Relationship-based practice: emergent themes in social work literature

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Key points

• There are compelling philosophical, policy and practice reasons to put relationships at the heart of social work
• The importance of relationships is increasingly recognised in ‘people work’ but especially in social work and social care, across all domains of practice
• Effective relationships are central to successful outcomes
• Current policy directions in Scotland are rooted in the need for effective personal/professional relationships
• Relationships are complex, requiring an awareness of ‘self’ and the negotiation of inter-personal boundaries
• Current practice cultures can make it difficult to practise in properly relational ways and would require a radical shift for issues of power, agency and status to be addressed
History

The roots of an emotional dimension to social work can be traced back to the psychoanalytic and psychosocial models that emerged in the mid-20th century (Horney, 1950; Rogers, 1961; Hollis, 1964), which highlighted the importance of previous experiences and how emotions are managed and understood through relationships. At another level, Biestek’s (1957) seminal exposition of social work’s ethics includes what are clearly relational principles such as purposeful expression of feelings, controlled emotional involvement and acceptance.

Psychosocial models of practice attracted some criticism due to claims that they minimised wider societal and political factors, and focused primarily on the inner worlds of individuals. This, it was argued, ran the risk of locating people’s difficulties and solutions primarily at an individual level. Nevertheless, it remained self-evident, even in such critiques, that relationships were central to social work.

The 1980s, however, saw the increasing dominance of neoliberal political and economic ideology. This was manifest in public services through the doctrine of managerialism, which, in essence, sought to bring business and market principles to public services. Managerialism was rooted in principles of economy, efficiency and effectiveness and is evident in practice contexts in the turn towards targets and performance management. Social work became a technical/rational rather than an ethical and relational endeavour. Within such cultures, relationships can appear too ‘woolly’ and difficult to measure and have become secondary to forms of practice that, even when practitioners might claim to work in relational ways, are increasingly framed around following procedure and ensuring compliance.

Any view that relationships are secondary to a more instrumental form of social work practice is, however, misconceived. The centrality of relationships to social work continues to be universally, and increasingly, recognised. Relationships are variously described as being ‘at the heart of social work’ (Trevithick, 2003), ‘a cornerstone’ (Alexander and Grant, 2009); ‘an absolute precondition’ (O’Leary and colleagues, 2013). They are ‘essential rather than incidental’ (Alexander and Grant, 2009). Fewster (2004) suggests that within the caring role, the relationship is the intervention. In recent years the concept of
relationship-based practice (RBP) has become a way of articulating the centrality of the relationship between social workers and service users (Ruch, Turney and Ward, 2010; Hennessey, 2011; Megele, 2015; Bryan and colleagues, 2016). RBP is not a method or an approach to social work that can be picked from a menu of alternatives; rather, it is at the heart of whatever approach might be adopted across different client groups and domains of practice.

**A philosophical basis for relationship-based practice**

RBP is not technical, instrumental or methodological but confronts central philosophical questions around who we are and how we are with others. Philosophers have grappled with such questions over the years. Since the Enlightenment, that period of scientific and philosophical advance that swept Europe in the 17th and 18th centuries, which signalled the beginning of the modern period in history, human existence and action has been defined by the ability to reason. Reason was elevated above emotion and the thinking ‘self’ above the feeling one. This involved a corresponding assumption that human beings could separate off the mind from the body. Such dualism has since been a powerful driver of intellectual belief. It has percolated understandings of professions such as social work, where workers are encouraged to separate their personal from their professional selves. Qualities of detachment, objectivity and ‘professional distance’ are encouraged, while emotional involvement with clients can be seen as unprofessional.

Other strands of Enlightenment thinking, however, especially those of Scottish philosophers, questioned this turn to reason. David Hume, for instance, proclaimed that reason is but a slave to the passions – individuals acted not merely on reason or self-interest, but were drawn more instinctively by a notion of moral sentiment. Adam Smith called this innate human quality ‘sympathy’, which posits that people are naturally compassionate and moved by the plight of others (Hearn, 2016). Sympathy involves an awareness of others’ feelings, although resists emotional entanglement in them. Indeed, one can react ‘sympathetically’ but not necessarily approvingly to another’s predicament. Nevertheless, it evokes responses that are relational and instinctive or embodied, rather than abstract and overly intellectual.
Moving forward a couple of centuries, John Macmurray resurrected this concern about the relationship between reason and emotion, arguing that excessive rationality acts to marginalise the role of emotions in the human condition (Fielding, 2012). Macmurray conceives of human beings not as autonomous, rational individuals but as ‘persons in relation’, existing only by virtue of their relationships with others. Personal relations were also at the heart of Scottish psychotherapeutic thinking over the course of the 20th century (Sharpe, 2016).

Tronto (1993) draws on Scottish ideas of moral sentiment in her seminal work on care ethics, which has become an important strand in ethical thought across a range of academic and professional disciplines.

**Care ethics**

Care ethics have become an influential strand of moral philosophy. Gilligan (1982) identified two different approaches to moral reasoning: ‘a male voice’, associated with qualities of reason and objectivity and a ‘female voice’ drawing on intuition, compassion and an appreciation of context. Since then, interest has grown rapidly and the scope of care ethics has extended beyond individual relationships to inform political debate (Held, 2006). Care ethics entails a shift in focus away from rules and rights towards responsibilities and relationships. Relationships are bi-directional involving an inevitable mutuality – a client’s personality and preferences influence levels and degrees of closeness, entailing that the nature of any personal/professional relationship varies from client to client. There is, therefore, no one way of doing RBP. Care ethics are proposed by Meagher and Parton (2004) as offering an alternative to dominant managerial modes of practice in social work.

**Relationship-based practice and policy**

Increasingly, RBP can be found to resonate with the direction of Scottish public policy set out in the report of the Christie Commission (Scottish Government, 2011). This emphasises the need to move away from a top-down ‘expert’ culture towards one that seeks the views and involvement of individuals and communities, through what might be identified as a process of co-production. For example, policies such as *Getting it right for every child* (GIRFEC) emphasise the need to hear the voice of children and families in
a spirit of openness and trust. However, it is not just in children and families policy that the Christie principles resonate. They are also apparent *inter alia* in the Carers Strategy, the National Clinical Strategy and Community Justice and Mental Health initiatives, to the extent that they are now spoken of as reflecting a particular Scottish approach to public services. RBP thus, potentially, becomes a cornerstone of social policy, percolating, not just individual relationships but the ways in which workers across different professional disciplines and wider communities interact and relate with one another.

**Features of relationship-based practice**

RBP draws on psychodynamic ideas, most closely associated with Sigmund Freud and developed by others. These explain human personality and functioning in terms of conscious and unconscious desires and beliefs, feelings and emotions, based on life experiences, including early childhood. While RBP does not require a sophisticated understanding of the psychology behind this, effective social work requires that a worker tune into the emotional world of a client and be able to communicate this understanding within the relationship. It also moves the concept of relationship beyond the individual to incorporate an awareness of contextual factors such as power, professional role, poverty, social exclusion and political ideology. Hingley-Jones and Ruch (2016) make links between the current climate of financial austerity and an increasingly ‘austere’ practice, which can involve emotional distancing and ‘turning a blind eye’ to clients’ experiences and to the impact of diminishing public services.

**A sense of purpose**

To stress the centrality of human relationships in social work is not to say that these are, in themselves, sufficient to ensure good practice. Relationships are not intrinsically good or bad – they can be either. They certainly shouldn’t be indiscriminate in the way that they are entered into or develop. They exist in a (mandated) context and are formed for a particular purpose (Ingram, 2015) – towards a client achieving positive change. But this is a challenge, partly because relationships are complicated and subject to a range of psychodynamic processes, which require that social workers understand and use themselves, centrally, within their work.
Relationships and change

Social work as a profession is premised on a notion of promoting positive change in clients’ situations as set out in the International Federation of Social Workers’ (2014) definition. Beckett and Horner (2006) tell us that change comes about through relationships. Even in situations where programmed interventions are employed, their impact is secondary to the social worker–client relationship (Nicholson and Artze, 2003). Qualities of hope and expectancy that change will occur are also implicated in successful outcomes.

What clients want

The literature gives clear messages of what clients value. A good social worker is experienced as a ‘friend’ and an ‘equal’ (MacLeod, 2008); clients look for ‘ordinary friendship’ where they meet on equal terms (Halvorsen, 2009). Beresford and colleagues (2008) (re)introduce the idea of friendship within the client/worker relationship. Their conception of friendship identifies qualities of reciprocity (of sharing aspects of oneself; of flexibility (going the extra mile, perhaps through offering small gifts or maintaining contact out of hours), but also straight talking). Kleipoedszus (2011) suggests that relationships can be forged through conflict; genuine engagement and negotiation rather than artificial sensitivity make it possible for workers to encourage and nurture change rather than demanding it. Smith and colleagues (2012) identify the centrality of effective relationships even in work with involuntary clients. In all of this, everyday acts of care and recognition are more important than formal standards and procedural requirements.

Professionalism and relationships

A renewed emphasis on relationships challenges many of the assumptions that have built up over what it is to be a professional. Professionalism is often associated with certainty, expertise and theoretical knowledge (Brodie and colleagues, 2008). Noddings (1996), however, distinguishes between professionalism and professionalisation. She suggests that the latter is the result of a codified and rule-bound conception of professionalism that derives from a quest for status. There is, however, little connection between such rule-bound professionalisation and positive outcomes.
Indeed, it can create a distance between social workers and clients, that a more relational form of professionalism might work to reduce. Moreover, a ‘professionalized’ approach to human relationships ‘may be unethical for both social workers and their clients, belying a message of inequality (that) is ultimately patronizing and disrespectful’ (Alexander and Charles, 2009, 19).

Murphy and colleagues (2013), on the other hand, suggest that the professional role significantly compromises the ability to form genuine relationships. Part of the difficulty in reconciling different understandings of professionalism is the tendency in the UK to conceive of separate personal and professional selves.

Practice traditions such as social pedagogy introduce a third element, the private. From such a perspective the personal and professional are employed in the change process and it is only the (far more limited) ‘private’ aspects of a social worker’s life that are kept hidden from a client (Smith, 2012).

Boundaries (and barriers)

Social work is a ‘self in action’ task in which workers operate at the contact boundary where two (or more) individuals come together (Fewster, 2004). This poses challenges for workers and for organisations that operate to a narrow understanding of what constitutes acceptable personal and professional boundaries (Maidment, 2005). Gharabaghi (2010) argues that in care relationships, boundaries are relational, requiring an emphasis, not simply on distance, but also on connection. It is important to distinguish between boundaries, which are dynamic and can be deployed flexibly, and barriers, which are static and prioritise consistent application. In practice, individual practitioners act in ways that might be thought to be subversive of practice norms (Alexander and Charles, 2009). Coady (2014), for instance, offers examples of the kind of flexibility required in negotiating everyday care practices.

Everyday acts of care and recognition are more important [to clients] than formal standards and procedural requirements
One of the difficulties that can arise in increasingly managerial and regulated practice cultures, however, is a tendency to minimise the complexity of such boundary work and to operate fixed understandings of the lines between professional, personal and private domains. This leaves workers vulnerable to disciplinary action should they cross externally determined boundaries (McLaughlin, 2010).

**Use of self**

‘Self’ can be described as the combination of values, emotions, beliefs and experiences that contribute to who we are as individuals (Ruch, 2010). This is not fixed and, as we enter relationships, we draw upon what we feel is required to engage with others within a given context. In social work, this is made more complex by the addition of professional values, roles and expectations.

This ‘use of self’ presents significant challenges for social workers in managing the balance between the professional, personal and private elements of their practice. Hennessey (2011) argues that this balancing act should be explicit and not shied away from; rather, it should be harnessed and used to bring about change. Barnes and colleagues (2015) go further and underline the interdependence between social workers and service users, where both parties bring their own experiences and contexts to the encounter, laying the foundations for a trusting and dynamic relationship. This requires a social worker to be able to develop a relationship that has a level of trust and which facilitates the sharing of emotions. This may require a degree of emotional exposure in order to truly understand the feelings of another and be able to express this in a genuine and attuned manner.

**Transference and counter-transference**

A psychodynamic perspective can help social workers consider the impact of unconscious previous experiences within relationship building. The concept of transference reminds us that individuals can unconsciously transfer past feelings into the present. Ruch (2010) illustrates this with an example of previous negative experiences of parenting being transferred by some service users into the relationship with their social worker. This dynamic can often be difficult to understand and manage and social workers can, in turn, find themselves reacting unconsciously,
in a process known as counter-transference. Equally, social workers need to be mindful of their own unconscious transference and how that may impact on dynamics within relationships they form. Such dynamics can be powerful and frightening, but can also be hugely helpful for social workers in understanding the inner worlds of service users and themselves. In turn this can lead to more positive relationship building (Agass, 2002).

**Emotional intelligence**

Ingram (2013) highlights the role of emotional intelligence as a trait and skill that can help social workers manage the emotional complexities of practice. Emotional intelligence can be briefly defined as the ability of an individual to: be aware of their own emotions; be able to understand and manage these effectively within relationships; be motivated to similarly understand the emotions of others; and to communicate this within relationships (Salovey and Mayer, 1990; Morrison, 2007). Such capacities are crucial for RBP, as they underline the existence and importance of emotions as a stream of information within social work relationships and practice (Munro, 2011).

**Reflection and reflexivity**

Reflection has a long and important role in social work education and practice (Knott and Scragg, 2007). Social workers are encouraged from the point of entry onto qualifying programmes to engage in reflective processes, which help unpick the feelings, thoughts and actions present in practice. The concept of reflexivity takes this personal reflection further through consideration of what the worker themselves bring to a situation. This includes their own assumptions, preconceptions or bias – and also through encouraging the examination of wider factors such as power, culture and social exclusion. Reflexivity prompts questions about what others may feel and think about social workers’ actions. This sits very comfortably with previous discussions about self-knowledge and emotional intelligence and is a crucial element of the professional infrastructure required for RBP.

**Opportunities for reflection**

This need for reflection requires opportunities, relationships and environments that are conducive and safe for social workers to explore the complexities of practice. These conditions should
be characterised by trust, openness and should resist the urge to rush for clarity and resolution (Cornish, 2011). O’Donoghue and Tsui (2011) highlight that such characteristics mirror those of positive relationship building within practice itself.

The most familiar forum for such reflection in social work is within the supervisory relationship, which often has a dual function of support and management. This can create a tension if the culture within an agency is managerial, where measurable outcomes and certainty are prioritised over recognition of the more realistic uncertainty and ‘messiness’ of practice.

There are, however, other opportunities for reflection. For example, social workers cite the informal support of colleagues as crucial, as it can allow for prompt, unrecorded explorations of practice with someone who may have similar experiences and challenges (Ingram, 2013). This need not require any formal structure and is a process that, as humans, we engage in (to a greater of lesser extent) to examine our thoughts and actions. In RBP this is, simply, a prerequisite.

**Future implications for social work**

The foregoing discussion highlights the central importance of social work relationships; they are, arguably, the defining characteristic of the profession. While many might agree with this assertion on a surface level, few, perhaps, have thought through its implications. RBP collides with and poses a fundamental challenge to managerial approaches to social work, foregrounding relationships, in all their ambiguity and messiness, above the bureaucratic, instrumental and ostensibly rational foundations of contemporary practice.

Embracing RBP would call for a radical shift in how worker-client relationships are conceived, opening up possibilities for a greater ethical symmetry between worker and client (Lynch, 2014), recognising agency and balancing power between fellow human subjects. It might also prompt the deconstruction of current terminology (Smith and Smith, 2008), replacing words like boundary, compliance, delivery, intervention and outcome with those of association, help, friendship, love and compassion.
References


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