UNIT 7 : APPROACHES TO CASE WORK

UNIT STRUCTURE

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7.1 LEARNING OBJECTIVES

After going through this unit, you will be able to:

- Analyze the various perspectives of social case work method
- Understand the use of different approaches in the case work process to help clients likethe diagnostic, functional, crisis intervention, problem solving etc.

7.2 INTRODUCTION

Social work with individuals or social case work is one of the main parts of a generalist approach to social work practice. Main focus is to help individuals help themselves. Traditional methods are frequently combined in practice where the workers may work basically with individuals and families and set goals that may also include a group or community effort.

Every individual reacts differently to his social, economic and physical environments and as such problems of one individual are different from

those of another. The practice of casework is a humanistic attempt for helping people who have difficulty in coping with the problems of daily living. It is one of the direct methods of social work which uses the case-by-case approach for dealing with individuals or families as regards their problems of social functioning. Case work, aims at individualized services in the field of social work in order to help the client to adjust with the environments.

7.3 APPROACHES TO CASE WORK

A method is well understood to be an orderly way of procedure and therefore it is always carried out towards achievement of a specific aim. Social work methods is such method that social workers use to help people of all ages and from various sections of society to enhance their social functioning and to cope more effectively with their problems. Social workers do not pick and choose what problems and issues they would like to address. They see a problem even a very difficult problem, and try to help people solve it. They must prepare themselves to help people with individualized personal problems on the one had and very broad problems that affect whole organizations and communities on the other.

Perlman (1977) tries to understand this process of helping individuals in terms of a person with a problem, who comes to a place (an agency) where a professional representative (trained person) helps him by a given process. She thus delineates the four basic components of social casework, viz., person, problem, place (agency) and process. She explains that problems arise from some needs or obstacles to the fulfillment of these needs, or accumulation of frustrations, or maladjustment, or sometimes from all of these put together.

These individually or together threaten or have already attacked the person's living arrangement or the effectiveness of his efforts to deal with it. These problems are tackled through a process which is a progressive transaction between the professional (trained) helper and clients. It consists of problem-solving operations carried on within a meaningful relationship (purposefully established).

These operations aim at developing the client's effectiveness in coping with his problem and/or so influence the problem as to resolve or vitiate its effect. The person is the one who is "in need of help in some aspect of his social-emotional living, whether the need be for tangible provisions or counsel. Perlman (1977) thus defines social casework as a "process used by certain human welfare agencies to help individuals to cope more effectively with their problems in social functioning".



Caseworker's knowledge and expertise, and material resources are used (as tools) to inject strengths in the person to enable him to move more satisfyingly in the social situation he finds difficult to deal with.

The concept of 'social functioning' has gained quite an important place in social casework. This concept fully explains the meaning of the adjective, 'social', used with the word 'casework' and helps in differentiating it from psycho-work, i.e., psychotherapy.

Social casework enables an individual to obtain a higher level of social functioning through an interpersonal transaction or face-to-face or person-to-person encounter. The caseworker helps the client to act in order to achieve some personal/social goals by utilising the available resources in terms of strength of personality of the client, his social system or material provisions available in the community and/ or agency. Caseworker's knowledge and expertise, and material resources are used (as tools) to inject strengths in the person to enable him to move more satisfyingly in the social situation he finds difficult to deal with. Richmond (1917), who gave a scientific status to casework, defines social casework as one consisting of "those processes which develop personality through adjustments consciously effected, individual by individual, between man and their social environment".

The intervention takes place through a professional relationship between the worker and the person and also between the worker and other individuals whose interaction with the person affects his role performance. Since social functioning is product of interaction among intrapsychic, somatic and social forces, social casework involves assessing the internal and social factors which impair or threaten the person's role performance and helps him to find and use the somatic, psychic and social resources at his disposal to eliminate or reduce malfunction and to enhance functioning in social roles.

Anything that is social, will evoke psychological responses, similarly

anything (thinking and feeling) that is occurring at the level of psyche (i.e., psychological), is bound to show in one's social life (verbal or non-verbal interaction). Psyche always works in social context, therefore, his behaviour (social functioning) has both psychological as well as social components. The caseworker intervenes (helps) in any or all of these aspects to enable the person to function adequately and properly in his various social roles.

It is presumed that any person who has some problem with his thinking (cognitive), feeling (affect) or acting or their interaction will not be able to function properly and adequately in his social roles (like that of a father, chairman, citizen, man, scientist, etc.) assigned to or achieved by him. **Social functioning** means functioning in different roles one has achieved or has been assigned by society according to his position. Bartlett (1970) defines social functioning as "the interaction between the coping activity of people and the demand from the environment". The caseworker does not offer help to the person only at his personal request but also when the person does not seek/or resists help. Caseworker, in addition to the person in need of help, may work with those people also who are in some way or other important for solution of the person's problems. The help is offered through a particular process as mentioned before. This process is usually termed as study, diagnosis (assessment), formulation of goals and planning, treatment, evaluation and termination.



Social Functioning means functioning in different roles one has achieved or has been assigned by society according to his position.

7.4 PSYCHOSOCIAL APPROACH

Psychosocial approaches within social work draw on psychoanalytic theory and practice derived from the work of Freud and his followers. Florence Hollis, an important writer in this field, summarizes the main elements of the psychosocial approach as follows:

'It is an attempt to mobilize the strengths of the personality and the resources of the environment at strategic points to improve the opportunities available to the individual and to develop more effective personal and interpersonal functioning'. (Hollis 1977).

This definition stresses the importance of both internal and external

factors in relation to people's capacity to cope with the everyday stresses of modern living. As such, it contradicts the myth that psychosocial approaches are only concerned with people's inner, emotional life: the external world is also an important area of analysis and concern. It is important to note that psychoanalysis has been influential in the development of a range of different theories and therapeutic approaches that are relevant to social work, including ego psychology; crisis intervention; attachment theory; Erikson's conceptualization of the 'eight stages of man'; transactional analysis; group therapy, particularly group analysis; and psychoanalytic perspectives developed in relation to systems theory, ecological perspectives, and family therapy. In the past, a psychosocial approach has been linked to the term 'casework' or 'social casework' (Howe 2002).

At the heart of casework - and psychological approach - lies the relationship created between the service user and social worker. 'The social worker shows human concern for clients but disciplines his or her use of the relationship in keeping with the assessment of the client's needs and interventive goals'. What differentiates psychoanalytic perspectives from other schools of thought is the concept of the ‘unconscious’.

The psychosocial framework is a distinctive practice model that originated early in the profession's history. Its goals are to restore, maintain, and enhance the personal and social functioning of individuals. Drawing on psychological and social theories, it has evolved considerably from its Freudian and ego psychological underpinnings. It has incorporated new knowledge on gender and diversity. Assessment,of the client the client-worker relationship, respect for diversity, and an appreciation of client strengths are fundamental to the psychosocial approach. It uses both individual and environmental interventions and can be applied to a broad range of client populations. There is empirical evidence for the utility of psychosocial intervention but more research on the psychosocial framework is needed.

7.5 FUNCTIONAL APPROACH

In the beginning the aim of social work was to help but later on due to

influence of psychology and psychiatry, personality and behaviour treatment have also been added as the objective of social casework. Basic orientation of social caseworkers are of different kinds and with the result diagnostic and functional schools appear in the practice of social casework.

Functional social casework was developed by Jessie Taft (1937) and Virginia Robinson (1942), the then faculty members of Pennsylvania School of Social Work. Taft and Robinson, both were influenced in their work, by the philosophy and teachings of Herbert Mead and John Dowey and later by Otto Rank, a disciple of Freud, who broke away from him in the later part of his life.

The functional school was further developed and sustained by Kenneth Pray (1949) and Ruth Smalley (1967). Its development can be regarded as a reaction to the diagnostic school of social work which was heavily influenced by the Freudian concepts of personality and treatment in the 1920s and for many years thereafter.

The therapist (caseworker) assumes sole responsibility for treating the client. In this approach, the client is helped to readjust to his past events which are affecting his current functioning. This view of psycho-analysis and its effect on casework practice continued till 1970s when neo-Freudians changed the concept of man from 'the created' to the creator self.

Functionalists considered human activity as purposive and deliberate and not only as the result of pushes by internal and external forces. Human personality is considered as always in the "process of becoming", constantly working towards realisation of all its capacities.

functionalist helps the clients only in one phase or fragment (part) of the total problem because of the assumption that change in anyone hurting area of his life could bring in a 'salutary effect' on the total psychological equilibrium of the client.

Functionalists give utmost importance to the use of agency function in helping process. This is considered as unifying and direction-giving to the helping process. It gives focus and contents to the helping interaction. It is because of the use of the agency function that social work is called an 'institutionalised profession'. Functionalists believe that agency provides



Functionalists considered human activity as purposive and deliberate and not only as the result of pushes by internal and external forces.

"reality boundaries within which the ex-client can test and discover his ability to work out his problem and make a satisfying adjustment or readjustment to the wider realities". "The worker sets up the conditions as found in his agency function and procedure; the client tries to accept, to reject, to attempt to control, or to modify that function until he finally comes to terms with it enough to define or discover what he wants, if anything, from this situation" (Taft, 1937).



CHECK YOUR PROGRESS

Q 1: State the basic understanding of the psychosocial approach.

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Q 2: Why do functionalists give more importance to the agency?

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7.6 DIAGNOSTIC SCHOOL

Diagnostic school, based on scientific (psychic) determinism, believed that the client is the product of his past, that he is ill and needs treatment. The client is diagnosed and subjected to treatment. The presenting problem is regarded as merely an expression of deeper psycho-pathological condition.

The diagnostic school is basically founded on the Freudian theory of psychoanalysis. Mary Richmond gave shape to these thoughts in the form of a school. She wrote first book on social casework i.e. Social Diagnosis in 1917. The other contributors of this school were Marion Kenworthy (New York School of Social Work), Betsey Libbey (Family Society of Philadelphia), Gordon Hamilton, Bertha Reynolds, Charlotte Towle, Florence Day and Annette Garrett. The Diagnostic school is based on the following main foundations.

Principles of Diagnosis

Social casework help is based on the understanding of each client individually and his/her problems. It is essential because it gives a realistic basis for differentiation, and a base for the improvement of the client's social situation and personal satisfaction and adjustment. The diagnosis is based on the following principles: 1) The diagnostic process consists of a critical study of a client and his/her situation and the trouble concerning which help is sought or needed for the purpose of understanding the nature of the difficulty with increasing details and accuracy. 2) Diagnosis is based on the knowledge of the worker about the interplay of social and psychological factors affecting the client. 3) The knowledge of interaction between inner and outer forces influencing the client makes the process of diagnosis helpful and therapeutic. 4) Every problem of the individual should be understood in the light of multiple factors theory. 5) In the initial stage also, relieving of pressure of stresses and strains on the client, helps the caseworker to arrive at a proper diagnosis. 6) The initial appraisal of personality and motivations and their significance in the development of client's problem provides the basis for planning the treatment of the client's problems. 7) For the solution of the problem of the client, it is of utmost importance to gain some knowledge of his/ her current capacity to work and to recognize the motivating forces in his/her behaviour. 8) The understanding of the psycho-dynamics and the pathological symptoms of the personality of the client provides the basis of determining the kind of help that can be appropriately offered.

Principles of Treatment

The main objective of the treatment is of alleviating the client's distress and decreasing the malfunctioning in the person situation system. The above objective is achieved by enhancing the adaptive skills of his/her ego and functioning of the person situation system. It is based on certain principles : 1) The forces of the discussion in the interview is centred on the problem and ways of resolving it. Attention is paid to know the obstacles both situational and behavioural that stand in the way of solution. 2) Nature and



Use of techniques like encouraging, emotional discharge, reassurance, support, suggestion, guidance and direction, provision of new experiences,clarification,interpretation is part of the treatment process, etc.

extent of both social and psychological factors differ in each situation. 3) Treatment goals and techniques are planned after a careful study of the particular needs of the client. 4) The success of the treatment programme is based on the utilization of the relationship purposefully. 5)

Social therapy and psychotherapy are the two broad classifications of social casework treatment. Use of techniques like encouraging, emotional discharge, reassurance, support, suggestion, guidance and direction, provision of new experiences, clarification,interpretation is part of the treatment process, etc. The relationship is the medium of treatment through which client is enabled to find new ways of perceiving his/her problems and of handling himself.

7.7 CRISIS INTERVENTION APPROACH

Crisis intervention was initially developed as a response to the growing demand for services in situations where immediate assistance was required for large numbers of individuals. The shortage of personnel and the fact that most therapies are, in practice, short term (average of 4.7 contacts with therapist according to the National Center for Health Statistics, 1974) have further contributed to the development of crisis intervention and to its becoming the treatment of choice for many clients.

Lindemann, Caplan and other theorists have provided a firm theoretical basis for what has come to be known as crisis intervention. However, as Ewing (1978) points out, for most part the architects of crisis theory have not explicitly spelled out specific modes of intervention, even though they have referred to them. Many of the techniques and principles of crisis intervention have developed through the efforts to meet more effectively the specific needs of particular populations. Ewing (1978) has defined crisis intervention as the informed and planful application of techniques derived from the established principles of crisis theory, by persons qualified through training and experience to understand these principles, with the intention of assisting individuals or families to modify personal characteristics such as feelings, attitudes and behaviors that are judged to be maladaptive or maladjustive. Crisis intervention is the kind of psychological first aid that

enables to help an individual or group experiencing a temporary loss of ability to cope with a problem or situation. Crisis intervention programs originated as an attempt to serve unmet treatment needs of individuals, but now they have come into their own as an important treatment alternative.

Levels of Crisis Treatment

Jacobsen, Strickler & Morley (1968) and Morley (1970) have discussed different levels of crisis treatment: a) Environmental manipulation. In this case the helper serves as a referral source, getting the client in touch with a resource person or facility. b) General support. It consists basically of active listening in a non threatening manner, allowing the person to speak in some detail about his problem without challenging him. c) Generic manipulation. It is helping the person resolve a crisis by accomplishing certain psychological tasks that are the same for al1 the people experiencing the same crisis regardless of individual differences. d) Individual approach. It focuses on the specific needs of the person in crisis and emphasizes the assessment of the psychological and psychosocial processes that are influencing the client. It looks at the specific psychoIogica1 tasks and problem solving activities that each person must accomplish in resolving a particular crisis. These levels of intervention are not mutually exclusive although there is usually one that is predominantly used in the treatment process. Therefore, it is possible to use an environmental manipulation and at the same time use a generic or individual approach or other combinations of treatment strategies.

7.8 ECLECTIC APPROACH

When we talk of approaches, these are not theories in the strict sense of the word; these are conceptual frameworks or systems of thought. The exponent of each theory puts forth arguments in favour of his or her particular theory. But there is no evidence in practice that one is more effective than the other. At the same time, none has been proved useless at an empirical level. Though supporters of particular theories are inclined to emphasize the divergence between theories, there are aspects common to many



'Informed eclecticism' entails indepth knowledge of the theoretical approaches from which one selects principles and procedures of action.

theories. There is no single personality theory which explains all types of human behaviour. Similarly, there is no unitary practice theory in casework, and therefore it is necessary to adopt an eclectic approach. Eclecticism means the use of the best of knowledge gathered from a number of different theoretical orientations. ***'Informed eclecticism'*** entails in-depth knowledge of the theoretical approaches from which one selects principles and procedures of action. Taking bits and pieces from many theories and using them casually without any definite purpose is not informed eclecticism. The utility of a theory or theoretical prescription can be assessed in terms of the kind of problems it is concerned with, the type of clients to whom it can be applied and, most pertinently, in term of its effectiveness in producing results. Professional skill is required on the part of the case worker to assess every client and to select a suitable procedure based on empirical evidence. The core of eclecticism is that it aims at choosing a procedure suitable for the client rather than fitting the client to a procedure in hand. The choice of a particular conceptual stance is the end product of an intellectual and emotional process and it is likely to be influenced by the particular personality make up of the case worker. An eclectic approach does make heavy demands on the caseworker in that he needs to have substantial knowledge and practical skills. He should analyze and evaluate. Most importantly, he should have the tolerance and flexibility to have his own attitudes altered to be willing to try new procedures. All these would imply that casework practitioners should involve themselves in an ongoing process of education. Refresher courses, seminars, workshops and such other programs are methods for providing continuing education to social workers teaching and writing.

Within the eclectic approaches, the ecosystems perspective was useful in aiding evacuees. Drawn from ecological and systems theory, the ecosystems perspective integrates systems composed of people and their physical-social-psychological-spiritual-cultural environments, systems in which each part impinges on every other part. The ecosystems perspective includes four levels of social systems: micro systems, where the immediate, face-to-face focus of concern is on individuals and families; meso systems,

where links are drawn between evacuees, their 2 extended families, the temporary, church-based disaster center where they live; exo systems, where evacuees are linked to other settings that do not normally include the evacuee but impact their well-being (e.g., ARC, Salvation Army, Federal Emergency Management Agency (FEMA), Federal Income Compensation Act (FICA), and national electronic banking); and macrosystems, where lifestyles, socio-economic resources, hazards of natural disasters like Katrina, and social, spiritual, and cultural beliefs and value systems impinge on one another.

7.9 THE PROBLEM SOLVING APPROACH

One way of assisting a client is by using a problem solving approach.

The problem solving model can provide the case worker with a means of finding and using whatever is useful within the different therapeutic models. Many case workers operate using an eclectic approach to helping people. To work effectively as an eclectic case worker it is better to be systematic and thoughtful about the ideas, methods and techniques that are borrowed from other therapeutic models rather than to randomly and thoughtlessly apply different theories. (Egan: 1994) The problem solving model assists with the effective application of an eclectic approach to casework.

The problem solving model contains 7 stages:

Stage 1: Initial Contact.

Key Activities of the Case Worker include:

Listening, and engaging. Listening Skills include:

- Appropriate non-verbal responses.
- Body leaning forward.
- Open body posture.
- Eye contact.
- Non-verbal encouragers e.g. nod head.
- Minimal verbal encouragers e.g. ahhh or mmm.

- Appropriate arrangement of the room so that the client feel comfortable and safe.

Engaging or establishing a trusting and open relationship. To do this the Worker needs to:

- Tell the client their name.
- Ask the client what they prefer to be called.
- Show interest in the client i.e., find out about hobbies, interests, friends etc.
- Demonstrate a friendly attitude.
- Demonstrate a non-judgemental attitude.
- Show a capacity for honesty.
- Ask appropriate and relevant questions.
- Ask the right amount of questions.
- Offer direction and leadership where needed.

Common Client Reactions:

- Anxiety.
- Fear.
- Anger.
- Attitude to Case Worker is strongly influenced by past experiences and what client has been told about community service practitioners.
- Sense of helplessness.
- Sense of hopelessness.
- Defensive.
- Resistant.
- Sceptical.
- Confusion.

Dealing with Client Responses.

- Ensure confidentiality.
- Explore problem at client's pace.
- Respect client's defences.
- Acknowledge client's sense of betrayal with previous workers.

Stage 2: Problem/s Identification.

Key Activities of the Case Worker include:

- Finding out the client's views; what do they see as the problem/s.
- Identifying the problem in terms of need rather than the solutions to the need.
- Exploring the client's strengths or the good things in their lives.
- Developing a working alliance with the client.
- Brokering other services if casework is unacceptable or inappropriate.

Stage 3: Identifying Possible Solutions.

Key Activities of the Case Worker include:

- Collecting all ideas regardless of their merit. This means trying to get a large number of ideas gathered rather than high quality or feasible solutions. The Case Worker must refrain from evaluating and clarifying the ideas until the next stage in the process.

Client Responses to Stages 2 and 3.

- Difficulty understanding Case Worker's processes.
- Denial of problems.
- Denial of dependency.
- Aggression.
- Fright.
- Flight.
- Acting out.
- Ambivalence.
- Overwhelmed by problems and pours out concerns to worker.

Dealing with Client Responses.

- Accept client's defences and work with them not against them.
- Demonstrate a professional approach to problem solving.
- Pinpoint the problems that concern the client the most.

- Clarify how client and worker can work together to tackled the problems.
- Acknowledge if the client is working with the Case Worker because of coercion, for example, because of a court referral. Stay with their betrayal, hear it and listen to their story. Do not move on before the client is ready and trust has been established.

Stage 4: Developing a Case Plan.

Key Activities of the Case Worker include:

- Clarify the meaning of each proposed solution.
- Asking the client which alternatives they prefer.
- Exploring the client preferred solutions in terms of positive and negative effects upon themselves and significant others.
- Considering the solutions in terms of what the client may want to achieve both in the short and long-term.
- Determining the client's goals.
- Working out achievable tasks for the client. Some tasks may need to be shared with the Case Worker. Decide upon these tasks and work out a who, what and when action plan.
- Breaking down longer term goals into sub goals or stepping stones to the larger goal.
- Working out goals and expressing these in measurable terms so they can be evaluated. The SMART principle can help here (specific, measurable, achievable/appropriate, realistic and time-framed).

Stage 7: Action Phase.

Key Activities of the Case Worker include:

- Reinforcing positive changes with praise and recognition.
- Rewarding or celebrating achievements.
- Organising sessions to discuss progress and to provide guidance and assistance for the client.

Client Response to Stages 4 and 7.

- Defences are lowered.
- Develops a closeness to Case Worker.
- Client talks freely about the past.
- Client feels safe to ventilate emotions and to recount painful experiences.
- May start to model behaviour, speech and dress on the Case Worker.

Dealing with Client Responses.

- Support client through painful recounts.
- Offer alternative strategies if planned solutions to problems do not work.
- Offer alternative ways of dealing with problems rather than destructive, defensive or resistant behaviours.

Stage 6: Monitor and Review.

Key Activities of the Case Worker include:

- Taking time with the client to review the progress of the case plan.
- Assessing what is working well and why.
- Assessing what isn't working well and why.
- Setting new goals and tasks to reflect this evaluation.

Client Responses.

- As the client moves through this phase, they will begin to separate from the worker and become increasingly independent.
- Develops a clearer sense of identify.
- Becomes more realistic about problems.
- Despite movement forward, the client may experience some regression to previous ineffective behaviours.
- Looks better and sounds better.

Dealing with Client Responses.

- Support independence.
- Anticipate some regression.
- Help to reframe any setbacks - help client identify the learning in the regression and reframe the experience positively. This gives the client permission to make some mistakes and not feel that they have to get new behaviour perfect first time around.

Stage 7: Termination or Transfer.

Key Activities of the Case Worker include:

- At this point, the client prepares to move on because they have reached their goals or to another service which is better able to respond to different or changing needs.
- This stage can be a time of celebration of achievement but also some sense of loss for the clients. Time must be allowed for these feelings to be expressed and processed with the Case Worker.

Client Responses.

- Sense of loss or ambivalence.
- Memories of past losses may be rekindled.
- Depression.
- Act out.
- May create a crisis to keep Case Worker engaged.
- May try to make the worker feel guilty.
- People always desert me!

Dealing with Client Responses.

- Prepare for termination in advance.
- Help client to discuss the sense of loss.
- Review the client's achievements



CHECK YOUR PROGRESS

Q 3: State the meaning of Eclectism.

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Q 4: What is the main objective of the problem solving approach?

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7.10 LET US SUM UP

- Case work, aims at individualized services in the field of social work in order to help the client to adjust with the environments.
- The approaches aim at developing the client's effectiveness in coping with his problem and/or so influence the problem as to resolve or vitiate its effect. The person is the one who is "in need of help in some aspect of his social-emotional living, whether the need be for tangible provisions or counsel.
- Psychosocial approaches within social work draw on psychoanalytic theory and practice derived from the work of Freud and his followers.
- Crisis intervention was initially developed as a response to the growing demand for services in situations where immediate assistance was required for large numbers of individuals.
- The core of eclecticism is that it aims at choosing a procedure suitable for the client rather than fitting the client to a procedure in hand. The choice of a particular conceptual stance is the end product of an intellectual and emotional process and it is likely to be influenced by the particular personality make up of the case worker.



7.11 FURTHER READING

1. Baker, Ron 1976 The Interpersonal Process in Generic Social Work: An Introduction Preston Institute of Technology Press Bundoora.
2. Bolton, Robert 1979 People Skills Prentice Hall New Jersey.
3. Egan, Gerald 1994 The Skilled Helper Brooks Cole Publishing Company Monterey



7.12 ANSWERS TO 'CHECK YOUR PROGRESS'

Answer 1. The Psychosocial Approach is an attempt to mobilize the strengths of the personality and the resources of the environment at strategic points to improve the opportunities available to the individual and to develop more effective personal and interpersonal functioning'. (Hollis 1977).

Answer 2. Functionalists give utmost importance to the use of agency function in helping process. This is considered as unifying and direction-giving to the helping process. It gives focus and contents to the helping interaction. It is because of the use of the agency function that social work is called an 'institutionalised profession'. Functionalists believe that agency provides "reality boundaries within which the ex-client can test and discover his ability to work out his problem and make a satisfying adjustment or readjustment to the wider realities".

Answer 3. Eclecticism means the use of the best of knowledge gathered from a number of different theoretical orientations. 'Informed eclecticism' entails in-depth knowledge of the theoretical approaches from which one selects principles and procedures of action. Taking bits and pieces from many theories and using them casually without any definite purpose is not informed eclecticism.

Answer 4. The problem solving model can provide the case worker with a means of finding and using whatever is useful within the different therapeutic models.



7.13 MODEL QUESTIONS

Q.1: What is meant by 'an approach'?

Q.2: Describe the different levels of crisis intervention.

Q.3: Explain the treatment plan in the problem-solving approach.

Q.4: What are the advantages of the eclectic approach?

Q.5: Discuss the perspective of the functionalist approach of social case work.

Q.6: Explain the principles of diagnosis.

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