close.

Around 2002 I decided to form a network of interested people from around the country to ‘promote and develop Relationship Based Social Work Practice (RBP). This became the Centre for Social Work Practice (CSWP). Most of us in that original group had been schooled in and had practised psychoanalytic casework. But we knew that an attempt to ‘revive’ practice and thinking under this rubric was probably asking for trouble. The more inclusive and open idea of RBP would have more appeal, and would be more likely to mobilise the widespread interest we knew was ‘out there’ in
therapeutically informed practice. And so it proved – from small beginnings the work of the CSWP developed strongly, until three years ago we secured generous funding from a philanthropic benefactor, allowing the Centre to really take off. Today we are a registered charity with four part time paid staff, have strong regional groups in many parts of the UK, provide low cost or free conferences and seminars for social workers that attract big audiences, and are starting to offer consultancy and development services to organisations wishing to strengthen their relationship based practice in a purposeful manner. CSWP works in partnership with Universities and other agencies to deliver its project, and aims to take up a more visible position in the policy arena as a voice for social work and social workers – but with a real grounding in front line practice experience.

But how do we understand the hunger we find out there for recognition and support for relational social work? Well actually, most people enter social work primarily because they are interested in just this aspect of what the job offers, or potentially offers. But modern social work is practised under increasingly constricted circumstances, created by resource poverty, an overriding preoccupation with ‘risk’ and the various ‘safeguarding’ agendas, and profound organizational anxieties about ‘failure’ or media and OFSTED exposure in cases of alleged or actual poor practice. The emotional and relational needs of service users and the corresponding needs of practitioners trail behind, despite good organizational intentions. Research has shown how ‘back covering’, anxious upward delegation of responsibility and decision making, or defensive organizational boundary management is the inevitable consequence. In this climate practice supervision becomes managerialised and spaces for reflection and processing of the impact of the work on the worker dissipate. Practitioners’ core aspirations and desires to practice relationally go into hiding, and become something almost shameful or illicit. At the Tavistock our experience is that qualified practitioners seek out our programmes – although not in huge numbers – under the rubric of ‘continuing professional development’ but actually because they are professionally depressed, and often carrying a burden of secondary emotional trauma. For a time we have to function rather like a field hospital for them, until sufficient recovery enables people to rediscover their professional desire and flourish again. Sometimes they seek and find a new direction away from the ‘front line’, or they re-engage with the struggle from a more confident, internally assured position. CSWP’s work is making something of this available on a national basis, at minimal cost, but obviously with much less intensity.

The need for a strong professional social work ‘voice’ is urgent – the collapse within a few weeks of the College of Social Work, Kids Company, and BAAF sent shock waves through the profession, and leaves a series of vacuums. But these events have a meaning. Current government ideology and policy is disempowering whole vulnerable populations and communities, the very same people with whom social workers routinely work. At the same time it appears that no public sector organization (NHS trusts included) is too big or too important to be allowed to ‘fail’. A shrinking state, a contracting public sector, and government disengagement from any commitment to support human service professions is the order of the day. I believe the UK is moving rapidly in the direction of an American model of state-citizen relationships, and on this theme I am fond of quoting the originator and writer of the extraordinary TV drama The Wire, which depicted the lives and struggles of one such disempowered and forgotten community in Baltimore. Simon wrote:

‘And that’s what The Wire was about basically, it was about people who were worth less and who were no longer necessary, as maybe 10 or 15% of my country is no longer necessary to
the operation of the economy. It was about them trying to solve, for lack of a better term, an existential crisis. In their irrelevance, their economic irrelevance, they were nonetheless still on the ground occupying this place called Baltimore and they were going to have to endure somehow. That's the great horror show. What are we going to do with all these people that we've managed to marginalise?

And what of the people who try to engage with and respond to the suffering, conflicts and cumulative traumas of these communities? This is where psychoanalytic or any other form of truly relationship based social work comes in. Because it’s not just ‘about the economy, stupid’. We know from excellent research that what some call the distribution of ‘social suffering’ maps closely onto income inequality, at both national and sub-national population levels. Disadvantaged, impoverished, scapegoated and undocumented communities need good ‘relationship based’ or therapeutic provision not as much as, but more than, more prosperous sectors of the population. The revival and strength of therapeutic social work is a profoundly political as well as ‘personal’ matter.

This perspective brings social work and its current struggles into close alignment with the BPC’s initiative to position psychoanalytic psychotherapy much more firmly within the public sphere and the political and policy machine, as a major contribution to mental health work, and not just a private, individualized and privatized activity. In another article I wrote recently at the BPC’s request for the Institute of Public Policy Research journal, I tried to show the relevance of psychoanalytic thinking to creating a more ‘emotionally intelligent’ culture of public policy making. This aspiration seems to resonate with recent developments in the Labour Party, and with the more fluid, open and personalized style of leadership which has emerged there. A speech in the House of Commons by Jeremy Corbyn about mental health might give us all cause for hope. He said:

“All of us can go through depression; all of us can go through those experiences. Every single one of us in this Chamber knows people who have gone through it, and has visited people who have been in institutions and have fully recovered and gone back to work and continued their normal life,” he said. I dream of the day when this country becomes as accepting of these problems as some Scandinavian countries are, where one Prime Minister was given six months off in order to recover from depression, rather than being hounded out of office as would have happened on so many other occasions.”

Back in my ‘other home’ at the Tavistock, we have persevered with providing more recognisably psychoanalytic forms of social work training and with a good deal of success at both qualifying and post qualifying levels. We also have thriving Professional Doctorates in Social Work and Social Care which lead to really profound, often psychoanalytically sophisticated research outputs, rooted in the direct experiences of practitioners. So all is far from lost, but the terrain on which the struggles are conducted has changed – sometimes as a result of conscious strategic choices, and sometimes as a response to developments outside our control. It would be interesting to hear responses to this short article from colleagues in the BPC, but at a minimum I hope to have brought a few people back into connection with the ‘lived experience’ of modern psychoanalytic and clinical social work.

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Andrew Cooper is Strategic Director of the Centre for Social Work practice and professor of Social Work at the Tavistock Centre