REFLECTIONS

NARRATIVES of PROFESSIONAL HELPING

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Volume 12 **Fall 2006** **Number 4**

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Letter From the Editor

Jillian Jimenez, Ph.D.

This issue of *Reflections* demonstrates the power of the narrative form to illuminate the ways personal experiences slip the boundaries of our professional lives. Grant Larson in "A Dialogue with Students in Mexico" recounts his experience of leading a group of Canadian social work students in a two week study tour in Mexico. Moving beyond the socially constructed hierarchical boundaries of educator and student, Larson experienced his students as individuals able to enter personal and professional dialogues with faculty. Their experience together in a foreign country transformed the traditional pedantic relationship to which he was accustomed and brought him a new appreciation of the transformative aspects of the dialogic relationship with students. Confronting their own privileged position in the trans-global economy, students and teacher saw first hand the impact of structural inequality abroad and at home.

Carol Swenson and Judy Lee have allowed *Reflections* to reprint their seminal article "Theory in Action: A Community Social Service Agency," which first appeared in *Social Casework* in 1978. This classic narrative discusses how the life model and interactionist concepts of social work were proven effective when put directly into action in a community social service agency. In their contemporary reflections on this article, the authors remind us that time's passage doesn't diminish the importance of the central tenets of the social work profession.

Leon Ginsberg, in his reflection on his career as the founder of rural social work, demonstrates something that many seasoned professionals know: a backward look at the trajectory of our lives offers a sense of inevitability to our personal and career choices. His early work in Appalachia was to be central to his unique contribution as a practitioner and social work educator. Writing an intellectual as well as personal biography, Ginsberg's rich retrospective reminds us of the synergy of personal and professional experiences in constructing our professional contributions.

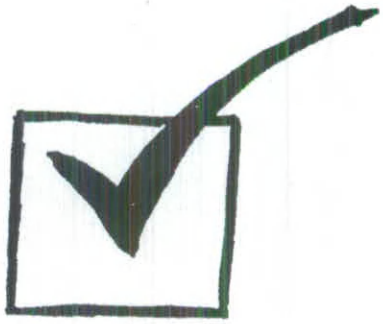
Michelle Emery-Blake in "Ariel's Legacy" describes her reawakened pain from a past miscarriage as a window into her clients' experience of loss. Honoring her loss after many years allowed her to connect with losses felt by her clients and added depth to her clinical practice. In "The Cloak of Invulnerability: Secondary Trauma and the Helping Professional," David Prichard describes the impact of secondary trauma on emergency workers. While working as a clinician at a mental health crisis center with firefighters who had responded to a horrific highway accident, he discovered that one of its victims was a close professional associate. Through his own experience of secondary trauma as a result of this experience, Prichard recognized that his vulnerability both deepened his work and made it more problematic.

Frank Kokorowski in "Conversations with Mother: Healing the Wounds of Psychological Trauma" recalls how his childhood pain mirrored that of his mother's as a Holocaust survivor. In this moving narrative the author recounts how the intergenerational suffering that began with his mother was resolved through conversations with her when he was an adult. Lora Nakamura in "Looking Up: A Short Woman's View of a Heightest Society" recounts the loneliness and discrimination she has experienced as an Asian American woman of

short stature. Living her life with the belittling stereotypes of others, the author experienced internalized oppression as she attempted to separate her identity from the stereotypes associated with her short stature. Her understanding of oppression and suffering experienced by others, as well as her commitment to speak against oppression, were forged by personal life experience.

Cheryl Resnick-Cortes in "Seventy Years of Mistrust: Elderly Survivors of Sexual Abuse" recounts her work with older women who are survivors of child sexual abuse. Through her work with these clients, Cortes was reminded of the strengths all people evince, regardless of age or physical condition. She writes of how her clients' transcendence of this early trauma offers a lesson about the ways life moves upstream from the painful experiences of our youth. Marion Bussey in her narrative "Living in Community: Lessons from the Commune" recalls her own youthful experience in the 1970s as a member of a commune near Ithaca, New York. The author reflects on this early experience and links these reflections to research on communes and intentional communities. She finds a resonance between communal life and the settlement houses founded by Jane Addams and other early social workers. It was in social work that she found a profession consonant with her early ideals and beliefs that people are basically good.

These narratives reinvigorate our central commitment to offer professional narratives to *Reflections* ' readers, narratives which bring a singular reality not available in most professional writing and research.



A Dialogue with Students in Mexico

Grant Larson, Ph.D., Thompson Rivers University, British Columbia

This narrative describes the author's reflections on learning with a group of Canadian social work students in Mexico. The study tour was framed in terms of creating opportunities for students to learn about the impact of social and economic policies on marginalized people, and about the personal reality of poverty and oppression. However, it is also the author's story of changed relationships with students, a new awareness of his own privilege and power, and a challenge to create new transformational learning processes within the academy.

"Through dialogue, the teacher-of-the-students and the students-of-the-teacher cease to exist and a new term emerges: teacher-student with students-teacher. The teacher is no longer merely the-one-who-teaches but one who is himself taught in dialogue with the students, who in turn while being taught also teach."

Paulo Freire (1993, p. 80)

The words penned by Paulo Freire (1993) and advanced by bell hooks (1994), aptly describe education as a practice of freedom whereby men and women reflect and act upon their world to transform it. Traditional roles of students and teachers become blurred, fall away, and are replaced by dialogue and co-investigation. Students are no longer "docile learners" and teachers experts dispensing knowledge, but both share in the learning process. Many of us who were educated in the 1970's and 1980's and who subscribed to Freirean principles have had little opportunity as educators within the academy to practice this liberating form of education. Traditional course structures, university governance policies and expectations, lecture formats, student evaluation systems, and traditional roles of faculty members have continued to create barriers for those wishing to engage in a new kind of education.

In April 2002, I landed in Mexico City with twelve Canadian social work students set to embark on an educational experience unlike any I had encountered in my twenty years as a social work educator. The next fifteen days brought an exhilarating, emotional, and exhausting immersion into Mexican culture and social conditions. In designing this study tour, we had hoped to create an opportunity for students to understand the impact of social conditions and economic policies on marginalized people, and to learn about the many creative solutions utilized by people to survive in oppressive conditions. Although the purpose of this learning activity was framed in terms of student learning, I did not realize the impact this experience would have on my own learning and on my understanding of developing relationships with students.

Like Schmitz's (1998) experience with graduate social work students, our program, which was coordinated by Global Awareness Through Experience (GATE), a U.S. organization with an office in Mexico City, provided seminars and dialogue with Mexican social workers, social activists, unionists, economists, and poor marginalized citizens, as well as site visits to various social, cultural and political organizations. Students ate local food and rode public transportation, and were encouraged to immerse themselves as much as possible in the culture and activities of local

citizens. A particularly meaningful part of the study tour took place as the group travelled to, and was hosted by, three impoverished rural communities in the state of Guanajuato. In these communities we heard the stories of women and children living in extreme conditions of poverty as the majority of the men had left the area to find work. Their local economies had been devastated by the impact of the North American Free Trade Agreement (NAFTA). Each evening throughout the tour, participants met for an evening reflection to debrief the day's events and to discuss their learning and reactions to what they had seen and heard.

Throughout the study tour I kept a journal to record my own feelings and thoughts as I knew that before long they would become jumbled and confused. Although this diary contained other themes of my experience and musings while in Mexico, it formed the basis of reflections on my changed relationships with students. It was after returning to Canada that I became aware of how this experience had personally and professionally changed me and my view of both the education process and my relationship with students. In the following account I have selected a series of particularly meaningful situations in which I believe my relationship with students became a dialogue of colleagues sharing equally in the learning process.

The Arrival

We left the Mexico City Airport, packed into two very small vehicles, hot and sticky, and in very close physical contact with one another. As we proceeded at incredible speeds through heavy and what seemed to be erratic traffic, with students shrieking, I knew that the usual distance between faculty member and student had just been decimated. Upon arrival at our destination this was accentuated when I was informed that I, a male faculty member, would be bunking with the only male student on the tour. I would be spending 24 hours a day, 7 days a week with these students. The realization that I could not escape to my own privacy at the end of an extremely tiring day served to teach me that, in fact, I was no different than any of the other learners in this experience. I believe this was the beginning of redefining my role as faculty member.

Jenna – A Very Ill Student

After three days in Mexico City one of the students, Jenna (not her real name), became incredibly ill with a stomach infection. After some discussion about what to do we decided to transport her to the nearest emergency department at a local hospital. To our surprise, the hospital was a beautiful facility with all the latest medical equipment and technology. Jenna and I spent several hours in the emergency department waiting for a doctor to examine her. She was not only very ill but frightened to be in a strange place where no one spoke English. My minimal Spanish did not seem very helpful in this crisis situation and I regretted that I had not followed through on my good intention of improving my Spanish before leaving Canada. With little else to do, Jenna and I began to share stories of our upbringing, our families, our struggles, and even our successes in life. At first, I thought this was a good distraction from the constant pain she was experiencing. However, as the hours passed I found that I really enjoyed this conversation and was learning far more about Jenna than I had about most other students.

We developed a new understanding and respect for each other as people, and my role as teacher seemed completely irrelevant. I held her hand (something I would be reluctant to do in Canada), supported her in this difficult circumstance, and just listened as she cried with the pain. Jenna was treated well and recovered nicely in a couple of days. However, even after returning to Canada, it seemed as though something had changed in

the way I interacted with Jenna. We had shared a very personal experience and knew each other in a much different way than most faculty and students. I wondered how the development of a personal relationship like this would affect learning in the classroom.

Evening Reflections

A situation that proved confusing to me at first was the role I was to play at the evening reflections where participants shared their feelings and thoughts about what they had seen and heard during the day. Was I to co-facilitate this group session with the GATE co-ordinator and play the typical role of supporting students in debriefing their experience? Or was I to be a participant and share my own thoughts and feelings? If I did this, would I be honest with the students and express my true feelings, concerns, lack of understanding, and vulnerability? Evening reflections were usually very emotional sessions where participants became tearful and often expressed their sadness and anger in explicit ways. After a particularly difficult day of hearing sad story after sad story and seeing many individuals who had been disadvantaged by international economic policies, I found myself almost overcome with emotion and distress. I realized then that this was just as much a learning experience for me as it was for the students. I decided to be transparent with the group and shared my feelings, questions, and thoughts. Not surprisingly, my decision to take this risk opened the door for many of the students to share their feelings in very uninhibited ways. We talked much longer than usual that night and ended with more questions than answers. I realized that I was beginning to understand issues of poverty and oppression in a way I had not experienced before, and that I was being transformed by this experience.

The Day Care Centre

A highlight of the study tour for many of the students was a visit to a Montesorri Day Care Centre in a working class neighbourhood of Mexico City. There is something about children that tends to lighten the spirit and bring out the best in people. We spent several hours at this centre interacting with the staff and playing with the children. The students were impressed with the creativity of the workers, who did a marvelous job of teaching and entertaining the children with none of the fancy modern toys seen in most North American day cares. What was particularly liberating for me was the opportunity to interact with both the students and the children outside of our usual roles. Although both students and faculty know that each other has families, it is not often that we actually get the opportunity to see each other in those parts of our lives. Students told me they were surprised to see me, their professor, sitting on the floor with several three year olds jumping on my back, laughing and laughing. I was reminded of how post-secondary education tends to compartmentalize the lives of students and faculty. Yet, here we were, just a group of individuals enjoying the young wonders of life together.

The Discotheque

On one particular evening, several of the students indicated that they would like to experience some of the night life in Mexico and wanted to go to a nearby discotheque. I thought this might be fun and a good break from the long, exhausting, and emotional days. In Canada I would normally be conscious of maintaining appropriate professional boundaries with students and would decline such an invitation to "party" with them. However, I went and we had a wonderful evening and were, it seemed, the talk of the club that night. We were often invited to dance, but many of the local adherents asked what country we came from where obviously no

one knew how to dance! Although not part of the planned study tour activities, the evening proved to be yet another opportunity to relate to the students on a different level. Upon falling to sleep that night, I began to question the real purpose of maintaining rigid social boundaries with students back home in Canada and wondered how this reinforced the power and dominance of faculty members and inhibited the learning process.

The Rural Communities

After seven days in Mexico City, our group travelled to three rural communities in the state of Guanajuato. Families here lived in extremely impoverished conditions but shared generously as they hosted us. In these communities, women stated that about 85 percent of the men had gone to Mexico City, the maquiladoras (export assembly plants near the U.S. border), and the United States to find work. Local agricultural economies had been devastated by NAFTA, and women and children struggled to survive with the basic necessities of life. Residents shared their stories, filled with hurt, sadness, anger, and tears, and we all cried together. Many were angry at the immigration practices of the U.S. and Canada which they described as bureaucratic, non-humanitarian, and punitive, and others were angry at the exploitation by large multi-national companies. Others simply cried because they were alone without fathers, husbands, and sons. These personal stories created an understanding of the impact of economic globalization in an entirely new way. Here, political decisions and economic policies became intensely personal, and the connection between structural inequalities and poverty became real for us privileged Canadians for the first time in our lives. At the same time, we heard stories of survival, of grassroots economic development, and of the many creative solutions local citizens initiated to deal with the harsh realities of their experience. We were saddened and encouraged at the same time. My role as teacher-of-the-students was completely torn away in this situation as I was confronted with my own privilege and power as a white well-educated male. With the students I was able to talk about my own conscientization and growth and to truly embrace the mutuality of learning.

Canadian Embassy

The experience in the rural communities was followed by a paradoxical morning at the Canadian Embassy. After waiting a lengthy time because of tight security at the Canadian Embassy (Nellie Furtado, a Canadian pop star, was also at the Embassy we were told), our group met with several Embassy staff to discuss the role and work of the Canadian Embassy in Mexico. After an initial sharing of information, students expressed outrage at the positive "spin" the Embassy placed on NAFTA, economic globalization, the neo-liberal agenda of the new Mexican government, and the denial of local economic conditions and the plight of disadvantaged citizens. Students commented on how they had just spent three days in several impoverished communities that had been devastated by NAFTA and economic globalization, and that they had not heard of any of the wonderful things that the Canadian Embassy reported they were doing. One student asked if Embassy personnel might also consider visiting these communities to hear first hand about their economic and social conditions. As the students, with great articulation, continued to express their consternation, Embassy staff looked to me as a faculty member to respond to the students, as if to say, "Can you not keep these radical students in line?" I did respond but not along the lines the Embassy staff wanted, and the students indicated that they would have none of this usual role differentiation between teacher and students. They stated that as they had asked the questions,

Embassy staff should respond to them, not to me. I was delighted to see this group of bright, articulate, well-informed, and impassioned students provide argument after argument in a rational and respectful way. No need for any professorial intervention or power with this group. Perhaps this is what Freire meant by problem-posing education and reflection and action upon the world to transform it. We were somewhat doubtful, however, that after this experience the Canadian Embassy would grant an audience to future groups of social work students.

Ramajit

One of the students who participated in the study tour was a 45-year-old Indo-Canadian woman who had been in one of my previous classes. I knew her as an intelligent but quiet woman who rarely spoke in class or group discussions. In Mexico, she became, to many of us, a wise and gentle teacher. Ramajit (not her real name) had a dark complexion and dark hair and eyes, and many local Mexicans mistook her for being Mexican. They often spoke to her in Spanish and accommodated her needs first without the attention often afforded foreigners. On several occasions I could tell that this both surprised and embarrassed her. One evening at reflection time, Ramajit commented that for the first time in her life the colour of her skin had become an advantage, and that she now understood what it was like to be part of the majority. Gradually, throughout the ten days, Ramajit shared more and more of her own experience of racism, sexism, classism and marginalization as a member of the Sikh religion in our Canadian community. She shared openly and confidently and often assisted our white students in making the connection between structural oppression in Mexico and that in Canada. I was taught immensely by this woman and began to reflect on how I had perhaps created barriers in the classroom that had not allowed Ramajit to share her insight and experience in open dialogue.

Spirituality

The GATE program in Mexico City formally ended, but students remained in Mexico for an additional five days to relax and enjoy the vibrant Mexican culture. Several students headed out in various directions from Mexico City (toward Acapulco and Veracruz), but I stayed in the city with three students to visit various historical and cultural sites. This unstructured informal leisure time offered me the opportunity to relate to students in yet another way. One warm evening, I and two students decided to get a hamburger at a local fast food restaurant. Although I knew both students quite well, I had not imagined that we would spend several hours in that restaurant in deep conversation about spirituality. Our attention during the GATE program to the religious context in Mexico had raised many important issues for the students. Both were highly committed to their Christian faith and began to share some of the personal dilemmas they had regarding the integration of faith and professional social work. They indicated that at times they had felt a conflict existed between the values and beliefs espoused by their churches and those at the School of Social Work. They further indicated that even though there had been opportunity to discuss these issues in some classes, they had been reluctant to do so for fear of reprisal and negative reactions from other students and faculty.

I was both alarmed and surprised by the negative subtext the students described as a very real part of their social work education. The two students openly shared their personal spiritual beliefs with me and asked me to do the same. It seemed as though no topic was taboo for our discussions in Mexico. I had the opportunity that evening to dialogue with students again on a level and in a way I had not previously experienced in my role at the

university. It provided a wonderful opportunity to speak together about common issues, questions, and dilemmas with no fear of breaking boundaries or inviting negative consequences by what was disclosed. We all commented on what a wonderful time this had been as we left that restaurant in the wee hours of the morning, absolutely drenched with perspiration.

Counsellor, Travel Consultant, Mediator, Friend, Parent

I would be remiss and would represent this experience unfairly if I did not mention a range of other roles I played in accompanying the students on this incredible experience. Even though the traditional barriers between student and faculty member seemed to disappear, I did not become a participant like all the other students. I did carry a number of responsibilities as faculty member which were unlike those of student participants. A number of these roles and responsibilities were ones that I would not normally take on as a faculty member in my school of social work, and I was again pushed toward redefining the faculty role. By day three there were several instances of interpersonal conflict between the students, and I served as mediator and facilitator of conflict resolution. Toward the end of the formal program, one student's partner in Canada experienced a life-threatening health problem and, in addition to providing crisis counselling and support, I assisted the student in making immediate travel arrangements back to Canada. Throughout the program, the very personal and emotional stories of Mexican people triggered for some students personal issues in their own lives, and I served as counsellor and friend. When you are thousands of kilometres from home, in an unfamiliar context and culture, it does not make sense to refer a student to a professional counsellor to deal with his or her personal concerns. And finally, most of the students were young enough to be my children, and as much as I resisted taking on any kind of parental role, I did find myself from time to time addressing these young students as if they were my children. In some cases this involved clarifying boundaries for safe personal conduct and activity in Mexico, and in one case, absolutely forbidding a student to engage in what I felt was a very unsafe activity. This showed me again that the study tour had taken me to a place with these students that was unlike anything I had ever experienced.

The Lessons

This has been a narrative about my experience with Canadian social work students in Mexico, and there have been many lessons which I hope will change the way I teach and learn in the university at home. Without hesitation or apology, I suggest that the Mexico Study Tour has personally and professionally transformed me, and I have been challenged to reconsider the way I approach my work as an educator.

First, I have been reminded that the key to learning is positive, respectful, and egalitarian relationships with students. I believe this is commonly understood in schools of social work, but many of us have not, perhaps, reflected enough on our dominance and power as teachers. Arnold, Burke, James, Martin, and Thomas (1991) have suggested that traditional educational approaches have placed learners in passive positions and that in social change education, a new educator/learner relationship needs to take hold. My experience suggests that in this new relationship, faculty need to let go of some of their power and control, become real and vulnerable, and engage the students in dialogue that represents two-way communication. This involves moving beyond the boundaries of academic relationships and relating to students in personal ways where we become co-learners. These relationships need to be respectful and to encourage

students to be active participants in shaping the learning process.

This experience has also increased my awareness of my own privilege as a white, heterosexual, educated, and able-bodied male, and the power inherent in that social location. My daughter recently said to me in a discussion about social location: "Dad, none of your social categories are disadvantaged – you've never been oppressed." She is correct, and I was reminded of my responsibility not to use the privilege given to me for my own benefit but to work for those who were less fortunate. Arnold et al (1991) indicate that educators who lack critical self-knowledge can inadvertently erase themselves from the picture by not working through basic questions about who they are and why they do what they do. Without the knowledge of how we individually and collectively become part of oppressive structures, we cannot face the challenge of social justice. The Mexico Study Tour has encouraged me to consider again how structural inequalities, poverty, and oppression are played out in my community, how I am part of those oppressive structures, and how I can become more actively involved in social action and social change.

And finally, I have learned much about actual teaching and learning processes. This experience has taught me that content and information are much less important than I often think. Instead, dialogue, reflection, experience, and problem-posing strategies are much more critical to creating transformation learning. Until this experience I had not seen students embrace and understand issues of poverty and oppression with the same depth of emotion and commitment. The issues were, in fact, for most students, still pieces of academic information which did not really touch their lives. The experience of seeing, hearing, and reflecting on the real lives of those who have been disadvantaged moved the students to consider how they might make personal and professional changes in their own lives. As not all students can engage in international study tours, this experience has challenged me to create educational processes at my own school that bring students face to face with the reality of human disadvantage.

A special thank you to all my teachers who participated in the Mexico Study Tour – you taught me well!

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Special Issue

Guest Editors: Karen Smith Rotabi and Denise Gammonley

International Social Work Education Exchange: Study Abroad and International Field Placements

This special issue focuses on study abroad and international field placements, from the perspectives of students, educators, and host country facilitators. *Reflections* seeks narratives that encompass experiences in teaching, hosting individual students and student groups, personal travel logs, and curriculum design. While submissions that focus on any country or culture will be considered, particular interest will be given to developing countries and countries in transition from war and colonialism.

Narratives may address but need not be limited to the following:

- Host country social workers perspectives on their role as guide, emphasizing cross-cultural learning activities
- Host country social worker perspectives on the benefits and burdens of facilitating study abroad or international field placements
- Travel logs of students or social work faculty that tell a story about their "ah-ha" moments as they explore differences in culture, social work models, and cope with dynamic learning environments
- Social work educators' experience in facilitating study abroad, and their experience in engaging host country nationals and social work students in mutual learning activities, including challenges of language translation and interpretation
- A discussion of ethics in the international learning experience, including issues of development voyeurism
- A discussion of globalization, neo-colonialism, power, and oppression in the context of international social work education
- Application of the theory of reciprocity or exchange theory to international social work education
- Reflections highlighting the role of indigenous facilitators in the learning experience, especially those giving women in developing countries and opportunity to share their perspectives
- Reflections highlighting the incorporation of village customs such as traditional medicines, music and dance, and rites of passage into the international education experience

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Deadline for submissions January 1, 2007

"Theory in Action" Revisited

Judith A. Lee DSW, Florida Gulf Coast University, and Carol R. Swenson, D.S.W., Simmons College

In the following narrative, the authors of this classic article discuss how the theories they wrote about in 1978 are still relevant today. The original article from *Social Casework,* June 1978, Volume 59, #6, is printed here in its original form.

Carol Swenson, 1978

Judith Lee, 1978

Carol: We have decided to reflect on the ideas and experiences we wrote about 26 years ago in the form of an exchange of letters between ourselves. This reflects new realities: we now live 1,500 miles apart instead of having adjacent offices; and new technologies: the Internet, which didn't exist when we wrote this paper.

Judy: It is such a joy to think and write with you again. When we wrote "Theory in Action" we were seasoned practitioners in our early thirties bringing front-line experiences to assistant professorships at New York University. I still remember the happiness we felt at finding in each other kindred spirits as we struggled with issues of "fit" and relative youth on an established faculty, then briefly headed by "an outsider from Columbia," Hy Weiner, a mentor and friend to both of us. Hy's community work, group work, "interactionist," and radical background was also out of step with NYU at that time.

We soon discovered that Carel Germain had greatly influenced us both, as doctoral professor (you) and revered mentor/colleague (me). I had been on the Columbia faculty as an assistant professor and faculty field instructor at Claremont Village, the agency we describe in our article. Our relationship with Carel formed a base for our professional discussions and our wonderful friendship, both lasting throughout the years, and intersecting with Carel's life until we, and the profession, lost her, our North Star, in 1995.

We are pleased that the article is seen as a "classic" in the profession, and will point out how contemporary the use of ecological, life-model and interactionist concepts remain. The foundation we noted in the late 70s is

part of the solid base of contemporary practice, though it has been both broadened and elaborated, creating recognizable, familiar and time-weathered constructs that are also creatively altered and sometimes become something new and different. We invite the reader to join us in our conversation.

Carol: This is such an interesting time to revisit "Theory in Action." I've just finished a chapter for a book on "Community-Based Clinical Practice," which is still a new-enough and important-enough idea to have a whole book devoted to it. At first thought, "Theory in Action" could take a place in that book. So, our ideas have certainly not become the "dominant discourse" in the profession, but are, perhaps, part of a vigorous alternative discourse. When recently preparing to teach a course, I remember thinking that it was too bad that "Theory in Action" is "so old." Our students, accrediting bodies, and some faculty, I fear, always think "new is better." The idea of classics being necessary foundations and precious are lost on this "planned obsolescence" world. But maybe if "old" is re-evaluated by being republished, it counts as new!

I think that by the "dominant discourse of the profession," I am referring to the pressures of managed care, the emphasis on face-to-face work with clients (billable hours) at the expense of all other types of practice, and the positivist research tradition. In regard to research, you and I have been somewhat unique in using systematic qualitative research methods to develop practice theory and skills. And, at last, these methods have a degree of respectability that they did not previously!

A "process" thought: I think that our dialogue is a wonderful example of the best of the "new"-the computer and Internet technologies. When you think of it, our ability to edit and/or make clearly differentiated comments on our own or each other's writing, and pop things back and forth almost instantly is amazing!

Judy: I think that our early attempts to connect the exciting ideas of the day to practice in urban agency setting could have been written yesterday. The ecological perspective developed so significantly by Carel Germain, and the off-shoot "life model approach" of Germain and Gitterman are still very much alive today. The interactionist approach of William Schwartz has also been carried forth, especially by a younger generation of social group workers.

Following Bertha Reynolds and Germain and Schwartz, the article was multi-modal and "generic" before the profession caught up. Yet I wonder how many practitioners or educators have mastered, even today, the "depth and breadth" of a unified profession once standing on five or six methods of helping. The problem of theoretical constructs for broad and deep practice is as contemporary today as it was when we wrote the article.

Today we might include narrative and constructivist approaches, evidence-based practice, culturally sensitive community clinical practice and strengths perspectives as part of our thinking. Yet none of these can stand alone as a foundation for practice. My work in the empowerment approach incorporates all of these, and attempts to put them together in one framework. Some would argue that the umbrella of "empowerment" is open to misunderstanding (note the conservative co-optation of the term by conservative policy makers), and also not big enough. The "mega-theory" we groped for then is closer, but is still a work in progress.

You and I, in somewhat different ways, have also continued to utilize the basic constructs we used in "Theory in Action" as our frameworks, though we have both also branched out in our own directions. The ideas from all three theoretical formulations, however, have been integrated into social

work thinking without the references to the original thinkers, more like household words, and are used and misused as such.

Carol: I have to jump in here and underscore this last point. It is truly disappointing that there is so much "forgetting" of those who have gone before, or even are fellow travelers at the same time! Large numbers of people do not credit Schwartz for the "interactionist approach," Carel for the ecological perspective, and Carel and Alex for the "life model." The strengths perspective, services in people's "life spaces," a non-pathologizing view of human nature, psychological distress from life stress and obstacles in the environment (today emphasized in trauma-theory, narrative therapy, and all manner of integrative approaches), are all ideas which, save yours, pay little attention to these origins. I'm not saying by any means that these are the *only* origins, but as people begin to develop ideas, it seems to me that they have a responsibility to discuss the fact that other people have had similar ideas, and maybe earlier! Maybe this is a reflection of the individualism in America, an idea that I will come back to later.

Judy, continued: I'm thinking that some newer technology is a double-edged sword. Hours of "surfing the net" can increase isolation and reinforce individualism or the Internet can help us go beyond ourselves and reach out to each other. Chat room groups, for example for breast cancer survivors, and others who may not have access to face-to-face networks are also important forms of group work these days. Maeda Galinsky and others have written about telephone groups, and expanded into Internet groups.

Carol: Yes, and the Internet is also being used for social action-peace groups, and "Move On," for example.

Judy: "Move On" does a great job of reaching and catalyzing individuals and informing activist networks.

The discussion of social support theory and natural helping networks was key to our 1978 article, and to your writing and research. It was one of the many things I learned from you. For me now, it remains a cornerstone of the foundation-both in my personal life and in my professional life. When I chose, after much deliberation, to leave academia in 2000, my strong networks/communities helped make the transition back to fuller life and practice a good one for me.

Carol: More recently we also include the concept "community" in our thinking and writing. Interesting, isn't it, that it took a while for clinicians to start using the term "community" quite a while after "networks"! Was "community" not objective enough, not scientific enough?

Also "community" implies a contrast with individualism that "social support networks" doesn't exactly. I think that self-awareness about American culture and its impact on professional theory and values was just emerging when we wrote "Theory in Action." And of course, one key cultural element is individualism, which was carried unaware into professional models of individual and family work. Now we can see that relationships with individuals, networks, and communities are of critical importance to people, they have just been overlooked and/or devalued.

One thing I would add that we approach quite differently now is making explicit with clients the social nature of many of their problems - a critical perspective communicated. We were thinking about oppression and marginalization, but I notice that we didn't talk much about it with clients, individually or collectively, in the paper. I remember having a conversation with a client not too long ago about being stranded with car trouble in rural upstate New York. He

was describing how little help was offered. I said, "And are you feeling that there was some racism in that?" I would not have done that in 1978; I probably wouldn't have even thought it. I think that this is an area where the empowerment approach really moves the profession along.

We've been increasingly framing the purpose of social work-including clinical social work-as social justice. You note empowerment as process and outcome, as well as purpose connected to social justice in your work. This puts the concern with diversity and oppression, especially when based on race, class, religion, gender, sexual orientation, physical and mental ability, and so forth at the center of our work, rather than as an "add on." This fits very well with the newer theoretical developments we were mentioning earlier such as trauma theory, narrative therapy, and of course the empowerment approach. But it is also a natural evolution of the ecological perspective and life model's concern with noxious environments and maladaptive interpersonal relationships.

It has also brought American social work into greater alignment with international views and values about social work, where a social justice perspective and community development are much more central than here. I was struck by many things when I was in Australia on sabbatical, but two key ones are relevant to this context. First, they have an absolute conviction that social work is performed at multiple systems levels, and that this is an irreducible part of the profession, and secondly, their pervasive radical critique of the status quo. They, too, however, face the dilemmas of potential reprisals from agencies (read getting fired, pressured to conform, or "reassigned") when social workers and clients challenge vested power interests. You noted that the Guyanese social workers you met were among the most courageous and competent of social workers. You also see your social activism with and on behalf of a farm workers' organization, The Coalition of the Immokalee Workers, as part of the reason that the climate changed for you at your Florida university, benefiting as it did from money from the powerful local growers. When Simmons SSW was taking part in social action on behalf of the janitors' union in Boston (which was protesting primarily for full-time jobs and health care benefits, mind you), it became clear that Simmons employed members of the same Union. While our employees were largely in a category where they were full time and did have health benefits, our efforts to encourage the president to take an activist stand for the union with the employers put us in a situation of some tension with our own administration.

Both you and I have been making efforts to understand the internationalization of today's world, and to think about and engage in social work responses. Your work with the homeless in the US and in a very poor country, such as Guyana, has familiarized you with the most disenfranchised of marginalized people, and you have been a strong voice keeping this desperately needy population on the agenda of social work.

Contemporary Practice Examples.

Since practice examples were such an important part of "Theory in Action," we might include some further examples of our recent practice. Of course the examples of activism noted above are examples of our practice! But in addition, we've also worked with individuals, families, groups, and networks.

Judy: Much of my contemporary practice utilizes natural groups and strengthening or even creating helping networks. One recently widowed elderly woman who lived in a mobile home retirement community experienced acute loneliness and the early signs of Alzheimer's Disease. The natural network of neighbors in the park

became concerned and reached out to the only outsider who continued to visit her, the Eucharistic minister from her church. They shared stories of her wandering around with her underwear on top of her clothes and of getting lost a few houses from her home. As part of the Visitation Ministry Team, I was called in for assessment and intervention.

"Mary"* and I connected immediately and she sobbed and shared her great grief with me, as well as her fears of "losing it." We did intense griefwork, and her husband's hospice bereavement counselor was also re-involved. She and Joe, her husband of 50 years, had so many plans and now she was alone and didn't know what would become of her. Her neighbors were very good, but they were getting "cross" with her, as she forgot things. She was not eating, though the couple next door brought her food daily. She could not taste the food (a sign of dementia as well as grief) and she couldn't bear to eat alone.

I visited daily at first and ate with her as I shared her pain and connected her with others. These included medical and social systems, including the state's Protective Care Services and her family in another state. I also met with the concerned neighbors/friends, encouraging and supporting their efforts to "keep her going" as plans were being made for a move to her sister's home. Alas, that was not to be, as the sister died suddenly before she moved. I will never forget her sobs as she took the telephone from me to receive the news from her niece. We increased our intense visiting as she accepted the news and made other plans.

We continued to support her neighbors in bringing her food and taking her to her appointments. Finally, her niece and nephew moved her to an assisted living facility in their community so she could be near her family. By this time, she had resumed eating, gained weight, and was able to share her appreciation of her neighbor's and our help. This was a faith network supporting a network of neighbors with a little professional help and the flexible use of time and space, the person's own home, and community members as well as formal organizations. It made a difference.

In the Lee County school system, learning about and using the natural group formations was also critical. While most of my work was done with the kids as individuals, I often called them in as dyads, triads, and small groups. Some of the kids also became peer counselors, and recommended peers to me, bringing their friend in and "presenting" the case with the peer. And when problems are network problems, a network solution is necessary.

For example, one of my seventh grade boys, "Rashawn," worked with me on his own painful issues, including not living up to high potential, failing courses, sexual orientation issues – and peer teasing, and grief at the loss of the family patriarch, his grandfather. Then he was suspended for calling a new seventh grade girl a '"Ho" (whore). The girl, "Carrie," who had just moved from another state, was devastated. The sexually explicit rumors about her alleged promiscuity spread like wildfire. The seventh grade was caught up in the contagion effect of this explicit talk, and many kids were suspended. This was a systemic and network problem now. Carrie was a very pretty girl who immediately attracted boys and got jealous responses from girls. She barely had time to adjust to a new community and school, having left all her friends and close family behind in another state. She was lonely and also intimidated by the multi-racial peer group here, as she had come from a small homogenous southern town. Rashawn saw himself as a leader, who spoke for his friends, and he "took the heat" for saying what the others were whispering. He and his female counterpart in leadership, China, felt the rumors they heard were true, and that Carrie was a "bad influence."

* All names are pseudonyms

I worked individually with Rashawn, China, and Carrie, and also developed an activities group with Carrie, China, and Tracy, who was part of the rumor mill, and Maria, who was not involved in it. In this activity group, while designing tee-shirts, we talked about peer relationships and their varying racial and ethnic heritages as well. Friendship and heritage became the themes written into tee-shirts and young hearts. As China got to know Carrie, she let me know that she had been wrong about her, and that she would help stop the rumors. Tracy agreed to help. The girls became friends and Marie became Carrie's best friend.

I also met with Rashawn and his best friend, Jerry, who also agreed that they had been mistaken. They identified Tim, another new student, who was trying to fit himself into the group and had started the rumors. I worked with Tim as well, who agreed to help tum things around.

Carrie and Tim became part of the "in group," the rumors stopped, and the seventh grade went back to "normal." The painful bullying was over, and Rashawn and China were free to work on the concerns that initially brought them to me. I wish that systems in the grown-up world of aggression and violence could be worked with so "easily!"

The concerns youth have are vital and important! One fourteen-year-old Mexican-American boy, Pedro, told me that no one had ever listened to him before. He wanted to kill his abusive step-dad and protect his Mom. Fortunately, his mother was able to ask this man to leave the home after Pedro shared his concerns with her.

Another boy, Joel, 15, was beaten often by an older brother and scape-goated at school. He was suspended by the school for a thinly-veiled Columbine-type threat. Fascinated by guns and weapons, he shared his rage and disappointments with me. He later thanked me for helping him keep his sanity in this school and not getting angry and hurting everyone or himself. He said he will always remember me saying "Live, Joel, live! Choose life!"

Carol: As you know, I've also been involved in the development of a faith--based program. This is a Pastoral Counseling Center, begun by one of the oldest Boston congregations, out of their awareness of the cutbacks in mental health services. They have a particular concern that people of faith need a place where their spirituality and religious commitments can be respected and drawn upon. As was anticipated in practice this has meant that the clientele largely comes from this church itself and urban black churches.

There are a variety of special dimensions of this program. All of the clinicians are volunteers or interns, though there are paid executive and clinical directors and an administrative assistant. The clinicians cover a range of spiritual and religious traditions, including Protestants and Catholics - white, black, and Latino; Conservative Jews, and even a practicing Buddhist or two. Training and community-building for the clinicians has been built into the program with great thoughtfulness, commitment, and creativity.

This experience has lead all of us to rethink the worker-client relationship, the place of spirituality and religion in people's lives (and lack of attention to it in even in the very congruent approaches of the ecological perspective and life models), and the intersections of race, class, ethnicity, religion, and spirituality. Most of these clients have had very traumatic and troubled lives, and many of them have turned to the soothing of drugs and alcohol. It is impressive how many have subsequently drawn from their relationship with God or with a church to change their lives.

I worked with one African-American woman who was seeking help because her marriage was falling apart. Her husband was verbally abusive and demeaning. Her church

was her greatest support, but the wisdom within the church was that a woman should stay with her husband, especially if he was not abusing her physically. She should pray for him to change, and stand by him. She needed someone to talk to who was not a member of that church to test out her questions: Did God want her to stay, to let someone (emotionally and verbally) abuse her again? That didn't fit with what she had learned in AA and NA. She didn't have time to wait till he changed, she thought. What were her options if she separated? She wanted to get an Associates degree in human services, to be able to help others as she had been helped. She needed to provide for her family. She wasn't a good enough Christian right now to do what they asked of her. Of course she would continue to pray for him! And maybe if/when things were different they could get back together. I encouraged her to consider her own image of God. What did she think that a God of love, her image, would want her for her, as well as for her husband and her children?

It was a very brief intervention: two meetings - one in my car - and several phone calls. It seemed to be enough for her to mobilize her formidable resources. Did I do anything unique? I held the complexities and tensions of her experiences with Twelve--Step Programs, with secular therapists (for want of another word), and with her church. took seriously her hopes, her faith, her history, her strengths, and her full ecological field with all its resources and stressors. She felt comfortable raising questions about her church with me, which might have seemed disloyal with a clinician under secular auspices. Here the ecology expands to include her faith in God and her church community.

As the PCC reach out to local clergy, they both inform us about how we can be most responsive to their congregants and bring us into the connections they have made with formal systems - the prisons, Division of Youth Services, and so forth. We are thus becoming parts of many helping networks, both natural and formal. We are developing theory as we go, in our weekly and monthly seminars, reflecting on our experiences with individuals and families, with groups, with other caretakers, and with each other.

Judy: It is not a surprise that both of us are integrating faith and spirituality into our thinking, writing, and practice. One of the benefits of getting older is getting more secure in who one is and the risks one takes. Another benefit is that one resolves or learns to live with what others may see as contradictions. You and I talked about spiritually-connected practice many years ago but now can actually write about it.

When I reflect on my practice now, it is clear that I continue to value and use the concepts that we wrote about in 1978 and taught for over a quarter of a century. It is also clear that I value "clinical" knowledge and skills and no longer think that we need to avoid the word as "medical model" or "stigmatizing" nor do we need to avoid the spiritual in our writing or doing.

I enjoy being an "empowerment-oriented clinical community practitioner, who includes spirituality in life and work." What a string of words - and there could be others added - yet these aptly describe the "theory in action" that forms my personal/professional identity. Relying on my own networks for life, I continue to promote natural helping networks, including the worker-client dyad and small groups, in the healing process for others. I struggle to harness community processes for social and economic justice, sharing this task with like-minded others. Thank you, dear friend, for being a part of my life-giving community. Here's to continued Theory in Action!

Carol: And I, moving toward semi-retirement, am cutting back on my teaching

so I can do more practice, and writing, and "living." Being asked to reflect on "Theory in Action" with you is a gift. It marks a life transition, a temporary "book-ending" of parts of my professional career. I, too, am looking forward to further opportunities to practice, probably especially hospice-related work.

I also continue to have questions that I want to research and write about: right now, I'm pondering how students evolve a sense of social justice clinical practice, and "how we sustain ourselves." My paper, "Dementia Diary: A Personal/Professional Journal" has been published in Social Work (July, 2004) and emails are flooding in, saying "Thank you, thank you." I think that there is a tremendous hunger in the profession for personal accounts and narratives, humane and humanistic writing about human experience. This kind of writing is one of the ways, don't you think, that sustaining happens, and there is precious little of it in the social work literature.

This brings to mind that another of the contributions of the "life model" is to keep us reminded that our work is about life, and life-giving, however much we are pressured to dehumanize it, to reduce it to "components" which can be specified and quantified. I loved your phrase about "the exact measurement of non-exact things" (referring to positivist thinking and research).

I am telling the thank-you note writing people about Reflections of course! I'm also beginning to take somewhat seriously people's requests that I write further in this vein. But I also want to spend more time with my family and friends and communities. Or out in my kayak and scuba diving with the fishes! Living. All of this is living. And what a privilege we have to work in a profession that can be all about "life."

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Carol Swenson, 2005

Judith Lee, 2005

Judith A. Lee and Carol R. Swenson

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Theory in action: a community social service agency

Life model, interactionist concepts of social work prove to be effective when translated directly into action in a community social service agency

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The relationship between theory and practice in social work is often obscure, and many theories seem far removed from application to actual work with clients. Two components are necessary for sound social work practice: First, practice needs to be based in theory — a theory related to the people served. But, theory also needs to be operational. Theory about the function and the role of social work needs to be translated into the actual workings of an agency, the structure designed for the delivery of service.

An overview of agencies suggests that few are conceived out of the marriage of theoretical thoughtfulness and client need. All too often agencies grow and change in response to their own organizational interests or the political or economic conditions of the moment. Also familiar is the agency whose function is so narrowly defined that a family seeking help must actually apply to many different agencies. One-stop, full-service banking may exist, but such social agencies are a rarity. Some community mental health settings are beginning to translate the preventive public health model into practice. All too often, however, they are oriented toward the prevention or treatment of mental "disease," rather than toward the positive goal of enhancing normal development.

Recent theoretical developments in social work—the ecological perspective and the life model of practice—have dramatically shaped a view of social work as an offering of services to the whole population. This perspective views modern living as complex, constantly changing, and potentially overwhelming. It places the social worker in the midst of life's problems. It suggests that social workers can support individual coping and help make the social environment more responsive to the people in it.

The skills and role of the social worker in this theoretical formulation are not as clear as is the social purpose of the profession. A compatible forerunner of this theory is the interactionist approach. The mediation role of this approach offers a role and defines the skills which can translate the ecological perspective into practice.

This article will describe an agency that has put these ideas into practice as comprehensively as possible. The agency is located in a large public housing project in an extremely deteriorated neighborhood and serves the whole project population. Its function is to help tenants with social needs toward the end of becoming more "satisfactory" tenants. The clients in turn use the agency to obtain services which make their lives more satisfactory. All levels of relational systems—one-to-one, small group, social network, and community—are used to meet the clients' needs. The agency is designed to

meet the clients in the midst of their life struggles and to maximize their access to services. Staff consists of eight social work students, one administrator/field instructor, and one assistant/secretary.[1] Despite the serious limitations of a student-staffed agency, the workings of an agency based on life model-interactionist concepts are well demonstrated. Although these ideas were developed in this setting consistently (as much as reality constraints would allow), they are usable—and have been used in varying degrees—by social workers in many different settings.[2]

The theoretical framework

Social work has long struggled to elaborate coherently its dual concern with the individual and with society. This concern has been articulated many times, but perhaps nowhere better than by Bertha Reynolds:

> The essential point seems to be that the function of social casework is not to treat the individual alone nor his environment, but the process of adaptation which is a dynamic interaction between the two. Social casework is essentially a mediating function . . . dealing with difficulties in the relationship between individuals or groups and their physical or social environment.[3]

Social work has been hampered in developing that duality of focus by the lack of theoretical constructs which could deal with such complexity. Increasingly, social work is benefiting from advances in the larger world of theory building — of which ecological concepts are a particularly important part. As expressed by Carel B. Germain, who has developed most fully the implications of an ecological perspective for social work practice, ecology is "the science concerned with the adaptive fit of organisms and their environments and with the means by which they achieve a dynamic equilibrium and mutuality."[4] Ecology offers a theoretical framework and research techniques for exploring transactions between individuals or social units and their physical and social environments, the reciprocal interactive processes by which they achieve mutuality, and the obstacles to "goodness of fit."[5]

A broad knowledge base is potentially suggestive of new insights to the inquiring social work practitioner. For example, the fundamental ecological concepts of time and space have begun to be examined for their relevance to social work practice. The fact that arrangements of physical space or different perceptions of time can have profound and highly variable effects on behavior has begun to be considered in relation to institutional arrangements and policies, clients' transactions with their life space, and the worker-client encounter.[6]

A good deal of attention has been focused on the family as perhaps the most intimate and crucial aspect of the social environment. The interactive processes between mother and newborn infant, between schizophrenics and their parents, and within well and poorly functioning families are some of the areas of study.[7]

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[1]The authors wish to acknowledge the inspiration of Mary Maiberger, an especially talented and empathic person, who has been assistant administrator/secretary of the agency for thirteen years, providing a continuity that the more transient staff could not.

[2]Although there are a number of agency examples of the ecological perspective which have not yet been reported in the literature, the interactionist approach has been described in a variety of settings. See William Schwartz and Serapio R. Zalba, eds., *The Practice of Group Work* (New York: Columbia University Press, 1971).

[3]Bertha Reynolds, "Whom Do Social Workers Serve?" *Social Work Today* 21, no. 6 (May 1935): 5-7, 34.

[4]Carel B. Germain, "An Ecological Perspective in Casework Practice," SOCIAL CASEWORK 54 (June 1973): 326.

[5]See for example, Rene Dubos, *So Human an Animal* (New York: Scribner's, 1968); and Paul Shephard and David McKinley, eds., *The Subversive Science: Essays Toward An Ecology of Man* (Boston: Houghton Mifflin, 1968).

[6]Dorothy Miller and David Ashmore, "The Ethology of Social Work," *Social Work* 12 (April 1967):60-68; Carel B. Germain, "Time: An Ecological Variable in Social Work Practice," SOCIAL CASEWORK 57 (July 1976):419-26; and Brett Seabury, "Arrangements of Physical Space in Social Work Settings," *Social Work* 16 (October 1971):43-49.

[7]The current transactional literature on the family is enormous in scope. See, for example,

Likewise, considerable attention has been paid to the most structured aspect of the social environment — formal organizations. These include social agencies, corporations, institutions, and governmental bureaucracies.[8] Frequently, the focus of this work has been how difficult it is for the individual or family and a formal organization to establish a mutually satisfactory relationship.[9]

Recently, social network theory has been used to expand the understanding of the social environment. "Social network" refers to the field of significant interactions that a person has—whether these be with primary group members, within voluntary associations, or with organizations or their representatives. The significant issue is that the parts of the ecological field are not necessarily in contact with each other, as would be the case with groups or organizations.[10] The theory provides dimensions for analysis such as density, range, and intensity. It draws attention to the richness and diversity of social interrelatedness. Natural leaders and potentials for mutual aid have been identified within networks, as well as within groups with boundaries.[11]

Individual and cultural differences in values, attitudes, and behavior are becoming topics for serious and painstaking ecological study. For example, Hope Leichter and William Mitchell studied relationships within Jewish families and found that, essentially, social workers were trying to discourage and define as problems styles of relating that their clients valued highly.[12] The "inner world" of various subcultures is increasingly being explored. Also, the very real strengths of persons who have survived in nonnutritive, hostile, or dangerous environments, such as victims of poverty, racism, or handicaps, have begun to be identified.[13]

Evolutionary or developmental concepts have been introduced into social work practice in what has been referred to as the "life model." In contrast to practice based on concepts of pathology or disease, Bernard Bandler says, "the ideal model . . . is life itself, the natural processes of growth and development and the rich trajectory of the life span."[14] Genevieve B. Oxley elaborated this idea by identifying roles in people's life space and suggesting social work interventions patterned on those roles.[15]

A life model, combined with the ecological perspective, refocuses attention on the way socially competent people live their lives and interact with their social and physical environments. The range of actions which are effective as generally well-adapted people respond to their diverse environments is truly

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David Kantor and William Lehr, *Inside the Family* (San Francisco: Jossey-Bass, 1975); and Jerry Lewis et al., *No Single Thread: Psychological Health in Family Systems* (New York: Brunner/Mazel, 1977).

[8]See Amitai Etzioni, ed., *Complex Organizations* (New York: Holt, Rinehart and Winston, 1961); and Yeheskel Hasenfeld and Richard A. English, eds., *Human Service Organizations* (Ann Arbor: University of Michigan Press, 1974).

[9]See, for example, Robert Perlman, *Consumers and Social Services* (New York: John Wiley, 1975); and John Mayer and Noel Timms, *The Client Speaks* (New York: Atherton Press, 1971).

[10]Two classics in the field are J. Clyde Mitchell, ed., *Social Networks in Urban Situations* (Manchester, England: University of Manchester Press, 1969); and Elizabeth Bott, *Family and Social Networks* (New York: Free Press, 1971).

[11]See, for example, Alice H. Collins and Diane L. Pancoast, *Natural Helping Networks* (Washington, D.C.: National Association of Social Workers, 1976); and Ross V. Speck and Carolyn L. Attneave, *Family Networks* (New York: Vintage, 1974).

[12]Hope Leichter and William Mitchell, *Kinship and Casework* (New York: Russell Sage Foundation, 1967).

[13]See, for example, Lillian B. Rubin, *Worlds of Pain: Life in the Working Class Family* (New York: Basic Books, 1976); Leon Chestang, "Character Development in a Hostile Environment," *Occasional Papers*, mimeographed (Chicago: University of Chicago School of Social Service Administration, 1973); and Robert B. Hill, "The Strengths of Black Families," mimeographed (New York: National Urban League, 1971).

[14]Bernard Bandler, "The Concept of Ego-Supportive Psychotherapy," in *Ego-Oriented Casework: Problems and Perspectives*, ed. Howard Parad and Roger Miller (New York: Family Service Association of America, 1963), p. 31.

[15]Genevieve B. Oxley, "A Life-model Approach to Change," SOCIAL CASEWORK 52 (December 1971): 627-32.

endless. Also, actions which seem ineffective when seen out of context often appear highly adaptive when seen as transactions within an ecological field. The life model and ecological perspective also suggest that the work of modern ego psychologists may be even richer than originally had been thought.[16] As the adaptive and creative strategies people actually use to deal with their lives are documented increasingly, they can suggest new styles of relating and catalyzing growth to adaptive and creative social workers.

In the complex and often disorderly ecological field of modern persons, the social worker finds his role and the social agency its function. The mediating role, as developed by William Schwartz, arises from the fact that in our society the individual's "match" to his social environment:

> . . . grows diffuse and obscure in varying degrees, ranging from the normal developmental problems of children growing into their culture to the severe pathology involved in situations where the symbiotic attachment [between individual and society] appears to be all but severed. In this perspective, the social work function is to mediate the often-troubled transactions between people and the various systems through which they carry on their relationships with society — the family, the peer group, the social agency, the neighborhood, the school, the job, and the others. . . . The social worker's skills are fashioned by two interrelated responsibilities: he must help each individual client negotiate the systems immediately crucial to his problems, and he must help the system reach out to incorporate the client, deliver its service, and thus carry out its function in the community.[17]

The process of helping is viewed as having three phases, in all of which the principles of mutuality and reciprocity are stressed. In the beginning phase, the worker takes responsibility for "tuning in" to the client and struggling to find a common ground between the needs of the client and the resources of the agency and community.[18] They jointly define the problem, establish goals, and decide appropriate ways of accomplishing these. During the middle phase they will do "the work," which may be about life tasks or transitions, environmental obstacles, dysfunctional interpersonal processes, or a combination of these. The following skills have been identified in this phase of the work:

> . . . the ability to decode messages, to reach for ambiguities, to probe for negatives, to show love and energy in the work, to partialize tasks, to point up the connections between fragments of experience, to find and mobilize resources, and, throughout, to make the "demand for work" inherent in the contract and in his helping function.[19]

The termination phase includes separation feelings, evaluation and integration of the work accomplished, and planning for the future.

It should be clear at this point that this approach crosses professional divisions by method or field of practice and suggests flexible and creative use of helping strategies as these best meet client need. It means that, wherever possible, the social worker should be located in the usual life space of people. Services should be offered as part of normal living and without stigma.[20] They should be personally and culturally compatible. The worker will discover and support or catalyze those naturally occurring processes of helping which exist in social networks and will attempt to connect isolated persons to these.

In sum, then, the life and interactionist models of practice build from a view of the person as an active, mastery-seeking being. Problems are viewed as arising from a poor fit between the person and his environment.

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[16]See, for example, Erik H. Erikson, "Identity and the Life Cycle," in *Psychological Issues*, Monograph I (New York: International Universities Press, 1959); Robert W. White, "Ego and Reality in Psychoanalytic Theory," in *Psychological Issues*, Monograph II (New York: International Universities Press, 1963); and George V. Coelho, David A. Hamburg, and John E. Adams, *Coping and Adaptation* (New York: Basic Books, 1974).

[17]William Schwartz, "Social Group Work: Interactionist Approaches," *Social Work Encyclopedia*, 16th ed. vol. 2 (New York: National Association of Social Workers, 1971), p. 1258.

[18]Ibid., p. 1260

[19]Ibid., p. 1262

[20]Carol H. Meyer develops these ideas more fully in *Social Work Practice*, 2d ed. (New York: Free Press, 1976).

Helping is directed both at the coping capacities of the person and at the qualities of the environment, with the goal of removing obstacles to growth and relatedness. The worker-client relationship is expanded to include the client and persons in his life space as active participants in change, and the worker assumes a more flexible, reciprocal role as catalyst. Service delivery arrangements need to allow for meeting people where they live their lives and for offering a broad range of interventions in a flexible yet integrated fashion.

The agency and the community served

A major concern of an agency built on such a theoretical framework is to serve the members of the community in whatever living units they create and to engage them with whatever relational system will best meet the need. In this agency, two major programs have been services to the elderly and to children because these are such vulnerable groups. In the ghetto community in which this agency works, one of the heavy values is on education as the way to "make it out." Thus, a great emphasis is placed on working with school children and their families. Much of the service is rendered to children in small groups in the schools and in the agency.[21]

The elderly are served in groups by staff at the Senior Center, as well as individually in their homes or in the agency offices. Programs held in cooperation with community agencies such as the schools, the Senior Center, and a nearby health center and hospital are seen as a way of the agency becoming part of the service delivery system in the community and not acting in isolation. The workers consulted staff of these various systems for help in program development as well as for offering direct services in the schools and Senior Center.

Yet, the authors are reminded of William Ryan's story of "Cholera and the Pump" in thinking about their community: On discovering that the cholera epidemic could be traced to the village water pump, the young doctor ripped the handle off the pump.[22] The authors wish that there were only one pump to disarm! It is hoped that the day will come when the desperate and tragic poverty of areas like these will be eliminated through adequate social planning and policy; in the meantime, however, these communities must be provided with the social services available to other communities. The deterioration of housing, services, and living conditions here are among the most extreme in the country. The elderly, the children, and those younger families still engaged in the struggle for mobility (and some who seem to have lost out in that struggle) make up the community. Most are black and Puerto Rican; some are working class, and some are at or below the poverty level. The nonnutritive elements of the environment are innumerable. Yet, people need the overburdened social systems to work, and the social fabric cannot survive without the people. Therefore, this is a good place to demonstrate these theories in agency practice. It is perhaps an extreme example of the use of the life and interactionist models in practice. If it works here how much better it should work in communities where less individual or social breakdown occurs and thus makes for greater strength! Even elsewhere living life, developing social relationships, and finding a meaningful connectedness to the larger society are difficult.

The work

The use of time and space

In the beginning phase of work, the clients are asked where and when they would like to meet the worker. Usually, this means at their home or at the agency office, which is in an apartment located in one of the buildings. It may also mean a park bench or place of work or education. There is no test of motivation in terms of willingness to come to the agency. The workers are willing to meet the client

[21]A full description of this group approach is found in Alex Gitterman, "Group Work in the Public Schools," in *The Practice of Group Work*, ed. Schwartz and Zalba, pp. 45-72. The group service has continued in the same way as described and will not be discussed further here.

[22]William Ryan, *Blaming the Victim* (New York: Vintage, 1971), p. 257.

where he or she is, literally, not accepting the frequent tendency of social workers to avoid home visits which may be uncomfortable or frightening. About 70 percent of the clients have chosen home visits rather than office visits on a regular basis, although some of this number use both kinds of visits. In the interest of developing a relationship and offering a structure, the workers generally do ask to visit once a week or once every two weeks.[23] This, however, is part of developing a contract and must be mutually agreed on. Also, there are times when other arrangements seem more appropriate. There is flexibility as to day, time, and lateness. At times lateness may be resistance or ambivalence and is explored as such, but often it is simply managing a difficult life on a day-to-day basis. When a client provides an explanation, such as "I had to wait for the welfare check," the workers do not go into psychological intent unless this reflects a pattern. The visit is rescheduled for another mutually agreed on time after determining whether the client may need help with an immediate problem. This demands sensitivity and flexibility of the workers in meeting clients where they are.

The client is also expected to structure his or her life space for the interview. Several clients prefer to cook or clean during their visits rather than sit. For example:

Mrs. N, an elderly Jewish woman, who had been mugged when entering her own apartment, preferred walking to the store or to the park as her space. Because she had been too frightened to leave her apartment for a long time, walking outside was exactly what was needed. Reminiscences poured forth and many feelings and fears were released during the course of each walk.[24]

When the worker is unable to deal with serious concerns as the client moves about, the client may be asked to sit down to discuss things. Generally, however, as the worker attempts to keep up with the client, the client lets the worker "in" in a meaningful way. Each situation must be judged for its own workability.

This is also the situation when other people are present for the visit. The client may have a sister or a friend there to give the worker the message that "you are an intruder today," or because she is there to ask for help for herself, or because she is significant in this situation. For example:

The worker for Mrs. J made the assessment that Mrs. C's presence at the interview meant something important. After the amenities, both Mrs. J and Mrs. C asked the worker to "just go in and talk a little to the children in the next room." Vera, Mrs. J's daughter, was playing with another little girl, Connie. Vera was the "hope" of the family. She did well in school and had no obvious pathology, but was understandably affected by her three mentally ill brothers and the recent death of her father, who had been in jail prior to his violent death during a burglary.

Mrs. J greatly and openly valued the worker's support and help in negotiating her complex world. The worker followed up on the request to speak to the children and began by drawing and painting with the girls. Both girls painted red and apparently violent pictures, and both had stories to tell of people getting killed. After working with the girls for one-half hour, the worker returned to the two women. They asked what she saw. She told of the paintings and wondered if Connie had also had some bad experiences as Vera had with violence. Mrs. J, clearly proud of her worker's "sharpness," nodded to Mrs. C in a "See, I told you," manner. Mrs. C then shared with controlled anger and tears that she is Connie's grandmother and that Connie and her siblings saw their father kill their mother with a knife just six months ago. The court awarded Mrs. C the children, but she does not know what to do with them. One sets fires, another wets his bed and fights, and Connie "lives in a dream world all day." The worker sat with Mrs. C and Mrs. J, who had helped Mrs. C tell her story. With great empathy, the worker related to Mrs. C's grief for her dead daughter and her feelings of being angry at and overwhelmed by the grandchildren, who "saw my daughter killed and did not even go for help."

The worker here was flexible enough to allow her client, Mrs. J, to present her friend for help and to ask for that help in her own way.

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[23]Ruth Smalley, *Theory for Social Work Practice* (New York: Columbia University Press, 1967), pp. 162-68.

[24]The authors wish to acknowledge the contribution of the social work students whose case material is excerpted in this paper: Catherine T. Bush, Rosemarie Conde, Neil J. Cronin, Adrienne Dumas, Rima Finzi, Bernice Fishman, Cara Hofer, Joan Mirabile, and Nancy Sparrow.

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Had the worker been bound by a fifty-minute exclusive interview with Mrs. J and asked to see Mrs. J alone, she would have lost the opportunity to help Mrs. C, as well as the opportunity to allow Mrs. J to be an important person in the social network for her friend.

The C case was accepted, and Mrs. C readily responded to the offer of help. The second interview shows how the worker stepped in quickly and empathically. She partialized, focused, and helped Mrs. C to begin to work on mutually agreed on concerns. The principle of mutuality in contracting and working together is central to the authors' theoretical framework.[25]

The worker asked Mrs. C which one of the things she had raised as problems she wanted to begin with. She said, "Getting on Supplemental Security Income." The worker explored with her why she had been on Supplemental Security Income before, why she had been cut off (she did not go for a medical—she had too many things to do and was too upset about her daughter's murder; she was on medication then, too), what she had to do to be reinstated (get a medical), and how the worker could help (make the appointment).

Mrs. C then talked about Connie, who is good, "but she lies." The worker asked about this problem and Mrs. C elaborated. The worker said that she guessed Connie was a burden for Mrs. C, and she said Connie was. Mrs. C felt that she just was not up to handling the children. What else did the children do that made them a burden for her? She described their fights—the boy threatens the girls by telling them that he will throw them out the window and disfigure them. The worker said it really must be a burden for Mrs. C having to step in to stop such fights all the time. She said it was. The worker asked if Mrs. C had ever thought about placing them? She said yes, Larry and Connie. She could keep Nancy. She wanted to keep them all, but sometimes it seemed like too much. The worker nodded. Mrs. C said that she also thought about camp for them this summer. The worker nodded and said, "To give yourself a rest?" She nodded and said she had an appointment on Thursday at the health center for a physical and she wanted to see a psychiatrist then, too. The worker said she would help to arrange that and would also help Mrs. C plan what she wanted to do with the children. She agreed. The worker remarked that Mrs. C was still very upset about her daughter's death. She said she tried not to think about it. The worker said that she could understand that, but it was not always easy. Mrs. C said she did not let the children know that it bothered her. The worker said that they probably could still sense it, and one of the ways of helping them would be by getting over it herself. She nodded slowly. The worker said it was painful, and that she was there to share that heavy burden with Mrs. C. Mrs. C then offered more information—again trying to explain why her daughter was killed. The worker said she knew Mrs. C was trying to understand why it happened. She said it was always on her mind.

The children and Mrs. C were connected to a nearby psychiatric facility, and the worker remained active in helping Mrs. C decide what to do about caring for her grandchildren. She arranged to see Vera and Connie and one brother of each in a group. Here she used play techniques and talking to help the children until ongoing psychiatric help could be obtained. She also did grief work with Mrs. C, and there was significant improvement in this overwhelmingly tragic situation.

In another situation, a worker found Mrs. R's sister present at two interviews. She assessed that Mrs. R needed her sister's approval for the placement of her children in temporary foster care and worked with the sister accordingly, to Mrs. R's relief.

In another case, Mrs. F invited a friend to the interviews. In this case the worker assessed that the message was "help her, not me; my problems are all better now." When this was pointed out to Mrs. F she agreed laughingly, and she and the worker agreed to conclude their work together.

The use of the office as a space for the client and in terms of the client's timing was also flexible. The case of Mr. D illustrates this:

Mr. D is a tall, heavy, sixty-two-year-old, deaf and dumb black man who was referred to the agency because of "strange behavior." Once it was realized that Mr. D could neither hear nor speak, his "strange" behavior was understood and explained to the Housing Management and concerned neighbors. The behavior consisted of a silent talking to himself with some loud grunts and motions to act out what he was thinking. When,

[25]Carel B. Germain and Alex Gitterman, "Social Work Practice: A Life Model," *Social Service Review* 50 (December 1976): 601-10.

for example, he was anxious over a late check, this behavior was exaggerated. The workers encouraged him to come into the office whenever he felt like it so that they could communicate with him and offer explanation and reassurance. They learned that he could write in simple sentences and read lips when he was calm. The workers, like the tenants, were initially frightened because he appeared to be "crazy," but, as they discovered how to communicate with him, everyone relaxed, especially Mr. D, who then dropped in to "have someone to talk to" occasionally. Later, his notes would read, "How are you? It is a nice day outside." Whoever was present might reply, "It is good to see you, you make the day nicer for us!" to which he would smile and shake hands profusely all around.

Several elderly people and children "dropped in" in similar ways.

Assessing and using natural helping networks

The alert worker can find people helping each other and natural leaders in the community. Mrs. M, an elderly woman who lived across the hall from the agency, turned out to be a well-respected matriarch in the community. She functioned naturally as a broker among people in need. She cared for children on a daily basis and frequently sent their mothers to the agency for social service help. Mrs. M also began to send friends who needed jobs to see what the agency could do. She allowed herself to depend on the agency, but it was evident that many persons depended on her.

Many elderly clients were alone and isolated. Some had incomes slightly above the Medicaid level because of small lifelong savings with which they would not part. The workers were able to convince some of these clients to pay a small fee for a homemaker on a part-time basis and screened the people Mrs. M sent who were interested in caring for the elderly in this way. The workers' use of Mrs. M and her friends in this way enhanced Mrs. M's position, met the employment needs of the friends, and also met the physical and social needs of some of the most isolated elderly clients. For example:

Mrs. Z was also a leader in the building's social network. She would frequently drop in to refer clients to the agency, mostly the elderly. Mrs. Z had a large family and also had her own troubles; however, she would speak of them rarely. At one point she came to the office more frequently. A worker was assigned to her and, as a relationship was built, Mrs. Z asked for help in placing her teenage son, to "save him from the streets." She also unburdened other serious family problems. Paul, the son, was also eager for a placement. As staff mediated with Mrs. Z, Paul, and the Bureau of Child Welfare (BCW), the placement process was set in motion.

Soon, through Mrs. Z, several parents came in with similar requests. In most cases the workers were able to use themselves to mediate family strife and avoid placement. In a few desperate situations the wheels were again set in motion with BCW. Work with the whole community grew out of these initial requests. One worker was assigned to handle all of these requests. Flyers were developed and distributed about how to use BCW, the family court, and many other preventive community services for adolescents. A group of mothers of adolescents was also offered. Mrs. Z brought friends to this group.

Whenever a client with some leadership in the community was involved, her own social network was served. As her natural position was recognized, she became an outreach agent for the agency, and services were developed to meet the needs that she helped uncover.

Mrs. N also illustrates an uncovering and use of a natural helping network among the isolated Jewish elderly. Eighty-year-old Mrs. N, after being mugged in her doorway, was too frightened to go out for several months. Mr. and Mrs. T, a couple in their mid-sixties and acquaintances of Mrs. N "from the old days," lived in a nearby building and shopped for Mrs. N. After meeting with Mr. and Mrs. T, the workers learned of many other shut-in elderly persons whom the T's helped. They were glad to have the agency concerned and looking in on their other friends, as well.

Mr. E, a housing assistant, also took an active, concerned interest in the elderly. Through him the agency found Mrs. B, eighty-six years old and in ill health—someone the social network had somehow lost. She was truly isolated. These excerpts from a fourth encounter show her isolation, her response to the genuine caring of the worker,

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and the worker's skillful work under "crisis" circumstances.

The worker called Mrs. B about 1 p.m. to let her know she'd be coming by. There was no answer after twenty-five rings. The worker hurried over to Mrs. B's apartment and, when she reached the door, heard Mrs. B screaming, "Help me! Help me!" Relieved that Mrs. B was alive the worker yelled back that she was there and that she would get Mr. E to open the door. Mr. E came with the building manager and broke the door open. They found Mrs. B in the kitchen sitting on the floor crouched beneath the telephone on the wall. Her face was white with fear—she was trembling and crying. Mrs. B tried to tell them what had happened—the telephone rang, she was looking forward to the worker's call and hurried to answer the telephone, forgetting to take her cane. Near the door she fell. The telephone continued to ring and she tried to slide over to the telephone on her back but could not. Mrs. B kept asking the worker if she had had another "shock" (meaning stroke). The worker kept trying to have Mrs. B tell her how she fell because, if it was a serious fall, an ambulance should be called. Mrs. B kept saying that she had just slipped and that nothing hurt. Mrs. B was able to move her limbs quite comfortably and they placed her on the couch.

The worker got another pillow for Mrs. B and propped it under her head. "You are too good to me. Why do you do this? You saved my life. You only know me a few weeks." The worker held Mrs. B's hand, told her that in the few weeks that she had known her she had grown very fond of her and wanted to help her, and that she was happy Mrs. B was all right.

The worker said that the experience today had been frightening for Mrs. B—she was alone and no one heard her—she realized that something could happen to her. The worker said that what had happened today was frightening to her as well, and that she was concerned about Mrs. B's fall and thought a doctor should look at her. Mrs. B replied, "I will listen to you. Today has shown me how much you care about me."

"You might enjoy being with other people, Mrs. B, have you thought about a nursing home?" Mrs. B said, "Sometimes; I know it is not good to be by yourself, all alone, without anyone. One of my friends once said that in those homes at least they watch out for you. But I can't go to a home. Because you have to be able to do something." "You mean, that in order to go to a home you believe that you have to be able to work there? Mrs. B, you do not have to be able to work for them. You can walk and you are able to move around. You don't have to work for them. I'll look into the possibilities and tell you about them."

Mrs. B decided to get up to see if she could walk around. The worker helped her up slowly. Mrs. B became more lively as she began moving around again.

Over a six-month period Mrs. B was helped to enter a good nursing home. The worker continued to visit her regularly in the home and helped her to make a very good adjustment.

Creating social networks for the isolated elderly

The following example illustrates what can be done socially for a person with literally no ties to the community. This approach would be effective for migrants, persons released from institutions, isolated elderly people, and others without accessible social support systems of their own.

Mr. A, aged sixty-eight, was a new tenant referred to the agency for his loud and disorderly behavior while inebriated. He had been living in a metropolitan hotel for five years after moving from the South. Finally, he was able to move into adequate housing. But he was alone in this new world. The outreach of a male worker was welcomed after an initial period of distrust. Within a few visits Mr. A was drinking only on weekends. He looked forward to the worker's visits and loved telling stories of his work on a railroad.

The same worker also worked with a group of men who lived alone as part of the agency's service to a nearby Senior Citizens' Center. He felt that Mr. A would find new friends in the group. Mr. A said he would go if the worker brought him to the first meeting. The worker agreed and soon Mr. A became a valued member of the group and a friend to Mr. G, another man who was isolated previously. The group provided opportunities to share common concerns and to build a new, small, and manageable social network. It also linked Mr. A to the lunch program and other services of the Center.

Mediation in the world of the client

The case of Mrs. H most fully illustrates the ecological balance in a client's world and the worker's mediating role in maintaining it. This case demonstrates that the worker is not a "fixer of broken objects," but a participant

in a complex network of active reciprocal relationships.

Mrs. H is a forty-three-year-old Hispanic, a mother of seven children ranging in age from two years to twelve years, and known to the Bureau of Child Welfare for alleged child neglect. She appears mildly retarded and apparently is a barely compensated schizophrenic. Efforts to maintain the family as a unit, including twenty-eight-year-old alcoholic Mr. K, the father of six of the children, were extensive. Although Mrs. H benefited from the worker's support individually, she made little progress in meeting the needs of the children. The oldest child had untreated spinal meningitis, one of the younger children had a treatable but untreated hearing loss, and another child had a serious developmental lag. Even when the worker offered to go to appointments with Mrs. H, she was unable to mobilize herself. She also kept the children home from school for lengthy periods of time.

She was not interested in homemaker services, however, and preferred the idea of placing the children "in a special school" to having "another woman" in her home. For many months, the content of the work was expressing feelings and weighing the pros and cons of placement for the children. As health and school officials made her aware of the consequences of her neglect, that is, possible court proceedings, her anxiety soared. Mr. K's alcoholic binges were frequent and he was aggressive in the home. Still she could not ask him to leave. On one occasion the worker's entrance interrupted Mr. K chasing Mrs. H with a butcher knife while the children huddled in a corner in horror. After this, Mrs. H arranged placement of the four oldest children. As the worker related to Mrs. H's feelings about this she expressed great relief, but also great fear and shame around the reactions of her husband, mother, sister, and friends. Although none of these were in any position to help her with the children, all were very judgmental.

The children themselves expressed a desire to "go away" where they would get food and clothes and go to school. The only boy, aged eight, expressed guilt about leaving his mother. The girls were quite ready to go. The boy was helped when the worker assured him that she would make sure his mother was allright. The children were seen individually and as a sibling group. They were eager to go and told their teachers at school about the move.

The school then put further pressures on Mrs. H. The guidance counselor felt that Mrs. H was "doing the best thing," and the agency used him as a source of support. Two teachers, however, stood in judgment, as did her family. Mrs. H also needed help to deal with her own ambivalent feelings. The agency worker offered to talk with each of these individuals. Mrs. H willingly accepted. The elderly alcoholic grandmother who had depended on Mrs. H's twelve-year-old daughter, who at times lived with her, was helped to obtain another living situation for herself. She began to count on the worker instead of the youngster, and was also involved in the preplacement visit of her granddaughter.

Mr. K remained closed to help in most ways, but he was involved in the preplacement visit of his three children, who were being placed together, and was impressed with the facilities. This took a lot of pressure off Mrs. H. And, as Mrs. H and the worker talked together to her husband, sister, best friends, and teachers, they also better understood that the children were not being sent away for punishment to an awful place and that family ties would be maintained. Mediation in all of these aspects of Mrs. H's world made the placement easier for all involved.

Mediation and community involvement with the housing system

All of the work mentioned was directed toward helping the clients fare better in their world, to adjust the "fit" between individual and environment and between environment and individual. The last example of theory in action will be around affecting the fit of a community of people with the most immediate part of their environment—that is, to mediate in the relationship between tenants and housing management.

A tenants' organization did exist; it was an umbrella organization with separate "councils" in each building. Some building councils were stronger and more effective than others. The building in which the agency is housed was the oldest, most notorious, and most deteriorated of all the project buildings. The tenants' group in this building was loosely organized and losing ground. The agency staff approached the leaders of this group and asked if they could be of help because they shared the same space in which there were many problems. This involvement was welcomed by the leaders, although they shared a healthy skepticism about "getting anything done."

The housing manager was actually very concerned, eager to meet with the tenants,

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and potentially responsive, but understandably overwhelmed: "When we fix it they immediately break it again!"

The mediation with the housing manager and the tenants' council consisted of several stages, involving myriad social work skills. First, the tenants were encouraged to express concerns and feelings. Their anger and disgust at some of the living conditions were recognized as legitimate. Also identified was a feeling of hopelessness and powerlessness about what could be done. As this process unfolded, some concerns were identified as the most important and most immediately solvable as tasks. A sense of cohesiveness developed as the group worked together and became focused. They felt that most of the vandalism was caused by adolescents who had nothing to do. Their solution to this was to obtain a room for the teenagers to be used as a supervised recreation lounge. Additionally, building security was a main concern. They decided to ask for a secure lock on the door and to have the unsafe elevator conditions corrected. They formulated these concerns as goals and strategized and rehearsed how to express them to the housing manager. The worker was then asked to let Mr. P, the housing manager, know what the group's concerns were and to ask him to a meeting. At this meeting the worker recognized Mr. P's genuine concern for his buildings and showed understanding of the overwhelming nature of his job. The worker prepared both sides and defenses were addressed through the worker's empathy with the position of each side. Thus, the joint meeting would have a better chance of being a real opportunity to communicate and work together and not a battle or "blaming" bout in which nothing would get done.

The next stage was the worker's mediation in the actual meeting:

Mr. P arrived first with Mr. O, the president of the overall tenant association. Two leaders and five members of the tenants' council arrived shortly after. Introductions were made and the meeting began. The worker stated the purpose of the meeting as the tenants' desire for a perambulator room and some concerns about the building. Mr. P focused on the perambulator room because he had understood that they wanted to use the room for a recreation room. Mr. P said he would approve of that, and asked what they wanted in the room. Ms. E spoke about furniture, tables and chairs, games, and so forth. Mr. P said he might be able to get some chairs, a few card tables, and deck paint, and advance some money or reimburse them. Ms. W and Ms. S spoke of how they hoped to reach the adolescents through this room. Mr. O brought up supervision and security of the recreation room because vandalism was a reality. Ms. W talked about having an adult in the room to supervise the teenagers and the room would be locked during the other times and the others agreed. Mr. P said he would change the lock to the room and give them new keys. They talked about vandalism in the building, garbage on the floor, broken doors, broken mailboxes, dirty elevator floors, and people riding on the tops of the elevators. Mr. O talked about the garbage not being properly disposed of and that there was no excuse for that. The worker said that the problems were immense, but blaming was not the intention of the meeting.

They then talked about the door being broken, the lock being removed the last year, the cold air coming in, and there being no security. Mr. P talked about the door having been fixed and then broken again—as soon as the door was fixed it was broken again. He also talked about how sixty mailboxes had been fixed and how they all had been broken again. The worker focused on the door and pointed out that there might be some misunderstanding here because housing said the door was fixed and broken again, and the tenants said the door was never fixed. The worker asked for clarification and a discussion followed. Ms. E talked about the need for more building inspection to make sure repairs were made. Mr. P vouched that housing inspectors would be coming out. The council members said they hoped so because they were paying rent and expected things to be done. Mr. P and Mr. O agreed.

The discussion went back to adolescents and vandalism. Ms. W asked what the housing management was going to do about it. Mr. P and Mr. O talked about fining those involved and the others agreed. There was a discussion, and an agreement was reached that names would be turned in of families involved, a warning would be given, and then a $50 fine imposed the second time. All agreed on this. They talked about the need to reach the adolescents with the recreation room because they vandalized the buildings.

The worker reviewed their meeting's accomplishments and agreements on the recreation room, furniture, door locks, inspections, and fining and noted that they especially hoped the recreation room might keep the adolescents from van-

dalizing the building. They agreed that the meeting had gone well and they were satisfied. Mr. P and Mr. O felt it helpful and hoped they would continue the open communication because housing and tenants wanted to help make this a better place to live. All agreed.

The worker focused and defused at times, but also allowed conflict and was firm in helping the two sides to talk to each other. A once-demoralized group is seen acting on their own behalf, making an impact, and accomplishing goals. A concerned institutional representative is also seen, who wants to be able to accommodate to the extent he can and is willing to plan jointly for what he cannot immediately remedy. A beginning in real communication is made.

Conclusions

This article demonstrates the effectiveness of an agency based on the life model-interactionist concepts. The flexible use of time and space, the developmental, destigmatized view of the client, and the mediating role of the worker in the ecological field of the client have been illustrated. The use of these models in helping clients in their life roles as children, parents, and elderly has been illustrated. Transitions such as moving from community to community or from work to retirement were also described. Work with family units, within natural helping networks, with community groups and formed groups, and in connecting isolated individuals to the community has been demonstrated. Even in the midst of violence and great poverty, the model has enabled us to maintain a focus on issues of mastery and on development of the power to influence one's destiny.

The authors believe that the life model-interactionist approach offers a comprehensive but flexible approach to social need. In spite of working in a community with the greatest intensity of need and of the serious limitations of a student-staffed agency, these models have been easily translated into practice and useful in developing an effective program. An agency with greater resources, or one facing less extreme social need, would be all the more able to use this approach productively. The authors look forward to others attempting to "patch" this imperfect world through translating the theory of the ecological perspective into action in other agencies and other settings.

"Inventing" Rural Social Work

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How are research and scholarship agendas developed? As scholarly productivity continues to grow in importance for those who are employed in higher education and some social agencies, the issues of developing research foci and publishing within those emphases is an increasingly crucial issue. Such agendas may emerge from experiences and demands for knowledge as well as from the deliberate and planned selection of a research area. This narrative discusses how one may develop an area of research emphasis as a result of chance and unique opportunities that may differ markedly from one's original research intentions. The article is based on the author's development of some of the concepts of rural social work. The field of rural social work has influenced social work practice and education significantly for much of the history of the profession, especially during the past 40 years.

Coming to Education

The University of Oklahoma School of Social Work needed to employ additional faculty in 1963 who could teach social research, social group work, community organization, and the social science concepts of human behavior in preparation for the School's accreditation reaffirmation. I was 27 years old, applied for a faculty position, and was employed by the Oklahoma School to meet some of those needs. Like most social work educators at the time, I held only a bachelor's degree and a M.S.W. There were few Ph.D.s in social work education in the 1960s. I was selected because I was one of only two social group workers living in Oklahoma and had some experience in community work as well as extensive undergraduate education in the social sciences. In addition to teaching, I also became heavily involved in rural social welfare development in Oklahoma, especially with American Indian groups such as Oklahomans for Indian Opportunity, for which I served as a consultant and trainer. I also worked as a trainer for the state's Department of Public Welfare, Peace Corps, Head Start, and Vista, for which the University of Oklahoma was a major educational center. The training emphases were often on preparing staff and volunteers for rural areas.

Although M.S.W.s were often tenured faculty members in schools of social work, it was clear to me, from my contacts in other units of the University, that the doctorate would be an expectation for most of those who wanted long-term careers in higher education. There were few social work doctoral programs in the 1960's. After examining doctoral programs in other fields at the University of Oklahoma, I applied for, was accepted to, and completed the doctorate in Political Science, which was also my undergraduate major.

Social Work Education in the 1960s

Until the mid-1960s, social work's human behavior content and most of its practice teaching at the majority of schools, especially smaller schools such as Oklahoma, focused on Freudian psychoanalytic theory. A few followed the teachings of Otto Rank, who some called a neo-Freudian (Briar, 1987). At Oklahoma and most other M.S.W. programs, everything was taught through a Freudian psychoanalytic screen and the human behavior content followed the basic teachings of Sigmund Freud, Anna Freud, and Erik Erikson (Briar, 1987, Meyer, 1987). The Council on Social Work Education Curriculum Policy Statements of the 1940s and 1950s began demanding social science

content in the M.S.W. curriculum (baccalaureate programs were not accredited until the mid-1970s) such as anthropology, political science, social psychology, and sociology (Briar, 1987). Earlier statements required schools, even those concentrating on social casework, to also teach about group behavior, work with groups, and community organization. My assignment was to teach social group work and community organization and to develop a human behavior and the social environment course covering social science concepts to students who, until then, had only been exposed, for the most part, to individual and family concepts such as the ages and stages of human development and health and mental health issues that affected individuals.

Research Emphasis

I did not set out at the beginning of my career in social work education to be a "rural expert." Like most new academics, my research and publication interests initially arose from my political science dissertation research, which was about the legal rights of people with mental disabilities in Oklahoma. I had some success in publishing articles on the subject in legal and mental health journals (Ginsberg, 1966, 1967, 1970) and, later, in the popular periodical of opinion, *The Nation* (Ginsberg, 1974).

But for many years, beginning in the late 1960s, a good bit of my writing has been about rural social work, although I also wrote books and articles on other subjects such as evaluation research and social work management. This narrative is about the ways in which I developed some of the concepts of rural social work practice, many of which have been widely published in the social work literature.

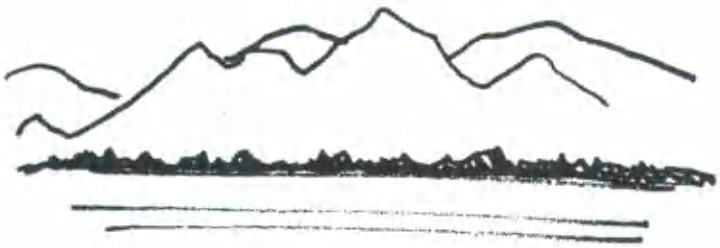
The rural social work emphasis and its underlying principles came together for me as I researched the subject and wrote and spoke with others with similar interests. But largely the ideas came from reflecting on my experiences as a social work practitioner and educator and from the demands for a Council on Social Work Education Annual Program Meeting presentation on rural practice that I was asked to make in 1968. I had been to Annual Program Meetings in the past but had never presented at one. So I *had to* develop some ideas about the subject—or be scheduled for a slot at a national meeting with nothing to say.

The scholarship niche of rural social work and the gap in materials on the subject strongly suggested that it could be developed as an emphasis in the profession. Few others were writing about rural issues, but I eventually learned that relatively large numbers of social workers, especially educators, sought ideas about the subject. Over the years since I began writing about rural issues in 1968, many articles, book chapters, encyclopedia entries, a journal, workshops, and the like, followed my initial work on the subject—authored by myself and many others. It has been a viable and central part of the careers of many social work educators and researchers. As an area of research and scholarship, it has persisted for nearly 40 years in its modern form.

I recall that when I began writing about rural issues I was frightened. Academics such as myself usually prefer pursuing their scholarship by reviewing the earlier literature, a usual starting point in studying any subject. But there was little in print (in an era well before the internet) on which to build. So I didn't know if my ideas, many of which were necessarily based on personal observations, practice experience, and conversations with those who worked in rural areas, made sense. It was possible, I thought, that whatever I said could be either ridiculed or ignored or both.

Oklahoma's and West Virginia's Accreditation and My Rural Research

In 1967, the University of Oklahoma social work program faced its reaffirmation



of accreditation, beginning with a site visit, by the Council on Social Work Education, which had been something of a problem for the School in earlier years and remained a problem after the Commission acted on the School's status. But that reaffirmation eventually led to my first appointment as a social work education program director and my writings on rural social work.

The chair of the 1967 Council on Social Work Education Oklahoma reaffirmation site team was Richard Lodge, then Dean at Virginia Commonwealth University and later Executive Director of CSWE. During the course of his evaluation of the courses I taught, we got along well and had a number of mutual interests. I told him of a long-term ambition to eventually become dean or director of a school of social work. I had been the manager or president of many organizations, beginning as a teenager in the 1950s. I had an interest in and perhaps a talent for management and my doctorate in political science had a heavy emphasis on public administration.

After the site visit, the CSWE Commission on Accreditation placed the Oklahoma School on probationary accreditation status, which required major changes in its curriculum, its structure, and its resources.

Meanwhile, Lodge, who had chaired the site visit team at West Virginia University, which also had accreditation difficulties in 1967, was employed by West Virginia University to help them find a director for their Division of Social Work. The former director had become Dean of the School of Social Work at Florida State University.

I was one of a few candidates that Lodge recommended to West Virginia and I was their choice, at age 32, to serve as Director of the Division of Social Work, part of its College of Human Resources and Education. The College Dean who chose me, Stanley O. Eikenberry, who later became president of the University of Illinois and after that president of the American Council on Education, had support for his choice from the West Virginia president, James Harlow, who came there from the Education deanship at the University of Oklahoma. I began as Director of the West Virginia University Division of Social Work in the summer of 1968.

The 1969 CSWE Annual Program Meeting

Richard Lodge chaired the 1969 Council on Social Work Education Annual Program Meeting scheduled for Cleveland in January. He and his committee invited me (at the time, presentations were invited—submissions of abstracts and review procedures came later) to develop a workshop on social work in rural communities, not just the impoverished rural communities that were so much a part of West Virginia and Appalachia but also wealthier rural communities with prosperous agricultural and other industries. Lodge knew, of course, about the efforts I was making to build a rural emphasis at West Virginia University. The paper was to be presented at a session designed for those interested in educating social workers for smaller communities.

One of the main issues in the West Virginia University accreditation was the stated emphasis in its accreditation documents on preparing social workers for rural areas, although that emphasis did not appear centrally in the Master of Social Work curriculum. My major assignment as the new director was to help the faculty modify the program so that it fit the accreditation document descriptions. The efforts I made at

West Virginia University helped form the basis for the 1969 presentation.

The 1969 Rural Social Work Session

My arrival in Cleveland for the 1969 APM began badly. Several of us from West Virginia University, which was fairly close, arrived by auto. I was wearing jeans and a sport shirt. When Lodge met us at the hotel registration desk, he was upset: I was, in many ways, his creation. When I changed to a coat and tie for the opening session that evening he said, "Now you look like a dean."

I was astonished by the size and diversity of the audience that came to hear my education for rural social work presentation. I had always thought about rural social work from my perspective as a Southerner and a native Texan. I thought of rural areas as largely Southern and Appalachian, and often focused on minorities such as African Americans, Latinos, and American Indians. However, those who showed up and who, along with their successors, sustain the annual Institute on Social Work in Rural Areas, which began in 1977, were also from New England, New York, Canada, the West Coast, the Midwest—virtually the whole of North America. One can reasonably date the beginning of the institutes and the other modern developments in rural social work from that session in 1969. Perhaps even more dramatic was the enthusiasm of the participants who expressed a longstanding hunger for a session of that sort.

Many writers and teachers about rural social work attribute its modern creation to the work that began with the Annual Program Meeting session in 1969. In fact, the Rural Social Work Caucus presented its Lifetime Achievement Award to me at the 30th Annual 2005 Institute, held at a federal facility in rural West Virginia, for the development of some of the basic ideas of how social workers might be educated for work in rural areas. Of course, many other writers and practitioners further developed those ideas and introduced new concepts and research far beyond what I had originally written.

Sources of Rural Ideas and Personal Experiences

As is true of many career developments, much of what I learned and wrote about rural social work was initially the product of some personal experiences and contacts, although I had no idea at the time that my life then and my writing about rural issues were synergistically related. In 1968, when I began working on rural social work issues I was and had always been a resident of Southern areas of the U.S, living in larger cities such as San Antonio (where I grew up,) New Orleans, and Tulsa. My family roots were in rural Texas: places such as Gonzales, Halletsville, and Weimar, where my mother and her brothers were raised and where many of my closest relatives still reside. As a social work practitioner, I spent a good part of my time helping develop small town Jewish programs in Arkansas, rural Louisiana, Mississippi, and Texas for the B'nai B'rith Youth Organization.

Jewish populations in large Southern cities, usually much less than one percent of the overall population, are in many ways like small towns themselves.

West Virginia University, Appalachia, and Rural Social Work

One of the issues in the WVU accreditation was the emphasis, as mentioned earlier, in their written materials on the goal of preparing social workers for rural community work, which was contradicted by a heavy curriculum emphasis on the theories of Otto Rank, that, along with Freud, influenced social work for much of the first half century of its existence, as discussed earlier. Briar (1987) says that the choice of social work education orientations between Freudian, diagnostic practice and Rankian, functional social work was debated for decades. Additional discussion of the diagnostic/functional split or Freudian vs. Rankian is in Meyer's *Encyclopedia of Social Work* entry (1987). Rankian theory was pursued by only a few schools such as the University of North Carolina and, where it was particularly important, the University of Pennsylvania School of Social Work. That school and its theories had influenced the former director at West Virginia as well as many of the faculty at West Virginia University's Division of Social Work. However, social work practice in West Virginia was not especially Rankian or Freudian but was characteristically "rough and ready" and practical in that chronically poor state with a declining population base. The subtleties of psychological theories were not central to the West Virginia social work environment, which was more about employment, health care, basic education, and other survival issues.

The orientation towards Rankian theory especially affected the program's field instruction. Pittsburgh, just an hour and a half away from WVU, in Morgantown, had a grand array of social agencies but the orientation of the University of Pittsburgh School, many of whose graduates staffed the agencies, was toward Freud rather than Rank. The West Virginia School wanted functionalist placements. Consequently, many of the field instruction sites were in urban areas of the United States East Coast: Baltimore, Philadelphia, and fewer in the Appalachian region, which the West Virginia MSW program claimed as its service area in its accreditation documents.

Part of my mission was to modify the program so that it was genuinely focused on rural communities and conducted all or most of its field instruction in the Appalachian region. So one of my first acts as director was to require that all the Division's field placements be located in the Appalachian region.

Appalachia was an area of special public interest in the 1960s, partly because of the emphasis placed on the region by President John F. Kennedy in 1960. The region, which is composed primarily of rural areas and small towns, is mountainous (which makes it difficult to attract many kinds of industries), is economically focused on coal mining and steel production, is largely non-agricultural, is predominantly White, and is poorer than most of the rest of the United States, with chronically high rates of unemployment. Many observers believed that the election of Kennedy, the nation's only Roman Catholic president, was largely a result of his victory in the 1960 West Virginia Democratic primary. Appalachia includes not only all of West Virginia but also a large mountainous sector of the Eastern U.S., from New York to Mississippi. Much of the Appalachian population live in Western Pennsylvania, which adjoins the state of West Virginia, from which most of the WVU students came.

Clearly, social work field placements and social work practice in Appalachia were likely to be different than those in much of the rest of social work in the United States. So there were plenty of opportunities for rural, Appalachian field placements, which required distinctive approaches to social work practice, different than one might encounter in the nation's more metropolitan areas. There were also ample opportunities for developing ideas about curriculum content that fit with

the needs of rural practitioners. The distillation of those ideas became a major part of the framework I developed for writing about rural social work.

Small Community Research

Although social work in rural communities was, in the 1960's, a relatively uncharted area of recent social work scholarship, there had been considerable interest in rural social work practice in pre-World War II America because of the neglect of and pervasive social problems in rural communities (Martinez-Brawley, 1981). However, the emphasis in the 1960's was quite heavily on American urbanization, a force that saw millions of citizens relocating from rural to metropolitan communities. The problems of urban violence, gangs, poor housing, and the like were major factors in American social policy development. The 1960's were also the time of the desegregation of the United States and the decade was marked by urban riots and other manifestations of intergroup conflict. So the subject of small town and rural social work was rarely covered at professional meetings or in the professional literature. It was simply driven out by the great preoccupation with the cities.

In many ways, I had to write my presentation for the APM without a great amount of information from other sources and without much literature from the professional journals or social work books, a frightening prospect, as discussed earlier. The literature on rural social work was sparse. How to start and what to prepare were questions I struggled to answer for months while I prepared the paper.

I fell back on other research and writing I had done which was not on the exact subject, but which was relevant to understanding small communities. My first published articles were about the founding of a small community Jewish Community Center program, which I had done in Tulsa (Ginsberg and Plotkin,1965; Ginsberg, 1968). Tulsa, of course, is no rural community, but the very small Jewish population was itself a small, cohesive community from which principles could perhaps be deduced that would apply to small town work. The framework for the 1968 article came from the work of Murray G. Ross of Canada who was, at the time, a popular social work community organization author (Ross, 1958; Ross, 1967).

I had also been influenced by the works of Erving Goffman, who served as the president of the American Sociological Association. Goffman's research, which I used as the basis for part of my doctoral dissertation on mental health rights in Oklahoma, gave my preparation of the presentation on rural social work an additional intellectual base. Goffman's studies (1959, 1961, & 1963) were of the ways in which people behave in public places, including institutions. His methods were those of "ethnomethodology" or "ethnographic" research and "symbolic interactionism" (Jary & Jary, 1991). In several ways Ross's research and scholarship seemed similar to Goffman's, although he did not define them in that way.

Goffman's research strategy (1959, 1961, & 1963) was to observe behavior in structured ways and to write about the principles and conclusions drawn from what he observed. Ross followed a similar pattern in developing and communicating his ideas about community organization, using examples and distilling principles from them. That kind of research was perhaps typical of social work's scholarship in the twentieth century.

One of Goffman's concepts was "impression management," in which he studied the ways in which people attempted to govern the impressions others had of them through their own behaviors (1959). Another of his major contributions was the description of "total institutions" (1961), such as convents, sailing ships, and mental hospitals (they were

my reason for finding his work useful in my dissertation research); again, basing his conclusions on his observations and the construction of principles and conclusions from those observations. Other authors continued Goffman's approach to understanding behavior, such as Elliot Liebow (1995), whose last book described the lives of homeless older women.

Writing the Paper

Ultimately, though, because the audience was social work educators, I decided to organize most of the presentation from the perspective of the social work curriculum areas and ways to teach about practicing in rural areas.

So the original paper, which CSWE published in 1969 (Ginsberg, 1969), and which has been adapted several times in the various editions of CSWE's *Social Work in Rural Communitie*, (Ginsberg, ed., 1976, 1994, 1999, & 2005), covers the areas of human behavior and the social environment, social welfare policy and services, social research, social work practice, and field instruction. The special rural content one would include within each of those areas was the basis for the presentation. The ideas of what to teach were based on my observations of the kinds of problems social workers encounter in rural areas and the roles they had to play to be effective. Basing the concepts on observations came, in part, from my fascination with Goffman's and Ross's methods.

One fundamental thread that ran through the paper was the necessity of preparing social workers to be generalists if they were to serve rural communities. That came from my experience in Tulsa with the small Jewish community where one had to be an organizer, an administrator, a caseworker, a group worker, and a researcher, as well. It also came from Ross's (1967) insistence that community organization social workers must focus on the community's perceived needs and wants, not a professional's notions of what the community requires.

The concept of the generalist in social work, which I principally applied to the practice of social work in rural communities, later became the basis for the organization of the total accredited social work curriculum at both the baccalaureate and master's levels. Accredited bachelor's programs currently have to be based on a professional foundation designed to prepare generalist practitioners (Council on Social Work Education, 2004). For the Masters of Social Work degree, the professional foundation, which begins master's studies, also has to prepare students for generalist practice. It is only the second year of study that provides for advanced, specialized practice, a demarcation from earlier curriculum requirements. Before the requirement for a generalist, professional foundation, master's social work education was simply two years without any such special distinction between the foundation and advanced programs. Of course, the foundation requirement was a necessary adaptation to the accreditation of Bachelor of Social Work programs, which began in 1975.

Carol Meyer's overview of direct practice (1987) distinguished between clinical social work and generalist social work, which is described as all the non-clinical areas of practice, not quite the same as the generalist approach used in the rural literature or the generalist expectations of BSW and MSW programs.

Further Developments

There were many additional events, programs, and institutions that grew out of that 1968 session. Rural social work caucuses developed in both CSWE and the National Association of Social Workers. The U.S. National Institute of Mental Health, which was then a major supporter of social work education, established a rural program. (The

West Virginia University MSW program secured a grant for a rural field instruction program in Elkins, West Virginia.) Several other rural options and opportunities developed in social work education in the Appalachian region and throughout the nation's rural areas. A number of bachelor's programs, especially after the development of baccalaureate accreditation, defined themselves as rural in orientation.

A grant to CSWE from a foundation associated with the United Parcel Service, led to the establishment of a rural project. The project created some training sessions for educators interested in rural social work, one at Indiana University and another in Denver. Out of the project also came the first edition of the book mentioned earlier and which I edited was entitled *Social Work in Rural Communities*, which included many of the early authors and speakers on the subject. The fourth edition was published by CSWE in 2004 (Ginsberg, 2005). The book is CSWE's largest seller, apart from accreditation materials. After being available for only six months, the entire first print run of the fourth edition was sold out.

There were many other types of fallout from my rural work, including being invited to provide frequent workshops, visiting professorships, and lectures. For example, in 1976, I was invited to be part of a team by Mitchell I. Ginsberg (then Dean at the Columbia University School of Social Work) as its rural specialist. We went to Iran to help that nation with their social work education and social services.

The University of Tennessee set up the first Institute on Social Work in Rural Areas, as mentioned earlier in this discussion, and invited me to be the keynote speaker. Volunteers have organized Institutes every year since 1976 in every part of the United States: the West Coast, New England, the East Coast, the Rocky Mountain states, and the Midwest, as well as the South. Many of these events yielded proceedings that were widely distributed.

So, something of a chance encounter with Richard Lodge led to the institutionalization of a field of social work scholarship and practice concepts that might not have emerged, and changed as well as defined, much of my career as a social work educator.

Of course, there have always been challenges to my theories: "Where did you get those ideas? In my state, government wants specialized social workers, rather than generalists, in rural as well as metropolitan areas." My tendency is to simply say that I understand and agree that what I have written is neither perfect nor complete. And in recent years, although I have written and spoken and taught courses about rural social work, my interests have also been in other areas such as program evaluation, social welfare policy, and human biology. After my early writing and speaking on rural issues, I became a state government official and I wrote about that, too. But I think my major identification will long be rural social work.

I have noticed that some of the more lasting theories of social relations come out of the kinds of research that I used in my initial writings about rural social work. I think of Jack Weller's *Yesterday's People* (1965,) which was again based on his observations. And even the recent a book *Freakonomics* (Levitt & Dubner, 2005), takes some data and many observations and constructs some fundamental ideas about the ways in which human beings behave in the modern United States. We sometimes talk in the field about practice wisdom, and perhaps that is the kind of research some of these works are based upon.

Possibly the kind of study and writing that went into the development of rural social work theories could be called macro research. There have been later studies, many of which are published in the fourth edition of *Social Work in Rural Communities* (Ginsberg,

2005), that sample a smaller population, analyze it, and describe the results. Those kinds of research are critical and build the knowledge base of social work. But they are not examples of what I have done in this field of study. One has the feeling that there is ample room for both—the macro study of a big issue such as life among the one-quarter of Americans who live in rural areas—as well as an examination of special populations in one community.

Additional Scholarship

Of course, the rural social work literature has grown significantly and there are several scholars who specialize in rural issues. O. William Farley published *Rural Social Work Practice* in 1982. Scales and Streeter edited a text called *Rural Social Work* in 2004. Roger and Nancy Lohmann edited *Rural Social Work Practice* in 2005 for Columbia University Press. Emilia Martinez-Brawley (1981) has written many books and articles on rural issues. Judith A. Davenport and Joseph Davenport III (1995) have written extensively on rural issues. Paul Sundet and JoAnn Mermelstein were early contributors to the rural literature in several books and conferences, including the early editions of *Social Work in Rural Communities*.

For several years, schools of social work in Tennessee, Wisconsin, and Washington, published a journal *Human Services in the Rural Environment*, which has now gone out of existence.

Conclusion

The field of rural social work scholarship has grown from a rather clear basic idea to a body of substantial theory and literature: not nearly as extensive in its scholarship as subjects such as child welfare, health, or mental health, but still an issue of major concern to a significant minority of social workers.

Rural social work is now a relatively well-developed area of scholarship for the profession. Articles, books, and at one point a professional journal, all support the field. Thousands of social work students have been specially prepared for rural practice. And virtually all social work students, both baccalaureate and master's, are prepared for generalist practice, which is the basic concept of rural social work.

So in a forty year period, the subject of rural social work and my personal association with it has been a powerful personal influence as well as an influence on social work as a professional discipline.

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The Cloak of Invulnerability: Secondary Trauma and the Helping Professional

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As a mental health professional, the author has conducted scores of psychological debriefings for emergency workers and others impacted by work related trauma. Many of the reactions he witnessed among the workers could be described as secondary trauma, which occurs as a result of exposure to a traumatic event. It wasn't until he was involved in a debriefing in which the victim was an acquaintance that he experienced symptoms of secondary trauma himself. This narrative examines the process of trauma debriefing and the secondary impact on the debriefer. Case narratives have been modified and names have been changed so that privacy and confidentiality are maintained. This article is dedicated to the emergency workers who put themselves in harm's way when helping others, and to debriefers who witness this trauma through the narratives of emergency workers.

I have been involved in conducting critical incident stress debriefings and trainings on secondary trauma throughout the United States over the past two decades. I was a senior clinician working on the crisis unit of a mental health center on the outskirts of a large metropolitan area on the East Coast of the United States. During my five years in this position I had been responsible, in part, for co-developing a critical incident stress debriefing team. Over the years I had conducted scores of debriefings to groups as varied as firefighters, police officers, school personnel, corrections officers, medical professions, childcare workers. Events precipitating the debriefings included infant deaths, train wrecks, traffic fatalities, suicide by hanging and gunshot and homicide.

Critical incident stress debriefing teams typically consist of mental health professionals and non-mental health professionals who offer these interventions within two to seven days post trauma (Everly & Mitchell, 1999). Debriefing is not psychotherapy but rather an opportunity to process the experiences and put them into perspective. Participation in the group process is voluntary. The process of debriefing is a systematic approach that provides participants immediate emotional support, safety, education about normal stress reactions, and cognitive reintegration. Cognitive reintegration occurs when feelings, thoughts, memories, and responses in which it is embedded and which elicits these supportive interactions are explored. Providing health education and making appropriate referrals are integral to this stress debriefing (Antai-Otang, 2001; Mitchell & Bray, 1990).

There has been a great deal of research emerging in the literature over the past several years focusing on the use of critical incident stress debriefings as a means of group workers' addressing the stress and trauma associated with experiencing events that are outside the range of typical human experience. What is largely lacking in the literature is the secondary or vicarious impact of this work on helping professionals or, in this case, the debriefers.

This example of a critical incident stress defusing and debriefing conducted by the author is presented as an illustration of the process of critical incident stress debriefings and, more specifically, the secondary trauma that may be experienced by helping professionals.

Defusing

It was Friday afternoon, the end of a long week of responding to calls at the community mental health center. I was on call for the weekend and hoped it would be a quiet one. I didn't know if I had the energy reserves not to get at least one good night's sleep. Anna Louise, a young administrative assistant for the center, stopped me before I reached the front door. The jail was requesting a suicide evaluation. I groaned inwardly. It would be several hours before I would get home now, and I hoped that this would not be a precursor to a long sleepless weekend.

It was several hours later and darkness had fallen before I left the jail. Another call had come in requesting a defusing at a nearby fire department. I was told only that there was a serious traffic accident and that my presence was requested.

I arrived at the station within 15 minutes and spoke briefly with the lieutenant. He summarized that a tractor-trailer had jumped a median strip on a four-lane highway and landed on top of a compact car, trapping a woman and Golden Retriever inside for five hours. The rescue had been drawn out with the car continually bursting in flames. The woman had been conscious throughout the rescue and had been seriously burned. Her husband had been thrown clear.

I entered the main room of the station. Fifteen men, still in their turnouts were seated haphazardly in an approximation of a circle. Several still wore their heavy rubber boots; all wore blue t-shirts with the County logo and dark blue work pants. There was a stench of sweat, burned rubber, and plastic in the air, and other smells I could not identify. Most faces and arms were smudged with soot.

Group members quickly introduced themselves and explained their role in the incident. There were twelve firefighters from four stations and three rescue workers. They ranged in age from 17 to 55. All were male.

The primary purpose of a defusing is to normalize reactions to a traumatic experience and to prevent exacerbation of these reactions. I introduced myself and explained that I had been called to help defuse. Defusings typically last 20-30 minutes and are often a precursor to the more formal debriefing. I indicated that a more formal debriefing had already been scheduled in two days. Though the defusing was brief – 35 minutes— it was intense and the imagery vivid, punctuated by the smells of the accident emanating from the men. The focus of the comments from the men were on the frustration of taking five hours to extricate the woman whose condition continually deteriorated each time the car caught on fire, their helplessness over watching her burn alive. Their comments were intense, the imagery poignant and terrifying:

> I don't know how Steve kept going back in there. I couldn't have done it. It kept flaming up. Could've blown anytime. Diesel fuel and gas all over the place.
>
> And the smell…It's all around us. I mean it's one thing to smell rubber and gas and plastic, but I've never smelled burning skin and hair like that...Hell you can still smell it on us. Don't know how you kept face to face with her in the car.
>
> This was my first week on call. I don't know if I can do it again. I thought it would be cool and all...my friends want to hear stories about what I do on rescue...they're going to be asking me if I was on this call…I don't know what to tell them...I've never seen anything like this. I carried her to the med flight on the stretcher. She looked... like.. .melted... her face, I mean, and her

hands...and the smell was horrible. I kept gagging, and now it's like in my throat...the smell...and like I can taste it...

First thing I did when I got here was call my wife. Just wanted to touch base. Make sure she was all right. I knew that she'd probably heard about the accident and knew I was probably there.

Steve sat quietly, numbly, in the back of the circle, his chair slightly away from the group, his body shifting out of the circle, his head down. He remained silent, either lost in his thoughts or too numb to speak.

I spent a half an hour normalizing their reactions to the incident and preparing them for what to expect over the next several days. I was reassuring: some folks would have no symptoms and this was normal; other folks might have a myriad of reactions and this was normal, given the exposure to trauma to which they had been exposed.

I scheduled a full debriefing in two days.

Critical Incident Stress Debriefing

I arrived at the fire station half an hour early as planned. This allowed me time to meet with the firefighter peer debriefer, John, who had not been involved in the incident and was from another station in the County. I also met Jim, the Station commander who had arranged for the debriefing. Of particular concern to him was the paramedic, Steve, who had had the most extensive contact with Anne, the woman trapped in the vehicle. Steve had called in sick twice since the incident and appeared to be having a great deal of difficulty coping with the stress of the call. We finished our briefing with time to spare and took advantage to tour the facility and to be introduced to the firefighters present. I like to conduct debriefings on the territory of the attendees rather than at a mental health facility. This reduces the mental health expert stigma that can be a problem with debriefings conducted by mental health practitioners for non-mental health professionals.

Introduction

During this phase of the debriefing, the focus is on beginning to build rapport and introducing the facilitators to the attendees and the attendees to one another. In this debriefing all six attendees were from the same two stations and were acquainted with one another.

I introduced myself and offered the standard ground rules for the debriefing. There would be absolute confidentiality for those involved in the process; only those involved in the incident would participate; and this would not be an administrative or procedural debriefing. I asked for other ground rules that participants wanted stated. None were offered.

Facts

Following the introduction, the debriefing began with the group laying out the facts of what had occurred and setting the scene. I asked each participant, in turn, to describe his role in the incident and his perspective of the facts of the event. Starting with the facts allows for safe entry into discussion of the incident and it generally feels less risky initially than discussing feelings and reactions. During this time rapport is built between facilitators and participants.

The group created a clear picture for me. Anne and Paul had been traveling home from the grocery store early Monday evening in their red Honda Civic. They were southbound on Cherokee Parkway, a four-lane heavily traveled highway linking two major sections of the city. Their dog, Sadie, was in the back seat. At approximately 6:15 p.m. a tractor-trailer truck traveling northbound had jumped the median strip of the parkway and hit the Honda head on, coming to rest with the cab

upright and on top of the crushed car. Paul had been thrown clear and was dazed though unharmed; Anne and Sadie were miraculously alive though trapped inside the vehicle, both conscious. The driver of the truck was unharmed.

Initially two and eventually four fire departments responded. The extrication of Anne and Sadie took five hours, during which time the car repeatedly burst into flames. Gas was leaking from the tractor-trailer directly onto the car, and despite their best efforts, the firefighters had an extremely difficult time controlling the fire. John, a paramedic, was the most advanced life-support professional present and spent the whole of the rescue operation climbing into and out of the car, administering sporadic first aid to Anne. Paul refused to leave the scene and watched as firefighters struggled to save his wife and dog. It was rush hour, and traffic was backed up for miles as passersby slowed, craning their necks to see what was going on. The TV media were present as dusk transformed into night.

Anne was eventually extricated and transported to a nearby trauma center. Sadie died two hours into the rescue.

Thoughts

Once the facts are clearly established, each attendee was offered the opportunity to share thoughts that he was having throughout the incident:

> When the call first came in from dispatch, I thought it sounded like a routine traffic accident. No fatalities reported. I really didn't think much about it, really. I was thinking mostly about the shift ending and having the weekend off. When I came to the scene I only saw the tractor-trailer and was surprised at how quickly the tow truck had hauled off the other vehicle. Then I saw the car under the truck, and I thought 'Shit, no way could anyone have lived through that.' I mean it was crushed, really crushed.
>
> What am I going to do here? This looks like a nightmare. I wondered how they would ever get her out of there. Victim's husband was the age of my brother. Wondered how long they had been married. What if she died? She sounds in such pain. Why can't they help her? She can't die in there; she's my sister's age.
>
> It was surreal at the command post, keeping the media hounds at bay. I knew what was happening down there... a woman was being burned alive. I couldn't tell that to them, but they kept after me like they wanted details, something to splash on the 11 o'clock. I kept thinking 'What if that girl was yours? Wouldn't you want some privacy? I mean show some respect...'
>
> I wanted to do something. I had the 'jaws of life' and it seemed like every time we'd get a good bite and would make some progress on opening the car, it would catch on fire again. We were all soaked from the constant hosing. I kept thinking 'stay centered, stay centered, stay f***ing centered.' I mean it seemed as though we spent most of the time just standing around...I wanted to do...get squirrelly just standing around...I kept thinking that I was going to see the vehicle explode with Steve in it...I had to stand right there and watch.
>
> I couldn't believe that Steve kept going back in there. I mean the car could have exploded any time...it was on fire most of the time. If you didn't

> burn to death, you'd have drowned from all the water being pored on. I kept thinking if only we could haul the truck off the car, stop the fuel from leaking onto the car, but there was no way we were going to move that truck without injuring the occupant.

Steve, who had been silent at the defusing, now spoke up. He had seen his efforts to provide first aid to Anne repeatedly thwarted as the car continued to burst into flames throughout the incident:

> I was in there face to face with Anne for most of the five hours. Each time I crawled though the passenger window, I saw her face, heard her screaming at me to help, to get her out. She was begging me to help. I kept seeing my wife, and trying not to think how I would feel if that was my wife. It's the only thing that kept me in there. I knew I didn't want to be in there when it exploded, but I kept seeing her eyes, every time I had to go back in. She was afraid of needles, and I had to poke her...that really sticks out in my head. I wish she'd passed out, so I wouldn't have had to listen to her. She was being burned alive...slowly. I can't get her hair out of my mind. First it was blond, than black with soot, then gone, burned off her head. I remember thinking how bad it stunk in there – burning hair, rubber, fuel, skin, plastic...and the dog...last time I went in all its hair had been scorched off...she was in the back seat...Legs crushed under the roof...I was sure Anne would be next.

Steve had created a very vivid picture of the scene, and in a flash I thought of my own wife at home, visualized her in the car, her blond hair burning from her scalp, and allowed myself a momentary involuntary shudder. I thought of my own dislike of being closed in and imagined how difficult it would be for me to be trapped inside a small car, much less one that was burning. I wondered if I'd have had the courage to repeatedly return to climb into a car that could explode any moment. I consciously pushed the thoughts and distractions from my mind, intent on focusing on the words of the participants.

Emotions

There is often a natural segue from the thoughts phase of the debriefing to the emotions phase. Typically participants begin to feel increasingly comfortable and validated as they share their thoughts around the incident, and there is a natural tendency to move into the emotions that folks were experiencing. After each participant had the opportunity to clarify his perception of the facts of what had occurred, we moved on to emotions that attendees had at the scene.

The feelings were intense, powerful, and raw. There is a natural ebb and flow to the process and a normalizing of feelings that occurs as group members begin to express and then feel validated by one another for their emotions and their shared experience:

> I was so angry. I was at command so I couldn't get in there and help. I knew it was a bad one, but all I could do was deal with the 'rubberneckers', and work at keeping the media hounds off your backs. I wanted to get down there and help. I could hear the screams, feel the heat of the fire, smell the burning, and all I could do was f***ing media control.

> I was really mostly afraid for you, Steve. I didn't think he should be risking his neck like that. We go way

back, Steve, and I was terrified that the car would explode with you in it. I respect what you did man, but nobody's life is worth anymore than our own.

...It wasn't so bad at first...you know the adrenaline rush keeps you going. She was trapped but otherwise uninjured... What was tough for me was to watch her over five hours burning to death. She kept pleading with me to help her and there was nothing I could do...nothing I could do...and that dog kept whining and whining . . . and then when I went back in the fifth time it was dead and Anne's hair was gone. I just wanted to get her the hell out of there. I was terrified that I would...watch her burn to death before my eyes...and that the car would explode... I was so pissed that we couldn't just stop the fire – that's all the first aid she needed...I felt completely helpless.

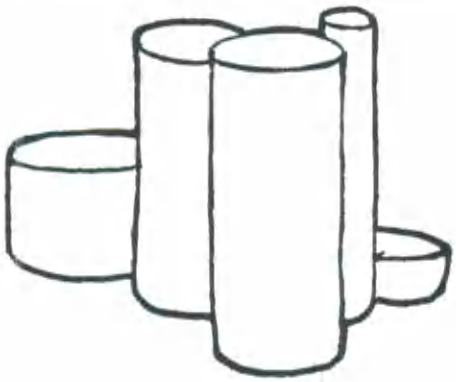
Next to Steve, I probably saw Anne the most. When you're working the 'jaws of life,' you get up close and personal. I was on the passenger side of the vehicle, and could see Steve working the patient. It was like I was there but like watching a movie...a five-hour movie and couldn't leave my seat...I had to stay right at the window, ready to jump in each time the fire was brought under control. I had to watch the whole thing and couldn't do a thing about it...When Steve was in she kept screaming at him to help her; when he was out and the car burning it was my turn. She'd look right at me man. And I had to stay right there and look back. I've done this a long time but this was the longest rescue I've ever done. I really felt for Steve being in there with her. I wished that she'd just pass out...make her life and our jobs a hell of a lot easier. I watched her burn alive and she watched me watching her...

While I felt centered and focused on the debriefing taking place, I allowed myself moments of time to check in with myself. I felt lost in the sensory images that were being presented to me by the men present and horrified at the trauma that had unfolded at the scene. I felt especially sickened by the slow torturous burning that Anne had experienced and imagined the pain that she must be in at the burn center. I tried not to visualize Steve's experience of watching Anne's gradual transformation over five hours from young, attractive, healthy woman to a woman struggling for life with burns over the majority of her body. It took again a conscious effort to suppress these images and feeling and to maintain focus on the words being spoken around the room. I would reserve my debriefing for later.

Symptoms

The deepest phase of the debriefing is often when attendees begin to discuss their reactions to the incident. By now trust has been established, rapport built, and individuals are gaining validation for their thoughts and feelings associated with the trauma that they have experienced. Moving into the reactions phase of the debriefing is crucial. During this phase, attendees discuss and share the reactions that they have been experiencing since the traumatic incident:

Scared. Nervous. Can't sleep at all. I cried when I got home, and couldn't explain to my mother what was wrong, even though she knew I'd been at the accident. She doesn't want me to do this any longer. Kids



at school just don't understand. I don't want to talk about it with them. They think it was cool that I was there and just want to know what it looked like. I can't explain it to them. It was awful. I keep thinking about dying and how short life really is. You can be minding your own business and suddenly, no fault of your own, you're dead. What control do we really have over anything? I feel nervous about my next shift. I don't know if I can go through this again. I've called in sick to my next volunteer shift.

I keep hearing the crackle of the car on fire, and keep hearing her screaming. The stretch of highway is on my police route, and I haven't been back there since it happened. I called my wife as soon as I got away from the scene. I just wanted to hear her voice, and to make sure my daughter, Katy, was all right. Keep seeing the flashing lights, mixed with the orange glow of the fire and the sunset.

I feel that I am doing all right, in general, with this call. I did take my dog for an extra long walk when I got home, and let him run free in the park, which I don't usually do. Let him sleep on the bed, too. The call reminds me of a call that happened on October 4 years ago, when a family was run over by a truck driver that fell asleep at the wheel. They all died instantly, but it took several hours to extricate the bodies. I haven't thought of that call in years. Don't know why I bring it up now.

> Since the accident I keep smelling burning hair. I can't get sound of her screams out of my head. Keep seeing melted steering wheel. When I close my eyes, see her melting skin and blackened face. Not sleeping. Talking to my wife isn't helping much. Victim is same age as my daughter. She's getting married next summer. I called her as soon as I got off call. Can't go back to work. Feel like I'm losing it. Am I going crazy?

I suppressed an involuntary shudder as Steve spoke. The imagery was so vivid and clear. It was difficult to listen to, yet at the same time I found myself transfixed by his words...by the events unfolding. I wondered in passing what I would be experiencing had I witnessed the ordeal these men had.

Normalization/Education

As attendees discuss their own reactions to the incident, there is a natural tendency to process how individuals have coped with their reactions. This educational phase of the debriefing, is critical in normalizing the reactions that individuals are (or are not) experiencing and helping to identify helpful and effective coping strategies. I emphasized that the reactions that individuals are experiencing are normal reactions to abnormal experiences. It is not unusual for individuals to feel as if they are going 'crazy,' and there is often a great deal of fear associated with some of the reactions, particularly flashbacks, intrusive thoughts, and hallucinations:

> I came back to the station and worked out for three hours on the weights. That's how I cope. The more stressed I am, the longer I work out. I keep going until that adrenaline rush is gone.

Steve and I got wasted. I must have had a couple of six packs myself. Just wanted to block it all out. Sometimes I talk with my wife, but she doesn't really understand and I don't want to upset her with the details. It's a lot easier to shoot the shit with these guys who know what it's all about...who can relate.

I just want to be let alone. Don't want to talk to anyone, even my family. I just need space and time. Sometimes I'll just get in the canoe and paddle on the lake. Just get out to nature. Empty my mind.

I play with my children.

I emphasized that reactions may continue for days, weeks and months, and that this is normal. If the reactions continue to interfere with psychosocial functioning I suggest further debriefing or speaking with a mental health professional.

Disengagement/Re-entry

Similar to the segue from the thoughts phase to the emotions phase, there is a natural segue from the education portion of the debriefing to what Mitchell and Everly (2000) call re-entry. It is not unusual for attendees to initiate some light humor and bantering as they bring closure to the formal debriefing. I let participants know that follow-up debriefings are available and that mental health services are available as well. At this point I handed out pocket size index cards with referral information. I remained available following the debriefing for 15-20 minutes as needed for individual follow up and consultation.

Secondary Trauma

The remainder of the weekend was fairly quiet, and I took advantage of the time to decompress from the debriefing. It had been an intense several hours. When Monday rolled around, I felt ready to return to work and start a new week. On walking into the MHC Center, I knew immediately that something was terribly wrong. Amy, the receptionist at the front desk, looked extremely distraught. Her eyes were red and puffy. The seat to her left, where her assistant usually sat, was empty.

I approached quickly, my voice filled with concern. "Amy, what's the matter?"

"You didn't hear?" she asked, surprise in her voice. "About the accident? It was all over the news."

My pulse quickened and I sat down in the chair usually reserved for clients checking in for their appointment.

"It was a long weekend. I've been on call and haven't kept up with the news," I replied. "What happened?"

She glanced at the empty seat beside her. "Anna Louise has been in an accident . . . a tractor-trailer...she's at Riverton Trauma center on the burn unit."

My head reeled. The images from the debriefing came flooding back to me, the smell of flesh and hair burning, the screams, the face slowly being burned beyond recognition. Anne in the accident had been Anna Louise our administrative assistant. Blond haired, blue-eyed Anne. Anna Louise, whose wedding I had attended only a few months ago and whose youthful energy reminded me so much of my own wife.

I spent the morning shift shocked and numb. I could not get the image of her face out of my mind.

Over the next several weeks I found myself preoccupied with the crash. I was tormented by the images that I had witnessed vicariously through the debriefing. Normally I could let go of these fairly quickly, but this was different; this had been someone that I knew. I realize now that what I was experiencing during the several months following Anna Louise's accident was

secondary trauma. I had several classic signs of secondary trauma. I found myself re-experiencing my perception of the event through nightmares and intrusive thoughts and images. My sleep pattern became disturbed, and I found myself sleeping less and less as nightmares and racing thoughts woke me halfway through the night. My concentration decreased at work and I became increasingly forgetful. I found myself avoiding the stretch of highway on which the accident had occurred and taking a longer route home. I also found that I was anxious about conducting another debriefing and fearful that it would again prove to be somebody I knew. In the past I was able to hold disturbing imagery in my head and heart because I did not know the person involved. Now my cloak of invulnerability had been stripped off of me and along with it my ability to distance myself from the event.

Lessons Learned

Figley (1995) writes extensively on the vulnerability of professionals to compassion stress. Compassion stress, which Figley (1995) uses interchangeably with secondary traumatic stress (STS), evolved out of the conceptualization of emotional contagion provided as an affective process in which individuals experience emotional responses parallel to an observed person's actual or anticipated emotions (Miller, Stiff, & Ellis, 1988). Figley (1993) builds on this conceptualization in his work on STS, which he defines as the natural consequent behaviors and emotions resulting from knowing about a traumatic event.

I had experienced compassion fatigue as a result of secondary exposure to an extremely traumatic event. Especially important and unique in this experience for me was the *meaning* that I attached to the event and the unexpected shedding of my cloak of invulnerability that occurred when I realized that I was acquainted with the victim in the accident. As long as I was able to separate what I witnessed in debriefings from the rest of my life, I was able to hear incredibly powerful and intense narratives. It wasn't until this illusion of invulnerability was pierced that I found myself taking advantage of clinical supervision to debrief this event. Having witnessed the incident vicariously through the vivid and prolonged narratives of the firefighters, I felt as though I had been through it myself.

I do not know what happened to Anna Louise and the traumatic symptoms she experienced as a result of her prolonged entrapment in a burning vehicle and her severe burns. She was released from the hospital after six months of painful skin grafts and treatment for third-degree burns over 50 percent of her body. Anna Louise did not return to the mental health center, and she and her husband divorced within a year of the accident. She lives with severe and permanent facial disfiguration and continues to live and work in the community. It is widely accepted that individuals who experience or are exposed to a traumatic event will experience some degree of stress response (Shalev, 1996). Harvey & Bryant (1998) examined acute stress among survivors of automobile accidents. They found that trauma survivors who experience acute stress reactions are vulnerable to enduring debilitation; left untreated, 78 percent met the criteria for PTSD six months later. In a follow-up study, 42-63 percent of these survivors continued experiencing full symptoms of PTSD two years post accident (Harvey & Bryant, 1999).

Coda

I conducted three more unrelated debriefings in the same two stations over the next eighteen months. During these debriefings I had the opportunity to check in with participants. There were no lasting symptoms of trauma, except for Steve, who left the fire

department within six months. He received permanent disability for PTSD as a result of his experience with this incident.

I eventually got back to conducting debriefings, though I am especially careful to have my own debriefing following my witnessing an event through narrative re-telling. I am also all the more compassionate as I realize that the victims and survivors in the stories told could all too well be a loved one or acquaintance. I still hold onto the images that I witnessed from the telling and re-telling of Anna Louise's traumatic accident, but they don't visit me as often in the middle of the night.

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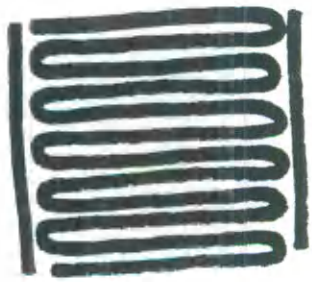

Ariel's Legacy: Grieving the Unborn

Michelle Emery Blake, Ph.D., Western Kentucky University

This narrative describes the author's experience of an early-term miscarriage over twelve years ago and the early grief response of devastation followed by denial. She discusses the reawakening of these memories and the opportunity to affirm and resolve them through participation in a Sandtray training workshop.

May 1992

I had been trying to conceive since November, and my cycle was five days late. I remember doing errands, such as going to the bank or the grocery store, wondering whether some secret little stowaway was along for the ride. Months earlier, we had agreed on the name Adam for a boy, with the middle name still under negotiation. We had chosen a girl's name, honoring both Shakespeare and my husband's father, almost immediately—Ariel Jacqueline Blake.

During those days, "the baby" was always somewhere in my mind. I would love either a girl or a boy, although I really wanted a daughter. I wondered what she would look like, what activities she would enjoy, what kind of personality she would have. If my calculations were correct, her birthday would be in late January. I would not yet allow myself to buy anything for her. If I were wrong, or if anything happened, it would devastate me to have her things left behind.

Late in the afternoon of the fourth day, something seemed different. My body began to feel as it had every month since my adolescence. Early in the afternoon of the fifth day, my body released a tiny red bean of tissue with a rudimentary stalk—together, less than a quarter inch. This was followed by the usual monthly flow. The dream of this baby was over. I wasn't pregnant. Perhaps I never had been. And in any case, there was an afternoon at the mental health center—fortunately, paperwork only—to get through before I could go home.

September 1995

I had been through the monthly dance so many times—building hope followed by blood and disappointment. Over the past three years there had been several negative pregnancy tests. Two years earlier, I had begun a doctoral program, since that was one dream that lay within my control.

I had a doctor's appointment on the afternoon of September 27 to obtain the results of tests that had been performed. I learned that I did not have uterine cancer; I was perimenopausal, even though I was only 41. Kindly, I was asked if I wanted to consider adoption.

I drove back to the university, aware that I had an evening class to teach in less than an hour. There was no time to cry. Ironically, the course treated women's issues and the topic for the night was the impact of the menstrual cycle and menopause on women's lives.

I announced to my class that I did not feel well and that we would be ending early. On the drive home, I wondered how to beg off from the baby shower I was supposed to attend that weekend. As I walked up the front steps, I melted into relief at finally being home. I turned my key in the lock, and the tears came.

My friend had her baby that weekend, so the shower was cancelled. I decided to visit while they were still in the hospital, since

that was probably the best way to ensure brevity. It was easier than I expected until I was invited to hold the baby. As he nestled into my arms, someone remarked, "You do that like a natural."

The winter was difficult, particularly the holidays. At Christmas, I found myself thinking about all the lucky adults who were filling stockings that night and wondering whether our baby would have looked like my husband's family, as our great niece did. I would never know these things. I had waited too long.

That spring, we took a camping vacation in South Florida. It got so cold that we ended up in a motel, but it was one of the best vacations we ever had. It was during that trip—strangely, during our visit to a sanctuary for wounded birds—that I realized I was enjoying our life without a child. The long fall and winter had ended. My healing was well underway.

January 2003

I had not thought about the possible miscarriage in years. If anyone had asked me, I would have said that I had successfully worked through my grief concerning infertility. I had experienced a hysterectomy several years earlier with no particular exacerbation of sadness. I had lectured and published an article (Blake, 2002) on grieving infertility.

During the third week of the month, a client suffered a miscarriage just over a month into her pregnancy. It was around this point that I discovered a special issue of *Time* magazine from several weeks earlier (November 11, 2002) that chronicled fetal development. The illustration of a 32-day embryo jolted my mind back to that long-ago May afternoon. That *was* what I had seen. The moment was bittersweet, containing both corroboration of past reality and remembrance of past grief.

November 2004

It was the second afternoon of the first level of Sandtray training. Informed by Jungian archetypal theory, a primary objective of this mode of therapy is to have the individual create a world within the framework of a tray filled with sand (DeDomenico, 1995). The creator then explores the world through various means, including taking the perspective of various characters inhabiting the world and considering their positional and emotional/ideological relationships. Both the creation and exploration of the world invite openness to various "bodies of consciousness"—physical, emotional, mental, temporal, soul, and spirit (DeDomenico, 2004). Through utilizing these channels to contemplate the interrelationships of the world's members, this exploration can subsequently provide new insights and solutions that can be applied to the client's own situation.

A variety of objects were available for sale, and participants were welcome to borrow these items for use during the training. I had noticed almost immediately a Ghanian wood carving of a woman with a child wrapped in her arms. The subtle shadings of the ebony, the lines of the woman's face—the blending of sorrow and serenity sometimes depicted in the Madonna—were remarkable. The infant's face, however, was less clearly defined, even a bit distorted. "It looks like she's holding a dead baby," I thought.

I wondered whether my reaction might be worth exploring, so during that afternoon's session, I decided to experiment with the possibility of memorializing that long-ago loss. There had been no observation—other than my own sadness—of the lost pregnancy. The world of the Sandtray offered the opportunity to create such a memorial. The creation was witnessed by two partners, one who had been assigned and one who was a long-term friend and mentor.

I positioned the ebony figure I called "Grieving Mother" near the center of the tray. Around her, I traced a moat-like circle. Inside the circle with her were animal totems, that also functioned as surrogate "children." Far to her right was an empty bassinet.

For the actual memorial, I selected an angel relief sculpture, which I placed in the left corner so that it would stand. The angel, made of wood finished to resemble stone and carefully detailed, bore a hammock-shaped banner on which "Peace" had been engraved. I laid a tiny baby doll inside the hammock and covered it with sand. Near the angel, who now functioned as a tomb, I added a Celtic cross, symbolic of our religious tradition, and a second angel, who had blonde hair and carried a spray of pink roses. Within the Sandtray, this angel (chosen in reference to an aunt who died in childbirth 40 years ago) became a guardian for the baby who slept in the cradle held by the "Peace Angel." One of my partners offered a votive candle, which I placed before the Peace Angel." My last addition was a small index card on which I wrote "Ariel Jacqueline Blake, May 1992" and then positioned it beneath the hammock.

During the processing phase, I noticed such things as spatial relationships among the characters in this world. The "Grieving Mother" was apart from the other characters, which seemed to signify loneliness and sadness. Both "Grieving Mother" and the "Rose Angel" were focused on the "Peace Angel" and the baby resting in her care. The proximity of the "Rose Angel" to the baby ensconced in the hammock offered the baby a substitute for the love and guardianship of the mother who could not be with her and forged among the three a connection that could not be severed. The cross, the candle, and the angels suggested benediction on the tiny life returned to God. The act of writing her name affirmed a nebulous existence.

In considering the emotional perspective of "Grieving Mother," the unified image of mother and ghostly child appeared almost isolated in their sorrow. The loss was too early to be acutely experienced by others. It was at this point that I experienced a flare of anger toward my body for any role it might have played in this loss. This, however, quickly gave way to a new thought that touched the dimensions of soul/spirit. I decided that I had two choices. One of these was to decide that Ariel came from and drifted back into a state of nothingness. This seemed impossible to bear. The remaining choice was to believe in her existence as pure spirit. It was at that moment that an element of forgiveness and peace surfaced.

"If she exists," I told my friend, "she is pure spirit. If my body could be a vessel of that, then I have been blessed."

This was also the point at which my perception of the "Grieving Mother" changed. I noticed that her simple lines also hinted at a quiet, enduring strength. The baby in her arms was not only a ghost child but also an unseen presence that enriched her life.

In short, this experience allowed me a venue in which to represent my grief and move toward yet another phase of resolution. It provided the opportunity to tell my daughter I loved her and to lay her to rest.

That evening, training participants were offered the opportunity to mold clay figures of their own choosing. Mine included a series of images leading from embryo to newborn. I used a crafter's mold to create a baby's face, worked the clay to make the face a bit smaller, and folded the remainder of the clay into a nebulous embryonic body. The second image again was of an infant's face, this time with the body portion enclosed in a square of pink clay that was folded to frame the face as a blanket would. The third was a tiny bean formed from a remnant of red clay that resembled the actual loss as closely as possible. In working with these new creations, I realized that the second image was my psyche's representation of my daughter

at peace. A comment that I particularly valued was, "She's smiling. She smiles like you" (G. S. DeDomenico, personal communication, November 11, 2004).

Implications for Practice

Women and/or couples who experience the loss of a pregnancy may need to be offered the opportunity to grieve. Specifics may vary with the stage and circumstances of the loss, possibility of successful pregnancy in the future, and support from extended networks. However, some common themes may be present.

Miscarriage represents both an actual loss and the loss of a dream. Clients need to be encouraged to explore and express their feelings. In attempting to conceptualize and/or reify the loss, the use of archetypal mother and/or infant images may be helpful. These can include existing images, those of the client's own creation, or a combination of the two. Visual metaphors of this type can be especially powerful in the representation of a loss that goes unrecognized. Journaling and/or drawing that incorporates the client's own themes of loss may be beneficial as well.

Having the opportunity to express this loss and having the loss recognized by another may be particularly valuable. In the case of early term miscarriage, it is possible that no one other than the woman or couple knew of the loss. Even if others were aware, the loss is often unobserved. People keep silent as a result of not knowing what to say or the fear that they may somehow make matters worse. Others may—presumably with good intentions—attempt to minimize the loss with such comments as, "It's not as if you lost a child you had and loved," or "You can always try again." Particularly if the loss is recent, clients may seek help in sorting through their emotional responses to such comments. In instances in which subsequent successful pregnancies are likely, clients may work toward the recognition that hope for the future does not erase the importance of a particular loss. *This* baby may need to be mourned before others are welcomed.

It is worth asking whether clients desire some type of farewell ritual. Several options exist, both within the therapy room and outside. Sandtray provides an excellent venue for the expression of grief. Other options may include a memorial service at a favorite outdoor location, the construction of a memorial artifact in the client's home or yard, or the writing of a letter to the unborn, which may subsequently be either kept or burned. Some cities have designated cemetery space in which parents may inter objects that symbolize their loss. It is also possible to purchase the right to name a star. Some astronomical publications and websites have information on this process. It may be important to the client(s) to include her/their spiritual preferences and to have the option of including others in the observance.

Epilogue

This article was composed from January 10 to January 29, 2005. Ariel's twelfth birthday would have been captured within this span of days.

I have never cared for the word "acceptance" as a designation for the final stage of grief. "Resolution" seems a more accurate name for this phase of the process. It implies the recognition of a reality that may not be preferred but which is, nevertheless, the hand that one has been dealt. Through the process of resolution, one makes peace with that reality, honoring its losses, its lessons, and its possibilities.

I can now become genuinely excited when a friend has a new baby. It would be a lie to say that I never feel a twinge of regret or wonder what it would be like to hold my own baby for the first time. However, these losses become increasingly distant echoes. Resolution speaks to the ever decreasing

power of echoes to drown out present songs of celebration.

This leg of the journey has made me a better therapist, wiser, more empathic, more sensitive to a variety of subtle losses that individuals encounter. This is a gift—in a sense, a legacy from my unborn daughter.

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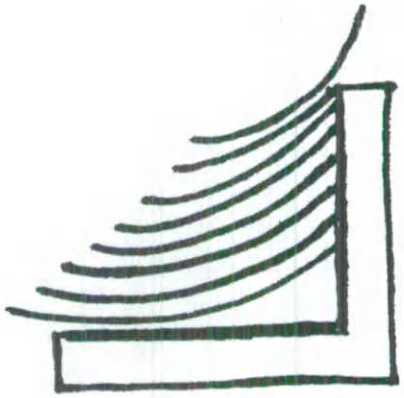

Conversations with Mother: Healing the Wounds of Psychological Trauma

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(Assisted by Steven Freng, Psy.D., MSW)

The author maintains a clinical practice composed primarily of homeless Veterans diagnosed with Post-Traumatic Stress Disorder (PTSD). He recalls a childhood rife with tensions and insecurities, particularly in regard to his struggles with academic performance and the reactions of his parents. As an adult, he developed a deepening appreciation and understanding of the traumas suffered by his parents in Eastern Europe during World War II, and their direct impact on his personal and professional life. A signal event—his attendance of a workshop focused on the transgenerational aspects of the Holocaust—prompts an intimate, revealing, and ultimately healing dialogue with his mother.

Part One

My story begins before my birth – as do the similar stories of thousands of others. I was the first among my siblings to be born in the United States. My birth came less than six months after my family arrived from a refugee camp in Germany, their last European home, after having spent most of World War II in Hitler's work camps. After Hitler's armies invaded, political chaos was rampant in their native Poland and my parents were fearful for their lives. They feared they would be killed by the *partisantca*, a Ukrainian faction with territorial acquisition and political control as their goals. They witnessed murders and the destruction of property and livestock, forcing them to take refuge in the church at night until that too became unsafe. Their quiet lives had suddenly been thrown into the turmoil and trauma of war.

Not knowing what to do, they were eventually told by the German army that things were so unstable that they would be moved to a safer place in Central Poland. The continuing nightmare and a "promise" of safety by the Germans only served to awaken a deeper fear, mistrust and a more profound sense of helplessness. Leaving everything behind and accompanied by three very young daughters, an uncle and a grandmother, they were packed into cattle cars with no food, water or sanitation facilities, nearly smothered by other people. A constant fear that the wrong word or gesture would bring instant death marked the beginning of a journey that would forever change their lives, destinies and family history. When treated in such degrading and threatening ways, all experiences are forever changed, unleashing the beast of chaos, confusion, anger, fear and instability that haunts those involved as well as those close to them for life.

My family didn't know at the time that they boarded the *last* train from their community to the work camps. It is impossible to say what might have happened had they not done so, but I can imagine that I likely would not have had an opportunity to learn of these events. However, my family was resilient and – like many others – survived the Holocaust that Hitler and his army perpetrated on millions of people. I had learned much about this massive trauma and felt obligated to not forget. For years I thought how lucky I was to have been born in the United States, escaping all those overwhelming and dreadful experiences. Indeed I was lucky, but being born in the United States didn't mean that I was spared the wrath of this trauma. I came to learn how

the beast of Trauma endures and continues to grow long after its insult ends, indiscriminately victimizing those who get close to it.

Part Two

I most vividly recall her displeasure – the facial expressions, the words, the actions that my schoolwork, each project, each essay, each assignment would elicit from my mother. I never seemed to match the success of my brothers and sisters, causing what felt like a very different light to be cast on me within the household. While my siblings excelled in numerous ways, I struggled, assuming a persona of "the dumb one," an unsought role that I would live out over time. So profound was this role that I later realized that it had followed me into adulthood and was the subconscious (and at times very conscious) self-image I carried. The differences between my achievements and those of my siblings often incurred Mother's displeasure.

It was easy to remember her tenderness as well as her sternness, wanting to *forget* the sternness – that not uncommonly became anger – and striving always to be pleasing in order to attract that tenderness. I too often attracted only her wrath. Yet somewhere inside was a determination and a belief that I had much more to offer, challenging my "assignment" as dumb and problematic. Little did I know the struggle that waited and how hard I would have to work; all the while feeling that it wasn't hard enough.

After completing high school – which at times entailed great struggle both academically and emotionally – I wanted to go to college, and felt deeply that I could succeed in doing so. But I knew that my high school performance and my financial situation limited my options to a community college. I also knew that if I were going to pursue any academic goals, I would be on my own. My parents thought I was wasting my time. They discouraged me, and offered no financial support whatsoever. My high school academic history certainly didn't merit any support and likely prompted the judgment that I was an unfit candidate for a higher education.

Accepting the reality of this predicament, I did the only thing I *could* do: work and pay my own way. Fortunately, I was allowed to live at home at no expense and had a car to get around. And although it was difficult to carry on in an environment that was not always supportive, my belief and faith proved to be invaluable allies. My first quarter grades earned a place on the President's List for the first time in my life. I actually didn't know how to react. When my mother saw the certificate, she didn't appreciate its meaning and told me that I should do something more practical in life, like being a mechanic. Undeterred, my faith and belief grew. In time, I completed two years of community college studies, enrolled at the University (after initially being turned away) and earned two degrees, a Bachelors and a Masters, proving wrong every aptitude test I ever took.

With time and achievement, I sensed that my mother was coming to appreciate me in a new light, and I in turn came to appreciate her importance to me at a deeper level. Although she didn't completely understand what my education and chosen life's work was about – her life experience had not exposed her to anything like it – she developed a healthy curiosity about it. After my father's long, difficult illness and death, my relationship with my mother began to refocus; it shifted from caring for an ailing husband and father to our own lives, including the experiences my mother had endured before, during and after World War II. Conversations – true, revealing conversations – began between us, affording an awakening of the legacy of our family.

Part Three

Mothers hold a very special, well-deserved place of esteem in our culture. It is

Mother who has the honor and distinction of bringing us into existence, nurturing us and ensuring that we thrive, ideally with Father, as we grow and develop. Our experiences with Mother and Father (or the lack thereof) influence our identities, our values, our sense of purpose and the essence of who we become in life.

Mother, like Father, also always entails a dual identity. Mother, the bearer of life, the nurturer, the caregiver, the supporter, the giver and teacher of love, versus Mother, the person, frail, needy, vulnerable and insecure. Clearly, the latter is not the image we revere or want to accept as it conflicts with our need for an unassailable mother.

Healthy mothers foster healthy lives for their children and contribute in turn to a healthy society. However, the experience of Mother can also wound, confuse, cause distress and create chaos that is life-long, with implications far beyond the person directly touched. Frequently, it is not the intent of Mother to wound; often, Mother is the victim of overwhelming life events that are traumatic, unresolved and influential in the life of her child.

Trauma, particularly trauma that precipitates Post Traumatic Stress Disorder (PTSD), is a common and significant feature in the experience of too many women on a global basis, most of whom are mothers. PTSD contributes to and facilitates a destructiveness and chaos that has the power to plague and disable. Traumatic events involve many contexts and causes, but interpersonal trauma such as rape, assault, abuse, betrayal, rejection and abandonment have become too common among women. Time alone is unfortunately not an effective healer for these experiences. The consequences of these kinds of events take many forms, such as disproportionate, poorly-controlled anger; poor self esteem; an inability to relate to others; a lack of confidence in relationships; isolation, and a broad range of identity issues that can paralyze efforts to assume a care-taker's role. And these are but a *few* of the manifestations of trauma – the hauntingly persistent beast of trauma – for many mothers.

Part Four

As our conversations continued, the relationship with my mother deepened. I began to gain a whole new perspective on her life and its consequences on my own. Mother was not an image any more; she became a real, unique woman who endured much suffering and trauma in her life, and also happened to be my mother. She never had occasion to put these experiences into context or to understand them, but knew they had intruded unwantingly into her life on an almost daily basis. She had survived and escaped one of mankind's darkest times, but peace for her was elusive except for her faith. Her spirituality, faith and belief emerged as her way of coming to terms with this experience. God spared her life and left her family intact: a gift she never forgot.

It wasn't until later in my own development that I came to recognize something that had been there all the time. I remembered going to a workshop that dealt with the transgenerational aspects of the Holocaust and later coming to visit my mother, telling her of my experience. She seemed cautiously open when I asked her if she remembered the death camps, a topic we had never specifically discussed. She sighed, took a deep breath and said, "I was aware that something was going on – people disappeared and trainloads of people passed by frequently – but people were too afraid to ask what was happening, fearing for their lives." She also revealed that her biggest fear was actually the Allied bombers that flew over in the hundreds, shaking the buildings and everything in them. They were situated near a munitions factory (disguised as a cigarette factory) and everyone feared being bombed into oblivion. As we talked, her demeanor suddenly began to

change rapidly, as if she was there again. She began to cry and tremble, barely able to tell me that she had to stop because she couldn't talk about it anymore. I felt dreadful, as the last thing I wanted to do was upset my mother. At this point I too was shaken – not just by the abrupt emotional turn, but also by the realization that my mother had PTSD.

Our conversations continued. More experiences emerged. These also came in emotional ways, telling of her fear when a German soldier inadvertently bumped my sister, a baby at the time, in the forehead with the butt of his rifle. The horror and fear my mother felt emerged more through her body than her words. I was mindful to avoid becoming my mother's therapist, and was able to share insights that I had learned about trauma in an intimate way, appropriate to mother and son. Trauma, however, has many dimensions and as much as I would have liked to have thought that I could control the beast, I knew to aspire only to be content with acceptance and understanding.

Part Five

The conversations with my mother challenged me to be a son in a capacity I had never considered before. As time went on I found myself sensing a growing internal discomfort that seemed psychologically and emotionally rooted but obscured at its source. Images began to intrude in my thoughts that were very painful and unwanted. Intense glimpses of unpleasant and frightening experiences from my childhood began to emerge. I saw images of my younger self, protecting myself from a severe beating by my father. I heard the words "dummy," "jackass," and "stupid" resonating in my head, not knowing where they were coming from or why. I had heard and felt this all before, and wondered again what I had done and whether I was a bad person. I so enjoyed my conversations with my mother. . .why was this coming now? The thoughts and feelings forced me to limit the frequency and periods I could spend with mother, and the passage of time just seemed to intensify the intrusions.

I tried to hide what was happening but with no real success, particularly as it pertained to fooling my mother. As I sat in her kitchen one afternoon, she looked at me and asked, "What's wrong? You seem more sullen and distant." I looked back at her, unable to hide my feelings of sadness and pain, and began telling her about the many things that had been going through my head. I told her that it wasn't my intent to hurt her, that I didn't want what I was experiencing, and that I didn't feel like I had any control over it. I didn't know why these things were happening. "I keep hearing you and Dad calling me dumb, stupid and a jackass," I admitted. I told her that I was reliving those experiences, that I didn't know why nor did I want it to continue.

I remembered covering my head, crying and being so frightened after my father beat me for breaking a bottle of milk that had slipped out of my hand. I told her I remembered the sixth grade when she and my father came home from a parent-teacher conference angry and yelling, saying that my teacher had described me as "a sack of potatoes with a head of cabbage for a brain." My father then proceeded to twist my ears, slap me and throw my report card in my face while calling me stupid. I said, "I never liked report card time because I thought I would be beaten and called dumb." I told her that I wasn't sure why all these things were coming up and that I certainly wasn't looking for this to happen. I went on to tell her that my relationship with her was very important and that I wasn't saying these things out of anger, but out of honesty. I then said that I didn't believe I was stupid and was proud of all that I had accomplished in spite of my struggles with those feelings.

Something began to happen to me at this point that I had always felt rather difficult to

put into words, but a sense of relief or comfort began to emerge from all the heart-wrenching emotion. I was still very emotional and as tears welled in my eyes, I turned to my mother and said that I understood what had happened to me. It wasn't that she or my father didn't care about me, but that this was rooted in their own experiences of fear, not knowing or understanding the consequences of what happened to *them*, and I had realized that blaming them didn't heal. I told her I could sense a feeling of peace, and that I wanted to enjoy the time we had together, wanted her to be part of my life and those of my sons. I said, "Perhaps God has given us peace in understanding what happened. I know that I am not the stupid, dumb person that I once thought I was. I am confident, intelligent and have worked hard to make my life meaningful. I am not wealthy in the monetary sense, but my wealth is deep and vast in meaningful relationships and realization of the gifts I have been given."

My mother looked at me in turn with red and swollen eyes and asked me how I knew I was at peace. "What a question," I thought, knowing it was deserving of an answer. "Mother," I said, "I have three boys and although they're not completely grown, they are well on their way to healthy adulthoods. I can count on one hand the number of times I've hit them and still have fingers left. Never have I called them dumb or stupid and I won't tolerate anyone else doing so, including when they talk to each other. They are boys, who do things that boys do, sometimes embarrassing me. Not everyone has agreed with my approach, suggesting that I'm too soft and that they are not disciplined. But I see confident, normal boys who will distinguish themselves with their abilities. I want them to know about your war, the impact it had on me and the consequences it's had for the family. They are successful in their own right and I trust and hope they aren't haunted by this beast. That's why I can say I am at peace. They have had the best their mother and I could give, and the rest will be in their hands – without the beast I have carried."

Softly smiling, mother looked at me and said, "No, you're not stupid and you are right about the terrible consequences of the war. Your father was a good man but the war changed him and our relationship greatly. I'm happy for you and your family, and that you have found strength in this horrible experience. We say things at times that we don't mean or understand and do things that we can later only regret. May God bless you and your family; I'm happy to be a part of it and want to stay a part of it."

My heart was full of words. "Mother," I said, "I trust the pain stopped with me and didn't adversely impact my boys. I do want them to know and understand what happened to our family and the legacy that is also theirs. But I don't want them to have the same burden of pain. Life is too short to be dominated by so much anger and torment; you have suffered enough for all our lifetimes. We have been blessed with an opportunity to live again in peace and love. I want that for them and know you do too!"

Our conversation that evening ended with more peace than I had ever felt before. The unwanted intrusions stopped and I continue to enjoy conversations with mother. I feel that our relationship has reached another plateau. And our relationship and conversations have become even more important to me. I have realized that it's not often in life that one has opportunities such as this, and I regret not having such an opportunity with my father before he died. There is, however, a sense of peace about my father, an understanding that his anger was displaced from his overwhelming experience of war. I have forgiven my father and have accepted that he cared for the family in the best way he knew.

Part Six

This short memoir illustrates how a deeper sense of understanding allowed a son to explain a mother's atypical actions – her departure from the global perception and idealized image of Mother – and encouraged healing that transcended generational, cultural and experiential distances. My hope in sharing this experience is to contribute to others in finding peace. Pain from Mother or Father can be horrendous, haunting us throughout life, inhibiting us from living with a sense of confidence and security. If the innocence of your childhood was violated, it doesn't need to be repeated in the lives of others, particularly your children. Understanding and acceptance fuel faith and belief, revealing a perspective that allows peace to live in us. The beast often distances us from those with whom we should be most intimate; conversation closes the distance, and understanding and acceptance can restore the intimacy.

The author wishes to thank "Mother," Maria Kokorowski, Reverend Jim Picton, and Emmett Early, Ph.D.

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Looking Up: A Short Woman's View of a Heightist Society

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This narrative describes an MSW student's experiences with heightism as an Asian American female in the social work arena. While at some point in their educational career social workers are made aware of discrimination as it pertains to age, gender, class, race, religion, disability, and sexual orientation, awareness is not present about discrimination as it pertains specifically to height. The exploration of heightism in the social work field catalyzes the narrator to reflect on her past experiences with discrimination, her realization of the ways heightism continues to be largely ignored, and her reasons for entering the profession. The oppressive mechanism of silencing target populations is explored as it pertains to height discrimination, as well as the intersection of heightism and racial discrimination towards Asian American.

I am Asian American. I am female. I stand four feet eight inches. The preceding three sentences are the main reasons why I am now a social work student. As a minority with these social identities, I have been allowed the privilege to experience discrimination first hand. I use the word privilege and discrimination together because without my experiences of oppression, I may not have had the opportunity to develop the amount of compassion for underserved populations that would eventually lead me to the social work profession. As an Asian American female of short stature, I have come to expect discrimination on a variety of levels. I have become accustomed to stereotypes that are propagated through media and reinforced by the dominant culture. But as a social work student, I always expected that the political awareness and cultural sensitivity that was so emphasized by the profession would somehow magically eliminate these stereotypes from the classroom arena. What I came to find was that although there was a strong presence of cultural awareness at the racial and gender levels, there was a huge absence of sensitivity toward physical difference, particularly in terms of height. Although I have experienced the effects of gender oppression, for the purposes of this narrative I will focus on the intersection of heightism and racial discrimination as an Asian American.

On September 17, 2004, during a direct intervention class in my MSW program, the professor made a comment that reinforced heightism as a prevalent yet widely unrecognized form of discrimination. In discussing the composition of groups for the purposes of group therapy, she stated that there were individual characteristics that did not matter in the structural design of groups, such as height. She went on to state that it would not affect a group if you had three short people and one tall person, adding with a smile and in a joking tone "unless it's a group of midgets; that would be different." The comment took me off guard, not because I had never heard anything like that said, but because it was so unexpected considering the context.

Sitting in a social work classroom, a safe environment where there was always a conscious awareness of prejudiced views, it further upset me that the use of the derogatory comment "midget" was coming from a professor with a Ph.D. who had always emphasized diversity and was very conscious about multicultural issues. Although the comment immediately sparked emotion in me,

I did not speak up. I first looked around the room to see the reactions of other students. Their lack of reaction temporarily immobilized me from saying anything at the moment. I felt that my feelings were unjustified because I was the only one affected by the comment. It was a familiar and lonely feeling. I remember clearly feeling embarrassed to speak up, while simultaneously feeling frustration knowing that I should.

Where did this embarrassment come from? Was I afraid that my speaking up would associate me with a dwarf? Did I hold the same prejudicial views directed towards dwarfs and people of short stature? Was I afraid that my past experiences with the trivialization of heightism would resurface? I was not able to deal with trivialization at that moment. The lack of recognition of heightism as an active form of discrimination prevented me at that moment from contesting the comment. Looking back, I know that if the comment had been directed toward a racial identity group, I would have spoken up immediately. Cultural acceptability had largely affected my empowerment to speak up against prejudice and discrimination. For the remainder of the first half of class, I remained silent, tuned out to what the professor was teaching, and immediately began to recall one of my most pivotal experiences with heightism as a working professional.

A former high school Spanish teacher, I vividly remembered the anxiety I experienced during my first year evaluation. After an intense hour-long observation by the assistant principal of curriculum, I entered his office expecting to receive a balance of praise and constructive criticism. Instead, I received a detailed evaluation summary in which only one comment stood out: "Youth and size make classroom management a challenge." Although I had felt that my job performance was often judged in relation to my height, this was the first example where that theory was clearly and straightforwardly supported. The assistant principal's comment not only demonstrated a heightist viewpoint, but an ageist one as well. Although the assistant principal was later reprimanded for the discriminatory comment, it was reinforcement that certain forms of discrimination are more acceptable than others. If the assistant principal had put, for example, "Race and gender make classroom management a challenge," I am sure much harsher measures would have been taken against him. Although I received support from co-workers who condemned the assistant principal's comment, they identified it as an isolated incident unrelated to a larger discriminatory system. because they themselves had never experienced heightism, they did not recognize its prevalence, nor did they realize that the comment was a representation of a cultural value that associates height with competence.

My feeling of loneliness after experiencing this discrimination was compounded by the fact that there was no shared "height culture" within my work environment. As an Asian American in a predominantly Asian suburb, I was part of a majority. As a woman, I felt the strong bonds of sisterhood among my friends, classmates, and co-workers. As a member of both identity groups, there was a shared culture, a sense of similarity, and a sense of safety in numbers. I knew that there were those who were continuing to fight for our cause, continually bringing awareness to the injustices of society. But as a short person, who was my spokesperson? I had no one near me who could understand what I was experiencing. Those to whom I mentioned my feelings dismissed them as trivial, while others thought it cute and amusing.

This is when I soon became familiar with what I later understood to be a hierarchy of oppression. Whereas oppression is culturally legitimized inequality as a result of systematically enforced discrimination practices through the use of social, political, or economic power, hierarchy is a system of

oppression between at least two strata: the privileged and the oppressed (McDonald & Coleman, 1999). Within a complex hierarchy, a multitude of social roles and identities exist that create varying degrees of socio-economic inequality (McDonald & Coleman, 1999). As a teacher in a multiethnic community, I found a continuous emphasis on cultural sensitivity as it applied to race and ethnicity. Our staff focused a great deal on multicultural awareness, yet we failed to address social identities beyond race. As an ethnic minority, I would have felt justified in bringing forth any racial discrimination issues. Yet, as a short person, I did not feel the same. I felt not only that racial discrimination took precedence over other forms of discrimination, but that non-racial discrimination was largely ignored. Although this experience was the catalyst that led me to reexamine my professional role as an educator, as well as the reasons for entering the teaching profession, it also served to bring to the surface many of my past painful moments with discrimination.

I stopped growing by the 6th grade. I remember the day I found out that I would remain the height I was for the rest of my life. I went to the doctor with my mom for a routine physical. After the nurse weighed and measured me, we waited in the examining room for the doctor. As the doctor entered, reviewing my charts, she specifically focused on the growth history. As she looked up with a saddened expression, she stated that I had probably stopped growing. Partly because of the doctor's grave look, and partly because I had already internalized heightist ideologies, I looked at my mom and began to cry. My mom became tearful too, not because she had hoped for a tall daughter, but more because she knew the pain I was feeling and anticipated the hardships I would face as an adult of four feet eight inches. The doctor said that Growth Hormone (GH) would no longer be an option because I had already passed the time frame in which it could be administered. I now know that the idea of administering GH to a healthy child is extremely controversial. It represents the dominant culture's view that short is not okay. The strong reactions of both my mom and my doctor reinforced that dominant culture's perception of height. But at that moment, I did not recognize that. I only recognized their sad reactions and the doctor's final comment, "I'm sorry. It's too late." I was devastated because, to me, and apparently to the doctor, the GH was my only solution: a magic potion that would make me normal and acceptable.

I now see the harm that the situation caused. The doctor never told me I would be fine the way I was. She immediately began to discuss medical solutions. The moment the doctor told me I missed the opportunity to take the GH, I felt sad for a "missed opportunity." But now I know that it would not have helped. For one, I would always be a short person culturally because I experienced first hand the ways in which height differences can change people's treatment of others. Second, I would feel in a way that I was a "sell out" for changing a part of me that I was born with, similar to changing my ethnicity. Third, if people were to make heightist comments to me, even if GH made me taller, I would still be affected knowing that that is who I am naturally. The issue then is not that I was short, but rather that I was seen as "different."

I eventually came to accept that I would no longer grow to be five feet two inches, the original height prediction of my pediatrician. I eventually graduated from elementary school and completed high school, luckily feeling minimal psychological effects of my short stature. Because I grew up in a predominantly Asian suburb, my high school friends did not tower over me as I would later experience in other arenas of my life. My height at the time was not a focus of much outside attention. I was able to maintain a feeling of normalcy.

It was not until I entered college that I began to really take notice of my height and its psychological impact. Although there was a lot of diversity at the university, I was no longer an ethnic majority. Mixing with other ethnicities, height distinctions became more apparent. I began to experience how my height would catalyze head-patting and other condescending behavior. I consistently felt that I was not being taken seriously. Soon I began to feel like a young child in an adult world where I constantly had to look up.

It was during college that I also began to realize the subtleties of heightism in everyday comments and the unintentional insensitivity that people had in regards to short stature. Now much more part of the dating and social scene that came with being in my late teens, I heard many of my friends comment on how they would not go out with a guy if he was "too short." When they would describe their ideal man, "tall" would always be a characteristic. One of the first questions girls would often ask about dating prospects was, "How tall is he?" The mainstream American belief that attractive men are "tall, dark, and handsome" is continually reinforced through media representations and casual dialog. Therefore, to be outside of that ideal has the potential to create a sense of inadequacy in men who do not surpass the national average height. Height standards for women were never expressed as being quite as crucial as for men, although in the fashion and entertainment world there largely existed a glamorization of tall women that linked height with beauty. Regardless, I absorbed any heightist remark as deeply personal. After all, I came from a family of short stature, with a father and a brother both under five feet four inches. Comments directed toward short men as unappealing and inadequate were indirectly aimed at my family members.

Not only was I aware of heightism as it affected males in the dating scene, but the ways in which it was linked strongly to the stereotype of the Asian American male. As an Asian American female, I would remember feeling a lot of resentment towards my Asian female friends who claimed proudly, "I only date White men because Asian men are too short." What creates this sense of aversion to males of our own race? Is it because so many of us buy into the media representations of the feminization of the Asian male? The concept of orientalism creates a contrasting image of the Eastern and Western worlds. Within the dominant Western culture, Europeans and European Americans usually represent conquest, power, and masculinity, while Asians, both male and female, represent femininity and subservience. The feminization of the Asian male is not a stereotype directed solely toward Asian males, but Asian American males as well (Parikh, 2002). It is another form of psychological colonization that justifies and perpetuates the dominant culture's value system.

A hallmark of my college experience was turning 21. It was the beginning of my experience with the club and bar scene. Although I felt excited about moving more into the "adult world," it also created anxiety in terms of representing myself as an adult. For the first time, I felt that I was often looked at in a way that suggested, "Do you belong?" Walking into clubs or bars, there were handfuls of incidents where men would look at me and smirk, sometimes gesturing to their friends how small I was. I remember a laughing comment made to me by a club bouncer as he checked our I.D.s: "Where's the rest of you?" Feeling hurt and embarrassed, I just laughed it off, knowing that to him height was probably not a big deal.

I do not know when the transition took place, but I eventually noticed that my self-consciousness regarding my height guided what I wore. Throughout high school and even through part of college, I felt free to wear any type of shoe I wanted, regardless of the heel. By my senior year in college, due to my

growing awareness of heightism, I began wearing only shoes that increased my height by at least a few inches. The tallest pair of black boots that I had, which I still have and wear to this day, helped me feel more secure when entering new social arenas where I would meet people for the first time.

I remember one situation where someone commented to me: "Wow, you're short," immediately followed by another person interjecting, "How sad, don't say that." At that moment I felt anger, created not by the initial comment, but by the feeble attempt to somehow "protect" me from the reality of my stature. It was a judgment on what it meant to be short, that it was something shameful; something that should not be discussed, something taboo. What we associate with "good" and "bad" are often cultural perceptions created by influences of the dominant culture, media, and established norms. Because these dominant cultural perceptions are so skillfully perpetuated, we often accept our own position within created societal hierarchies as given truths.

After graduating from college, I was apprehensive about entering the real world. Increasingly, the more exposed I was to the world outside of my home suburb, the more like a child I felt. A short time after graduation, three friends and I celebrated with a week long trip to Hawaii. On our flight there, we struck up a conversation with a flight attendant who talked to us about her job and suggested that we consider a career with the airline. I was completely discouraged when I heard that one of the job requirements was height of at least five feet two inches. I found it difficult to discover that, due to my short stature, there were certain professions that I would never have the opportunity to experience. Regardless of the justifications for the height requirement, it reminded me that I was not part of the majority, further stripping me of normalcy.

Heightism as a Social Worker

As a social work intern in my current agency, I remember the first day that I met my fellow social work student interns. Before the end of the day, we were all having a discussion about my height, something with which I am familiar. After expressing shock that I was 28 years old, they asked me how tall I was. Before I could tell them, one of the interns guessed as she laughed condescendingly, "Four feet five?" After their fascination dwindled, the day continued as normal. Inside, I felt increasingly silenced and misunderstood.

Because the fax machine at my internship is located above my sight range, I use a stepstool to see the numbers. One of the support staff members laughs hysterically whenever she sees me on the stool. At one point, two of the support staff told me endearingly that I was the agency's "official child" because I was so small. At the time I did not take offense because I knew they meant no harm, but I do feel sad that it is representative of how the larger society places such an emphasis on height. It is a physical attribute or characteristic that can easily and safely be made fun of without worrying about political correctness.

For a recent class assignment, I had an interview with the agency director, who is a Licensed Clinical Social Worker (LCSW). She explained to me how she arrived at the position she currently holds by telling me the story of the first job she turned down. The program director who interviewed her was a tall, mysterious lady whose office was like a dungeon and who had a dwarf as an assistant. She later explained that the situation was too "bizarre" for her. I wondered where the "bizarre" part came from. Had the program director not had a dwarf for an assistant, would her room still be described as a dungeon? Or was the tall, mysterious lady the one who gave the bizarre impression? Maybe it was my heightened awareness of the

stereotypes of dwarfs that led me to believe that her reference to the scene's "bizarre" quality was due to the dwarf. Because I was too embarrassed to ask, I will never know the answer to those questions. But what I discovered was that my personal experience with heightism has created in me a sense of heightened awareness and suspicion of any comments that may appear to attack the very core of my sensitivity.

Heightism and the Media

As the dominant view of normalcy is largely shaped by television, movie, print, and radio representations, the media have contributed to my negative self-perceptions and experiences as a short woman. What I have seen in media is that height is connected with elite ranking, from entertainers to politicians to royalty. There is a sense of competency and attractiveness that is associated with being tall, and a sense of ineptness associated with being short. From television shows to commercials to movies, people of short stature are often depicted as less sexy, less competent, less intelligent, and more childlike. Characters of short stature are usually used as comic relief. Usually the counterpart of a taller more handsomely depicted main character, the shorter character is the brunt of all jokes, often centering around height.

One of my favorite shows growing up was *The Fresh Prince of Bel-Air*. Will Smith's character, Will was the funny, charming, and most importantly, tall main character of this sitcom. His male counterpart, cousin Carlton, who was much shorter than Will, was depicted as uptight, nerdy, and socially inept. He served as the comic relief, often taunted by Will over his short stature. He was always outwitted by the more clever Will and was often seen storming away in frustration. Supporting the dominant belief that short men are less appealing, he was usually rejected by women.

The movie *Twins*, starring Danny DeVito and Arnold Schwarzenegger, tells the tale of fraternal twin brothers separated at birth. For comedic purposes, the film relies on the polar opposite qualities of the brothers. Arnold Schwarzenegger is portrayed as the "good" brother, possessing intelligence, strength, and physical attractiveness. Danny DeVito, on the other hand, is portrayed as incompetent, weak, and physically undesirable. One of the main physical differentiations of the two is height, as Arnold Schwarzenegger's character stands a foot taller than the character of Danny DeVito.

In a *Seinfeld* episode, George Costanza, the shortest of three main male characters, meets a woman whom he later begins to date. As George had met this woman when he was wearing a pair of shoes with a two-inch sole, the entire episode focuses on his efforts to continually wear those shoes at all future social occasions so as not to lose those extra inches. He soon has to figure out a way to wear the same shoes to a wedding to prevent his date from noticing the loss in height. The episode made light of the common pressure to live up to male height expectations.

Although height is used often as a way to create comedy in the entertainment industry, heightism is also seen through news media. The most recent example of this was seen in the 2004 Presidential Debates. According to the many news programs, certain regulations were to be enforced before both candidates would be willing to participate in the national debates. One of the main criterian for the incumbent, President George W. Bush, was that the televising of the debates would depict both candidates as equal in height. This way, no one candidate would appear taller than the other. President Bush felt that, due to John Kerry's obvious height "advantage," the debates would ultimately be unfair. Height as a criterion for competence and power was largely emphasized to the nation during the debates.

These types of media representations have had two effects on me. First, they have served as a constant reminder of the dominant perspective that tall is better. Second, they have served as examples for the ways men are discriminated against on the basis of height. Therefore, in voicing my personal experiences with heightism, individuals usually respond with, "I don't think height really matters for women. At least you're not a short man." While I wanted to fight height discrimination toward both and women, I found it increasingly difficult to justify my own oppression in such a hierarchical context.

Silence

In looking at the levels of discrimination I faced having multiple identity roles, I began to recognize an underlying theme: the role of silence as an oppressive mechanism. As a fourth generation Japanese American, I possessed a good deal of guilt that came from knowing the sacrifices of my family, particularly the internment of all of my grandparents during World War II. A life-altering experience that would eventually last for more than two years, my grandparents, along with other Japanese and Japanese American citizens, mainly Nisei (second generation Japanese Americans), were transported like cattle to the Santa Anita Race Track Stables where they awaited their final transport to one of ten internment camp sites throughout the country. This dehumanization took away any remaining voice that they possessed, being minorities in a time and place when racial diversity was not embraced.

As the granddaughter of internees, I felt like I had more anger and resentment toward the United States and its government than those who actually experienced the internment. The internment was a piece of history that was hardly discussed openly by those who lived through it. Growing up, I felt that the entire generation dealt with their emotions in silence, ashamed of how they were treated but also afraid to remember their own painful past. I only began to learn of the internment camps through my parents and small sections of U.S. textbooks. I first sat down and talked with my grandparents about their experience in 8th grade for a school report. I realize now that those were the only moments when they were able to articulate any feelings associated with the internment. Unless they were asked, they kept it to themselves. And hardly anyone ever asked. As I grew older, I became more interested in the experiences of my grandparents and other Japanese Americans of that generation. As I began to ask more questions, not only to my grandparents but to other Nisei, I began to see similar patterns of responses. I began to hear a familiar sense of sadness in their voices, though their words remained positive. They always emphasized that they were loyal and proud American citizens despite what had happened. I always felt that there was a communal need to prove their loyalty more so than other citizens. In proving their loyalty, they remained silent, valiantly accepting their country's decision to "protect" its citizens.

Knowing that my grandparents had been American-born citizens betrayed by the U.S. government contributed to my decreased sense of entitlement as an American as well as to my enormous respect for their courage and strength. To lose their homes, belongings, and lives as they once knew them, and to continue to work hard and provide for their family, was something that was difficult for me to conceptualize. How does one overcome such an injustice in silence, the way most of that generation had done? How does one not speak out after experiencing such hostility? How does one maintain a consistent positive outlook? Now, as an Asian American in an era of new perspectives, I look back at the racial discrimination they faced and find it difficult to understand how easily it was accepted. But I now understand that I live in different circumstances that allow me to have

more voice as an Asian American than they ever had. For one, I live in a much more culturally diverse population where racial diversity is praised. For another, I live in a city where I am an ethnic majority. Lastly, increased education of racial discrimination has set the path for access to multiple Asian American activist organizations that did not exist during the 1940s.

Looking at the contrasting Asian American experiences of myself and my grandparents, I now understand why their silence was so prevalent. As a person of short stature, I am not part of a majority. I am not part of a height-focused group culture. Not only do I feel isolated as a short person, but I also feel the lack of pride that I associate with being an Asian American that only recently emerged with increased education and advocacy on the part of activist groups. Due to the limited amount of education on heightism, I do not have access to resources that address my needs. How can I speak out against the discrimination I experience as a person of short stature when it is not largely recognized as a form of discrimination?

Just as my grandparents had silently accepted racial discrimination, I too find myself accepting heightism in silence. Part of this silence comes from my own shame and hesitance to acknowledge my difference. Often referred to as psychological colonization, this phenomenon socializes individuals to internalize their oppression and conspire with the dominant culture's ideology and social system (Adams, Bell, & Griffin, 1997). Just as my grandparents have experienced psychological colonization as Asian Americans, I too have experienced it as a person of short stature.

Further internalizing my oppression were my feelings of guilt. My family's hardships and triumphs made it difficult to think that my own problems were of any huge significance. Comparing my personal experience of oppression to the experiences of others had eventually led me to minimize and silence my feelings. Instead of recognizing that my feelings of oppression were valid, I only saw them as insignificant in comparison to the experiences of my grandparents. What I was experiencing was a type of internalized oppression, a phenomenon in which members of oppressed groups support the hierarchical structures that the dominant culture has established (McDonald & Coleman, 1999). In some forms, internalized oppression can result in members of one oppressed group competing with members of other oppressed groups to determine who is higher on the hierarchy of oppression (McDonald & Coleman, 1999).

My Search for a Shared Culture

The silence that I experienced was due in large part to dominant cultural views, but also created from a lack of shared culture. Just as I felt isolated during my first-year teaching experience, I felt a subtle isolation in terms of physical difference throughout most of my life that intensified in college and continues today. My need to integrate into a height-centered culture led me to my first encounter with an organization called the Little People of America (LPA). Although I had heard of the organization, I had never thought to attend a meeting. Firstly, it seemed inaccessible since I did not know anyone personally involved in the organization. Secondly, most of what I had known about LPA revolved around issues of dwarfism and dwarf culture, issues that I had little knowledge about. Besides having little knowledge of dwarf culture, I was also fearful of the stigma attached to being labeled a "little person" as I was as much affected by the dominant culture's negative view of dwarfs as the majority of the population.

The day I decided to attend an LPA meeting was the day I met Diane. A friend of a friend, Diane was a little person. After casual conversation, she suggested to me that I attend an LPA meeting. She informed me that LPA

was not restricted to dwarfs and that the only requirement was height under five feet.

Within a few months I attended my first meeting. Apprehensive and vulnerable, I went with my friend Val for support. Not knowing what to expect (but remaining somewhat hopeful that I would see a few people like me), I pulled into the parking lot. The first man I saw was a dwarf. Before long, I entered the meeting hall and realized that I was the only non-dwarf present. I learned later that there are approximately 200 types of dwarfism, the most common being achondroplasia, which is "characterized by an average-size trunk, short arms and legs, and a slightly enlarged head and prominent forehead" (LPA, 2005). The majority of the members at this meeting were achondroplastic dwarfs. As I scanned the room for any eye contact to initiate conversation, I became increasingly disappointed that, as a new member, I was not welcomed as warmly as I had anticipated. That egocentric viewpoint was soon replaced by the acknowledgement of the vast amount of discrimination they face on a daily basis. Whereas I experience heightism in subtle forms, they experience it blatantly every day. Just as I was curious about them, they too were curious about me. Eventually, I was able to meet and talk with some people. Although I felt some commonalities with the other members, I definitely felt I did not belong. I felt that they belonged to a culture that I did not share and that they experienced discrimination far more intense than the subtle height discrimination I faced.

After the meeting on our way home, Val informed me that one of the members asked her what "type" I was. At that moment, I felt a sense of panic run through my body. The reason I felt awkward at the meeting was because I did not identify with the dwarf culture. I had made a mental distinction separating "them" from "me," and although I felt out of place, I was secretly grateful that I was not "them." As I stood taller than all the other members, I felt a sense of superiority that completely supported the socio-political heightist hegemony. Once I recognized this feeling of superiority, I immediately felt like a hypocrite. This served to only further complicate my attempt to attack and address heightism as a valid source of discrimination. How could I fight heightism when I, too, was a perpetuator of its ideology? Only now do I realize the extent to which psychological colonization and internalized oppression can disempower and create self-doubt. At the time my shameful thoughts emerged, I felt that I lost any type of credibility to be a spokesperson for the heightist cause. Looking back, I now realize that the internalized oppression operating within me created such insecurity so as to use the very same oppressive ideology to give me comfort and reassurance. By allowing myself to feel more "normal" than the other members, I demonstrated the impact of our dominant cultural values and how it defines normalcy.

Reasons for Entering the Social Work Field

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession's focus on individual well-being in a social context and the well-being of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living. Social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice. (NASW, 2005)

My constant and continual experience with heightism, along with a lack of universal acknowledgement of its existence, had led me

to feel silenced and powerless. Just as my grandparents had experienced a lack of voice and power, I too had experienced my own oppression as a person of short stature. During my first year teaching, the discriminatory comment made by the assistant principal and the experience surrounding it opened my eyes to the fact that I truly felt silenced. I needed to regain my voice. But how was I to do that? One of my realizations occurred after attending LPA. During that first meeting, I began to recognize that heightism had varying levels of oppression, most of which had been continually ignored by the majority of the population. Until then, I had never seen first-hand such extreme levels of marginalization. I began to feel angry with the social injustice that had continued to go unaddressed. I eventually decided that I could use my passion for change to build and strengthen my voice, while helping others in the process. I understood oppression and discrimination and began to develop a strong desire to help others who were oppressed and lacked voice. I decided that furthering my education in a field that emphasized diversity would be the beginning of my path to acquire a voice that had never been given a fair chance to develop.

Conclusion

At the beginning of break, I approached the professor. By this time, after much reflection, the emotions had begun to appear at the surface. Tearful, frustrated, and misunderstood, while at the same time fearing that my feelings would be dismissed as trivial, I informed her of how the comment made earlier had affected me and how the use of "midget" was derogatory. The professor looked me in the eyes and said, "I'm so sorry." I was relieved that my emotions were not merely dismissed but still frustrated and disappointed that these prejudiced views were present, not only in society in general, but especially in the social work field.

Looking back now, I realize that the expectations I had of my professor were unrealistic, as we are so affected by the dominant cultural perspective and norms. If we do not experience first hand, or we are not taught about specific forms of discrimination, how are we to understand that they exist? And even when we experience discrimination first hand, we often perpetuate the oppressive dominant ideology in the form of internalized oppression, just as I had done during my first LPA meeting. I understand that this rationalization acts as a double-edged sword, for it allows me forgiveness of hypocrisy of succumbing to the very dominant views I criticize, while simultaneously reinforcing my own silence by justifying individual comments as part of a larger cultural problem. But as members of an oppressed group, we must create our own personal ways of overcoming barriers and dealing with challenges within the oppressive context. For me, I will use this double-edged sword with caution, knowing that it may facilitate a loss in voice only if I allow it. But due to its existence, I must work harder at raising awareness on a larger scale rather than silently accepting heightist comments as belonging strictly to the individual who made them. I know that I must not allow heightist comments to diminish my voice, but rather to act as a catalyst to develop a stronger one, one, where I can speak on behalf of others who face the same type of discrimination. I can use my experiences to accomplish what I initially entered the social work field to do: educate and advocate.

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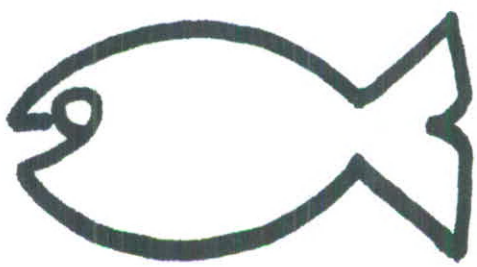

Seventy Years Of Mistrust: Elderly Survivors Of Sexual Abuse

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As a pediatric social worker in a large suburban hospital, designated as a Child Abuse Diagnostic Center, the author was no stranger to dealing with sexual abuse. However, her view of the issue was changed in later years after developing expertise as a Gerontological Social Worker. It was then that the long-term effects of child sexual abuse truly came to light as she dealt with three mature women who had been sexually abused in childhood. These women had been raised during an era when public intervention was non-existent. This article presents their stories.

I have been working with the elderly in some fashion since age 19. My current work in gerontological practice brought me in contact with a 63-year-old woman who, after several sessions, revealed that she might have been sexually abused in childhood. This revelation led me to recall the fact that I had previously dealt with childhood sexual abuse in elderly clients. In fact, two more cases in particular came to mind. I had written and published in this area, however, never regarding the impact of abuse on older adults.

My first job as an MSW social worker, twenty-five years ago, was as a pediatric social worker in a medical center that served as a Child Abuse Diagnostic Center. It was a rude awakening to deal with perpetrators who sexually abused children as young as two months old. Although much has been said of late regarding child protection workers, my hat continues to go off to those who are challenged with the job of protecting society's vulnerable children.

Recently, in my work as a private practitioner and geriatric social worker, my "tables have been turned" as I worked with women over 60 who had experienced sexual abuse in childhood. Their stories reflect an era far different from the one I worked in as a new MSW. I began to investigate the consequences for mature women who had survived sexual abuse in their childhood years. The literature was appallingly scarce and practice recommendations scarcer still.

Incest has been defined as sexual seduction, molestation, and/or rape of a child by an older relative or trusted friend of the family, or any kind of exploitative sexual contact or attempted contact between relatives, no matter how distant, when the child is under the age of 18. Generally, in defining the concept of incest, it is important to remember that incest is always an infringement upon the rights of the child, and many adult survivors of incest do not recognize this power differential and often blame themselves for what has taken place (Dziegielewski, & Resnick, 1996).

The Case of Mrs. "M."

Mrs. M. was a wheelchair-bound, 80-year-old, divorced female admitted to an assisted living residence when her three sons could no longer care for her in her home. She was diagnosed with Impulse Control Disorder-NOS due to frequent, angry outbursts and occasional physical violence (hitting and punching) towards staff and other residents. She was incontinent of urine and occasionally incontinent of feces. Her sons described her as an angry, difficult woman; nevertheless they remained close to her and were involved throughout the process of her care.

I was first called in to evaluate Mrs. M. due to her angry outbursts and inability to cooperate with staff. The Director of Nursing was particularly concerned about Mrs. M.'s incontinence and refusal to let staff bathe and clean her, regardless of the fact that she was unable to maintain her own hygiene unassisted.

After several sessions, Mrs. M. revealed to me that her inability to accept help with personal hygiene, especially as it related to the washing of her "private parts," stemmed from having been sexually abused by her father in childhood. She stated she did not want anyone touching her and would wash what she could by herself. She indicated that when staff was hurried during her baths, it resulted in physical pain for her. I explained to Mrs. M. that women who were sexually abused as children are often 'at war with their bodies' (Blume, 1990). Touch, any touch, is frequently misinterpreted and reenacts earlier violations. Women such as herself often avoid nakedness at all costs, avoid the use of public bathrooms, shower in their clothes, or avoid showering and bathing altogether. Mrs. M. could relate to these experiences and stated for the first time in her life that she did not feel alone. When she was young, she was unable to talk about the abuse and Mrs. M. believed that the abuse was somehow her own fault.

I asked Mrs. M. if I could alert the Director of Nursing as to her history (to enable her to better direct her staff without revealing Mrs. M.'s secret) and Mrs. M. agreed. Over the next few months, Mrs. M. was able to describe some of the childhood sexual abuse and ventilate enormous amounts of anger at the perpetrator. Since writing was difficult for her, I instructed her to compose mental letters to her father (long deceased) vocalizing her feelings about the abuse. She was able to scream out her sense of betrayal at him and at her mother, whom she felt did not protect her. Over time, Mrs. M. was able to establish a good working relationship with one aide in particular, a young, soft-spoken, gentle, immigrant woman.

The impact of Mrs. M.'s sexual abuse resulted in nursing care problems in a facility setting. Due to the nature of her illnesses and loss of mobility, Mrs. M. was institutionalized, compromising her ability to protect her own body from invasion. "For the incest survivor, to whom privacy is a primary need ...this already concealed act often requires absolute seclusion or a place that is totally within her control, her own space, her own home...using the bathroom is...fraught with risk and the danger of invasion." (Blume, 1990, pp. 199) Blume (1990) also addresses the anger of the incest survivor: "At the other end of the continuum is the incest survivor who is angry all the time...she may react especially strongly to current violations of her boundaries, perceived or actual" (Blume, 1990 pp.134-135). Mrs. M. reacted to violations of her boundaries to the degree she was able (lashing out by punching and hitting staff and residents) in a setting which is far more public than one's own home where she did not feel safe revealing her childhood secret.

I spent years working in care facilities for the aged. I presented In-Service education to staff, professionals, and students. I believed I understood how difficult it was to reside in a facility, to live in a place one calls "home," that is not home but is clearly an institution. The daily struggle of being intimately touched by others whose touch was not loving engulfed me. In my life, touch was frequently loving and was always at least empathetic and caring. With all of my training, with all of my experience, with the expertise I knew I had, I neglected to really comprehend the impact of violation. Mrs. M.'s story (as well as those that follow in this writing) forced me to search my soul and all its humanity in an attempt to understand the plight of these women beyond the professional sight by which I had seen them.

Mrs. M.'s loss of control was more than a loss of habitat, a loss of independence, and a loss of functioning. Her loss was a loss of a necessary defense mechanism, control of her memories. In a public setting, she could no longer block the painful reoccurrences of her abuse. My job was to help her differentiate these current experiences from the past. I was also able to demonstrate to her, through my caring, that she was lovable. In accepting my empathetic response to her, she opened herself up to the warmth and caring of others.

The Case of Mrs. "S."

Mrs. S. was a 79-year-old widow, diagnosed with major depressive disorder: moderate and recurrent. She resided with her granddaughter, her granddaughter's husband, and their four children. Mrs. S. married at age 16 and, due to gynecological problems, was unable to have children. She adopted three girls and spent her energies raising them. She never developed a close relationship with her spouse and stated he was an angry, abusive man.

Mrs. S. stated she had been depressed as far back as she could remember. Week after week she remained tearful, hopeless, and helpless. She suffered from severely damaged self-esteem that was never fully repaired. Her childhood sexual abuse was first relayed through the description of her nightmares: recurrent dreams in which she was being chased by a tiger. She would wake in a panic and stated she was generally bathed in a cold sweat. Over time, Mrs. S. revealed that at four years of age, she remembered being lured into the basement by her stepfather and afterwards received a beautiful new pair of Mary Jane shoes. During our sessions, Mrs. S. repeatedly stated, "Nothing in life is free."

Mrs. S. also revealed that when she finally divulged the abuse to her mother, she was ostracized and forced to leave. This resulted in an early marriage and a final "escape from my stepfather." Dreams played a pivotal role in the world of Mrs. S. She relayed having dreams of her dead mother beckoning her to come to her. She stated that her sister had also been sexually abused as a child and that recently both had revealed the details of that abuse to one another.

Because Mrs. S. was unable to become pregnant, she was never certain as to whether or not her gynecological problems were a result of the abuse. I worked with Mrs. S. for three years, and developing trust was enormously difficult for her. Throughout my work with Mrs. S. the probability that her inability to bear children was most likely tied to her abuse as a four-year-old child plagued me. I couldn't help but dwell upon human fragility, particularly fragility of the body. Mrs. S.'s dreams of giving birth were shattered through the early violation of her body, yet she made the children of others her own, adopting her three daughters.

This experience helped me enormously in coming to terms with the weakness of the body in juxtaposition to the strength of both the mind and the soul. I now use this growth experience in my own work with the physically ill, frail, and dying and teach my students to find strengths even in the seemingly weak. I encourage them to help their own aged, ill, and/or dying clients recognize that where the body may be vulnerable, the spirit and will are often strong. I currently teach in a sectarian university and incorporate faith, the spiritual, and the religious into my practice, my teaching, and my personal life when appropriate and possible. Unfortunately, such insights often evade youth. Early in my social work career, I covered the critical care unit of a hospital in a residential beach community. During my first summer there, four young men were admitted into critical care after sustaining spinal cord injuries. I was young, they were young, and none of us could focus on strengths worthy of development beyond the physical. Working with elderly, abused women reinforced for me that who we are transcends what we are.

Armed with this insight I have learned to focus more on thoughts, feelings, past accomplishments, and contributions, rather than on the loss of capacities, frail physicality, recent dependencies, and losses when I work with the aged population.

The Case of Ms. C.

I am currently working with Ms. C., a 63-year-old, single woman who presents with low self-esteem and episodes of extreme anxiety. We have been working on issues of decreasing her anxiety as well as increasing good feelings about herself and her capabilities. Ms. C. states she believes she was sexually abused as a child, and she thinks the perpetrator was her maternal grandfather. Ms. C. is a very talented woman who was a teacher for many years and is an artist and a poet. Her paintings are beautiful, serene depictions of animals and nature. Her poems are simple yet powerful and create soft, gentle images.

I hesitated telling Ms. C. about the writing of this article. Finally, I decided to throw caution to the wind and stated I wanted her permission to tell her story. Not only did she excitedly tell me "of course," she asked if she could write her story for me. In this simple conversation, Ms. C. reminded me that we do not heal others; we provide the means for them to heal themselves. The following is Ms. C.'s story, related in her own words:

> "When I was a young child I believe that I was sexually molested by my grandfather. I had this memory that I heard the crackling of the furnace in the basement when I was molested. Later, I would have nightmares of a bear chasing me, so I locked the doors and he couldn't come in. There was a man in the house around the same time standing by the china closet. He was able to take his teeth out of his mouth. That frightened me and I moved away from him. Another night, there was a nightmare...when I walked down the stairs into the cellar; hundreds of huge spiders fell on me. I struggled and they fell off.
>
> A nightmare that followed me into adulthood is one where the gnashing of teeth comes out of a face with a smirky look. One of my strong nightmares involved being in the presence of coffins and corpses. It never failed that the corpse would get out of the coffin looking for me, and chasing me around the room. I did not want to touch him. One day, when I was complaining about my nightmare, my priest told me to touch that disgusting sight and I did. The corpse disappeared. Corpses no longer chase me. I still dream of them but they stay in their coffins.
>
> One time I dreamt of my grandfather in a coffin but he didn't get up and chase me. I remember he was an alcoholic and used to hit my grandmother. My sister once asked me if we were ever abused, I said yes. 'Was it our dad?' she asked? 'No,' I told her, it was our grandfather.' She ended the conversation."

Ms. C. and I have been working on allowing the grown woman in her to protect the vulnerable child and for the grown woman to recognize her talents, worth, and power. I respect her right to deal with the issues of childhood sexual abuse to whatever degree she finds comfortable. McInnis-Dittrich (1996) addresses the need to "respect the client's right to refuse therapy" when childhood sexual abuse has occurred (p. 172). "True empowerment for these older women may lie in therapists respecting their conscious

choice not to revisit the abuse" (McInnis-Dittrich, 1996, p 171).

Time does not heal the impact of child sexual abuse, and the effects appear to be life-long in nature and may require the development of specific services for this population (Allers & Benjack, 1992; Blume, 1990). Walter (1992) talks about several elderly survivors of sexual abuse with whom she has worked, all of whom exhibited anxiety and depression. "Our societal stereotype of the elderly as unlovable, unattractive and bothersome does nothing for an elder's waning self-esteem. Additionally, in an effort to preserve self-esteem, society encourages the elderly to see themselves in terms of who they have been. Unfortunately for the elderly survivors of incest, this includes being a victim" (Walter, 1992, p. 15). Survivors must be reminded that they have indeed survived as a result of inner strength and fortitude. They must also be reminded that who they were is not who they are.

These older women have lived full lives that have taken them way beyond their abuse. We all grow past our experiences of youth despite the fact that those experiences are incorporated into who we are. I am reminded by these women and their stories that living is perhaps our greatest teacher and that I too continue to learn, grow, and develop regardless of my many years of experience. I dedicate this article to women everywhere who have had the courage to survive sexual abuse in childhood, and hope that those who struggle continues will find a way to rise above.

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Living in Community: Lessons From the Commune

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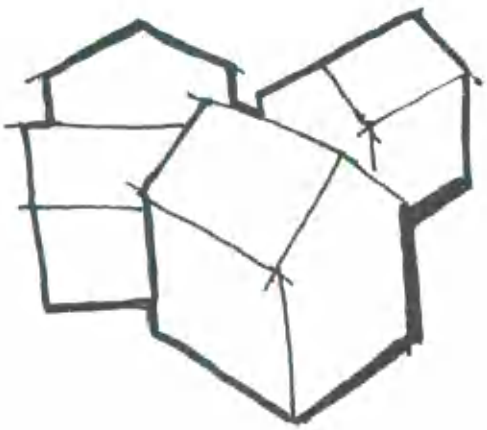
The revelation that an acquaintance of the author's had also lived on a commune initiated a period of reflection and research on commune living. The author found that commune life embodied much that is optimistic and progressive about social work values. While some of the back-to-the-land motivation came from the 1960s counterculture, communes were also linked to the idealism of the 19th century and in a roundabout way to its expression in social work.

Compassion before Profit
Creativity before Conformity
Spirit before Materialism (The Farm, n.d.)



Summer 1974 was a long time ago – Nixon was president, the war was over, and my first husband and I were living on a commune. How easy it was for me in the '80s and '90s to forget I'd ever been there – just as I'd forgotten my cork-soled platform sandals, long homemade granny dresses, six-cup yogurt maker, Tim Hardin records, and other reminders of that decade. Did we really live off the power and water grid? Did we really bathe at a nearby lake? Did we really meet regularly for a Women's Consciousness Raising Group? Yes, we did – and it was a glorious time.

I recently met another social work professor, and in the course of conversation we touched upon young people attracted to laid-back communities. I mentioned that I understood that impulse; I too had lived on a commune in the '70s. "Which one?" she asked, "I lived on The Farm for a while!" This began a cascade of reminiscences, both over lunch and for days afterwards. I began to wonder: how many of us in social work and social work education were rural communards at some point, and how does that experience shape (or not) our orientation to practice and teaching? My guess is that there are more than a few of us, and that above all, the commune experience, if it was a good one, has reinforced our progressive worldview and communitarian values.

These values seem to me to be at the heart of social work. When I teach social work history, we learn all about the Elizabethan Poor Laws, Speenhamland, outdoor and indoor relief, scientific charity, and modern social welfare policies. But the text we use (Trattner's *From Poor Law to Welfare State* 1999), is also, fundamentally, about values. Have we absorbed the Hobbesian philosophy that people must be controlled to govern their

natural greed and urge to fight? Then we will hardly trust that people could agree to live cooperatively without strife over possessions and without a strong military/political leader. Do we think human nature is essentially lazy, perhaps grasping? Then we will surely believe, as some entering students do, in the principle of 'less eligibility' (that public aid must always be less than the poorest paying job). I believe that long before the public can support policies that provide universal health or child care, or even non-stigmatizing aid, the public needs to feel the values of trust and compassion. It is easy for conservative politicians and pundits (and so clear in recent presidential elections) to find some examples of welfare abuse and use those in a cynical way to condemn the whole progressive social agenda. But when you have seen the good in human nature, *especially* at a community level, you know that that cynicism, and the suspicious, withholding, anti-poor agenda flowing from it, is wrong.

Our commune was located in the rolling farm country in South Central New York State. The college town of Ithaca formed the hub that brought all of us together; many residents of the commune were artists or craftsmen (yes, all male at that time!); others were friends of friends. My husband and I knew the potter on the farm from our Cornell days. He had moved to the commune after graduate school and had been there several years, while we had been holding down jobs in New Orleans, saving our two salaries, and dreaming of getting out to the country. We had eagerly scanned the ads at the back of *Mother Earth News* each month, waiting for the right combination of enough savings and a compatible commune opportunity before we made our escape from the city. Our first stop, found in those ads, turned out to be less a commune than a rural landlord-tenant situation. It was there the potter visited us and suggested we come back to New York State and visit a real commune – one made up of people roughly the same age (somewhere in their twenties) and roughly compatible (back-to-earth, politically liberal, artistic, hippies). We packed our few belongings into the car, said our goodbyes, and headed for the rolling hills south of Ithaca.

The commune had been running for three years before we arrived and comprised 180 acres of hilltop land. It was an extraordinary place. You drove up the rough dirt road that left the paved road down at the dairy farm below and began an ascent through sugar maples, open meadows, and old orchards. You could see the main dining/living cabin long before you arrived at the grassy parking area, and as you parked you might spot a round yurt or two through the trees. There was no electricity and no water on the land, but there was gas. My husband and I had been using only a Coleman stove and lantern for weeks, so we found it a luxury to have a dining room heated and lit by propane. There was even music, powered by car batteries that were rotated in and out of the commune pickup truck. So cooking was easy, but refrigeration was hard. Luckily it was cool inside the cabin even in the heat of summer. Luckily also the commune was completely meatless. Perhaps the biggest challenge was water. Because the commune was at the top of a hill, it was impossible to install a straightforward hand pump, or that would have been done long ago. We relied on the farmer down the road for water. What a gift that was, one almost impossible to repay!

I was telling someone about the commune recently, and she asked: 'How did you pay for it – who were you renting from?' A valid question, and a valid assumption that we young rebels would have just been scraping enough money together to meet a modest rental. But actually there was a simple but sophisticated ownership structure to the commune, which was buying the land. The founding members of the commune had provided the down payment. Each new

person or couple arriving was expected to find a way to contribute, though there were absolutely no rules about that, or about how much should be given. Everyone paid what they could to the communal checking account; checks were disbursed, after the basic necessities of the mortgage, propane, and food were met, according to need. So it was actually rather communist— in a theoretical sense—from each according to his or her abilities/to each according to his or her needs (though not what communism had become in the 20th century).

But any group living together must work out a way to keep going that seems fair. It turns out doing dishes was the only chore we assigned. We used and stacked up dishes until they were all dirty, and then did them all at once. Since our potter made the dishes, there was a huge supply – the stack could number in the 50s or 60s by the time the supply ran out. So no one ever *volunteered* to do dishes – this task was strictly rotated!

In contrast, dinner at the commune worked in a beautiful and mysterious way. The tradition was that someone would have an inspiration around 4 p.m. about what to cook and then ring the bell briefly. That was a signal for a few helpers to show up to cut and stir and knead. A longer bell peal announced that food was on the table. Unlike the dreaded dish-doing, dinner was never routinized; there was no schedule. It was completely up to each person when and how often he/she wished to be the head chef, the *sous chef*, or merely the diner.

This issue of assigning chores, or just letting them flow, is at the heart of communal living decisions (and indeed related to values about human nature and whether people will work, if not forced to by hardship). What did other communes do to keep themselves fed and clean? While the literature on communes is sparse, as we will see, one sociologist who spent some time doing field work with West Coast communities during the late '60s and early '70s asked the same question (Zicklin, 1983). His chapters on work and on economics were fascinating to me, because it appears that, like our group, the commune ideal was to have no hard and fast rules on this subject. Did commune dwellers sometimes take advantage and loaf? Yes. How much did that bother the others? It depends on what you considered work and whether you actually found work to be fun. One quote from a satisfied communard could have come from our commune (except for our schedule around doing dishes):

> *The sharing of work and responsibilities has come to us with surprising lack of hassle. We have no schedules, rotations, assignments, rules, etc. – it's all voluntaristic and it all gets done. Everyone is pitching in, working hard, not working hard... And, as the whole work-play distinction tends to blur, strikingly much of the work is a joy! (p. 120)*

Zicklin (1983) also found that the communes with the most "affective ties" and therefore the most solidarity had the fewest money problems. Not that any communes he studied were rich – they weren't founded to make money. But some money flowed in from outside jobs, crafts, or cottage industries like bee-keeping or candle factories. And expenses tended to be very low. Communards certainly felt no need to have the biggest, best, or newest of anything, in pointed contrast to their parents' generation and subsequent generations. Given the emphasis on individualism and consumption in the rest of the world, Zicklin seems surprised that "it is all the more interesting to note that so little conflict is in fact attributable to economic and financial issues in our sample communes" (p. 150). I find it interesting when I teach the history of social welfare that the doctrine of

"less eligibility" has such a logical sound to it. Many students will agree at first that people would not work if they could get a handout that would cover the necessities of life. Yet the evidence shows, both in society and in the studies of communes, that most people actually want to and will work. And I like Zicklin's phrase affective ties – I think the more we can promote affective ties across diverse groups in our society, the more willing we will be to support those groups during times of illness or loss that make work impossible.

We developed strong affective ties – so much so that I used to dream of the commune after I left. We had such a variety of people that staying within the commune for a social life would have almost been enough. We spanned White ethnicities and religions, from Italian Catholic to Greek to Jewish to Anglo-Saxon Protestant. We had college graduates and college dropouts – in sociology, psychology, civil engineering, art. Most people had some connection to Cornell and Ithaca, though we were almost closer to Binghamton. New York City was never far away, either in space or in our thoughts. At least three people were from Brooklyn, Queens, or Staten Island. People's parents or siblings would drive up from New York for the day or weekend (depending on their age, attitude towards outhouses, and comfort with sleeping bags in a loft). We took the *New York Times*. So we were not cut off.

The women met for a consciousness raising group. We would make dinner, brew tea in the heavy pottery mugs, and settle long discussions of life and love. When I look back now, I can see just how similar our roles were to women of the prior century: we spent a fair amount of time gardening, canning, cooking, baking, heating water on the stove, cleaning clothes by hand, and so on.

The issue of gender is never far from any consideration of commune living. In the absence of modern conveniences everyone is going to have to work, and gender is likely to play a part in the kind of work chosen. This was true whether the commune consisted of six or of six hundred members. Agnew's (2004) reflection on communes points out that while there were approximately one million young people living in communes during the 1970s, there were another three to four million living close to the land in smaller homesteads of two to three couples. Her book is a memoir of one such venture in rural Maine. She had all the drawbacks of rural, waterless, electric-powerless living, but without the spirit and heart of a commune to make it more bearable. She and her husband moved in to their new cabin in deep snow, and from then on rarely got warm or had enough to eat. She finally could not take any more "not so genteel poverty" or cold, and moved south to become a writer and English professor. She was not happy that the women in these '70s back-to-the-land ventures did most of the interior cleaning, cooking, and washing, while the men (in her book) did construction and wood chopping.

Most commune women I knew did not perceive any major problems in the balance of power between genders – just as work "flowed" and tended to get done, people went with their strengths, whether those were physical, social, artistic, or practical. But was that part of the trend found by Martin and Fuller (2004) in their analysis of power and equality in intentional communities: that women were more likely than men to report that the group was egalitarian even if other measures showed that it was not? Miller (1999) also explored the issue of gendered work on communes, and concluded:

> The fact that communes did not perfectly liberate women did not mean that communes were invariably no better than the large society on gender issues. The simple fact that many women lived in close proximity made communes an easy place for

> women's groups to develop, and consciousness raising among women (and sometimes men) was thus widespread. (p. 213)

We faced several fires involving the wooden yurt structures and the simple wood stoves, but otherwise we lived a safe life. One time state troopers had found a car deserted at the bottom of the hill, between our place and the dairy farmer, and traced the car to a burglary in Binghamton. They had to drive up to see if we were involved, but it didn't take long to clear us of the crime. Whatever they may have imagined about us, we were very peaceful and made income the old-fashioned way: with direct sales.

The core group of communards, including the two with checkbook signing privileges/responsibilities, were talented craftsmen beginning to build a reputation at state crafts fairs and beginning to make some income. There was a potter, whose thin porcelain clay bowls and light celadon green glazes were becoming famous in the area. There was a jeweler making amazing, tiny, replicas of carousels. There was the woodworker, turning out multi-hued chopping boards. The rest of us helped staff craft booths at fairs and festivals all over New York State. After the fairs each artist would put money into the bank account.

Deciding how to spend the money was a study in a New England town meeting (at least in my understanding of early town meetings). We sat around the table and made a case for each optional item. Did the main cabin need furniture? Could we make it ourselves? Had we exhausted the consignment shops? Did the potter need a new kiln? How much more pottery would he be able to fire, and did that mean the kiln would pay for itself soon anyway? Did someone's individual yurt need a roof – was it leaking, could it hold out another year with just caulk? When would we ever have enough to hire a company to come put in the two-stage hand pump to give the commune water? All things were discussed; these are the ones I remember most. I thought each was a great discussion. From my point of view, each idea was laid out, the evidence presented, and then the prioritizing began. We looked to reach consensus, not take a majority vote. So we kept talking until everyone saw things the same way. The potter really did need a kiln, and we really could and did caulk that one yurt roof to extend its life one more season. Just once a new (very young) resident ran out of the meeting close to tears. When I went outside and sat with her later, she said she didn't see why we had to argue like that about money – that we were all children of the spirit (I am definitely paraphrasing here) and that we should get along. How amazingly different our perceptions! Having been around people who *really* argued, I found the commune round-table discussions beautifully harmonious. Boisterous? Yes. People interrupting each other to advocate for their cause? Yes. But full of good spirit and respect, and finally reaching the only possible solutions, given our financial picture? Yes!

Our time at the commune came to an end for purely pragmatic reasons: my husband and I ran through our savings and needed to get jobs. Winter came and brought cold rains to our tent in the woods. We left and rejoined the wage society, remembering our friends at the commune with feelings of love and loyalty. Three years later the commune came to an end as well. Like us, people needed to move and get different jobs, different training. We heard from our friend the potter that the proceeds of the sale of the land were divided up among those who had lived there longest and contributed the most. It sounded eminently fair to us. I have recently found five of the founding commune members. Some continued to thrive as artists/craftsmen; the woodworker became a professor of English, his partner an advocate for accessible public transportation.

So what remains of the commune spirit in 2005? Given how little I ever talked about my earlier experience, especially not with my social work colleagues, I had to do some research and reflection on this. I have my memories of commune life, but did my experience there inform my eventual move into social work? I haven't been able to find much about social workers and 20th century commune life, but my research opened up a few doors that may point to a link. Amazingly, or perhaps not given the vaguely old-fashioned or even disreputable air about communes, there are only a handful of books on commune living, whether scholarly investigations or personal accounts.

There is even less on communes or intentional communities in the social work literature. There are only four articles with commune as a keyword in *Social Work Abstracts*; three are about communes in China, and one is about communing with nature on a rafting trip. There were two that involved intentional communities, but one covered Alcoholics Anonymous and the other a traditional religious community. The psychology and sociology journals contain many more references, examining issues such as family structure, gender roles, parenting, and motivation to live on a commune.

Occasionally, the scholarly impetus to examine commune life seemed linked to an interest in the sexual mores of the times. Rubin's (2001) review of "alternative lifestyles" in the *Journal of Family Issues*, for example, seemed to include communes just as a possible source of these open relationships. In the works he reviewed, however, there were no links between communes and swinging or group marriages. In fact, it was hard to see why the word communes had been put in the title at all as it had so little fit with the other two terms (swingers and group marriages)!

The misconception that communes were "hotbeds of deviant behavior, rife with drug use, unrestrained sexuality, and seditious political activity," to quote Aidala and Zablocki (1991, p. 105), was so common that the urban communards they studied would use the words collective or community instead of commune. It was actually refreshing to read their article, which showed that, contrary to stereotypes, activities such as drug use, sexual experimentation, participation in riots/demonstrations, and police arrests actually decreased after joining a commune. Commune dwellers, however, were more likely to have practiced yoga, participated in an encounter group, or been in a demonstration than others in their cohort (all considered "novel, nonnormative behaviors," [!] p. 105). There were some demographic differences between their commune sample and others in their age cohort, but less than predicted. Young people on communes were almost all White, most were from intact families, a higher percentage than predicted were Jewish (non-practicing), and 48 percent were from the middle class (similar to the 46 percent middle class in the national sample). While both commune members and their parents tended to have more education than the national sample, they were not from high status, high power professions, but usually from the "knowledge" occupations (teachers, nurses, musicians, artists, and social workers). Aidala and Zablocki were most interested in why people joined and whether it was because of alienation from society. They found that commune dwellers were actually *less* alienated and that their reasons for joining were more a search for a meaningful life and to bond with "others who agreed about important values and goals" (p. 111) than a rejection of the rest of the world. The authors point out that communes are common during periods of vast social shift, and the shift that occurred in the lifetime of the 1970s commune members was that from industrial to post-industrial society.

For a more classic sociological study of communes I turned to Zicklin's 1983 book on the counterculture. He traced the impulse to move to a commune to a "new naturalism," which included a belief in environmental purity, rejection of mass industrial society, and rejection of social conventions. In his view, the commune:

> ...erodes societally established boundaries between people. It is a rebuke to the capitalist, bureaucratic order of the larger society, for it places foremost importance on personal relationships, and it emphasizes trust, cooperation and shared concern rather than isolation, private gain and the application of impersonal procedures. It shows not only that the circle of the self can be extended, for this is accomplished outside communes in good friendships, but also that people can trust one another to the point of creating a common way of life. (p. 159)

He suggests that communards believed in the oneness of being and that they wanted their lives to be "expressive," in sharp contrast to the conformist, uptight lives of the rest of society. He marveled at the way communes could achieve solidarity without elaborate rules, explicit management, or penalties for leaving.

Zicklin (1983) was right that communes were not about money, and yet they were more than just an expression of the counterculture, which was his thesis. Miller, whose comprehensive 1999 exploration of communes developed from his scholarship on religion and utopian communities, goes beyond the surface of the counterculture and the '60s to trace the historical antecedents of communes. I wasn't surprised to see that some of the idealism and anti-materialism that was so clear in our commune had roots back to the Transcendentalists and, after them, to back-to-the-land romanticism and progressive socialism. Miller points out that even the hippie movement, far from being unique or ahistorical, had roots in the bohemian 1950s, the health food movement, pacifism, and earlier spiritual movements: "The yearning for personal growth and fulfillment rather than for conventional social achievement that characterized the 1960s outlook reflects a central force in many historic American communes" (p. 7). He acknowledges the many types of communes: spiritual, environmental, arts and crafts, reformer/radical – as well as other inspirations: forming a new type of family ties (perhaps closer than the biological ones), and the wish to see land left open, the way the American Indians had done, not subdivided into individual plots.

One thing I am very sure of from commune life is how good and decent people are. The core of the commune experience, and why it has never left me even though I left it, was the way we meshed as a group. We had been brought together by so many different impulses, and most people arriving, like us, knew only one other person. How did we live together in harmony when there were no written rules, no homeowner's association dues or condominium declarations? What a joy to live and share and be inter-dependent with other like-minded people. And how bitter to have to deal with neighbors or homeowners' associations if you are not with like-minded people. Did certain types gravitate to the communes, or was it the magic and beauty of the commune life itself? Would some of the bitter people I've met later in life in a homeowners' association have been different on a commune? And could those of us who lived in harmony then do it again with the same people? Further research is needed!

Further research is probably also needed on the link between social work as a profession and the experience of commune or intentional community life. Aidala and Zablocki (1991) found that their urban commune participants had a higher proportion of social workers, or who had parents who were social workers, than in the general public. But my guess is that commune dwellers with no prior tie to social work may have also gravitated to this profession, as I have. The link in my case is not direct; I spent ten years after leaving the commune working a series of unrelated jobs. And my reasons for entering social work were fairly "clinical" rather than "community." Someone I admired very much was a licensed clinical social worker and she encouraged me to look into it. It is only through teaching social work history, and really appreciating the energy our profession has put into trying simultaneously to help individuals and families through life stresses and to bring about a more equitable distribution of resources, that I have linked my commune experience to my work as a social worker and social work professor.

Most of us in social work education have some kind of art or quote up on our office doors. Mine is from Jane Addams (1911):

The good we secure for ourselves is
precarious and uncertain...
until it is secured for all of us and
incorporated into our common life.

I have liked that sentiment from the moment I saw it. And after reading the full work from which that quote is taken (originally written in 1894 and republished as part of *Twenty Years of Hull House* in 1911), I am reminded of Aidala and Zablocki's (1991) observation that this kind of idealism and longing for a communal life springs up at each major transition, from agrarian to industrial society, and again from industrial to post-industrial. Addams lived during the transition from farms to industry, and had the misfortune, during a few years of deep depression at any rate, to be born a woman in a society where well-off women of her background were expected to prepare themselves for a life of the mind and culture and then to resign themselves to a life of household anonymity and service. Her writing on the "subjective necessity for social settlements," and in the earlier chapters in the book, shows clearly that the settlement houses did at least as much for their residents as they did for the surrounding poor neighborhoods: they gave the settlement house participants a chance to channel their hopes, their vitality, and their altruism into a greater civic good.

I think some of the urban communes of the 1960s and 1970s were much closer to the settlement houses than my rural commune was; I know urban communes that got involved in neighborhood issues, in the welfare rights movement, in early recycling projects. But I can identify with what Addams called 'the snare of preparation.' In her case she referred to the fact that women were educated for a life they were not allowed to enter. In the case of my generation, we were educated for a life that was changed completely by the sad truths of our country's involvement in Vietnam, the covert but steady backlash against the radical movements of the '60s, as well as the larger economic transitions. No wonder some of that generation took a time out to explore what might be possible if we envisioned a different form of community. It wasn't until I was introduced to social work that I found a profession that fit so thoroughly with my ideals, a profession that acknowledges both our duty and our joy in working with others for the common good.

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Call for Narratives: Special Issue of Reflections

No Map for the Journey: Professionals Reflect on their Experiences with End-of-Life Caregiving

Guest Editor: Steve Wilson, Ph.D., California State University, Long Beach

Many social workers have had the opportunity to become a family caregiver when a parent or family member became seriously ill. Sometimes this is by choice, and sometimes this is by chance. Despite the knowledge we hold as professional academics or practitioners, when we are called upon to provide direct care for our own family members, particularly near the end of their life, our perception of caregiving can change dramatically. Despite our professional preparation, knowledge doesn't always ease feelings. **his Special Issue of *Reflections* will provide a forum for telling the stories of social workers and helping professionals who were called upon to provide hands on caregiving for a family member facing death.**

Narratives may address but are not limited to:

- How did your professional practice inform your personal experiences as a caregiver?
- How did your personal experiences differ from how you help clients?
- How has your empathy and compassion changed as a result of your experiences?
- What experiences transformed your perceptions of caregiving?
- Following your loss, how did your perceptions of grief and bereavement change?
- How has your caregiving and loss transformed your direct practice work with clients?
- What experiences did you have that can provide inspiration to other professionals placed in a direct caregiver role?

Submissions must be received no later than **July 1, 2007.**
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Book Review: *Snow* By Orhan Pamuk

2006 Nobel Prize in Literature

Agathi Glezakos, Ph. D., California State University, Long Beach

This novel was published in Turkish in 2002. It was translated by Maureen Freely and published in English in 2004. It has been translated into 44 other languages to date.

On October 12, 2006 the Nobel Prize in Literature was awarded to the internationally acclaimed Turkish author Orhan Pamuk, the first Turkish person to win a Nobel Prize. In its citation, the Swedish Academy said: "In the quest for the melancholic soul of his native city, [Pamuk] has discovered new symbols for the clash and interlacing of cultures."

Orhan Pamuk was born in 1952 to an upper-class secular family, and spent most of his life in Istanbul. From 1985 to 1988 he lived in the United States as a visiting scholar at Columbia University in New York, and a visiting fellow at the University of Iowa. Currently, he is a visiting professor at Columbia University. After obtaining a journalism degree from Istanbul University, Pamuk became Turkey's most celebrated postmodern writer. His seven novels inform the western world of the complexity of Turkey's social, political, ethnic, and religious conflicts. His books have broken all previous sales records for works by a Turkish author, both in Turkey and abroad.

In 2005 Pamuk was charged for having violated the Turkish Penal Code by "insulting Turkishness" when, in an interview for a Swiss newspaper, he referred to the Armenian genocide of 1915-1917 and the killings of 30,000 Kurds in Anatolia. While the charges were dropped in January 2006, his popularity in Turkey received a serious blow,

and he was subjected to a hate campaign. At the same time, the charges also caused a widespread international protest and raised questions about Turkey's proposed entry into the European Union (EU). Tamuk stated that his intent in making the statement was to defend freedom of speech; the EU, as recently as November 2006, continues to fault Turkey on freedom of expression, on minority rights, on religion, and on the rights of women.

In *Snow*, Pamuk dares to take, through fictionalization, a critical view of his country's political, religious, cultural, and ethnic upheavals during the last decade of the 20th century.

The events the author describes take place during a three-day period in the city of Kars, the "poorest, most overlooked corner of Turkey," in the Northern-East borders of Anatolia "where half of its population is working as undercover policemen and a tenth as informers." Ka, a nationally recognized poet, returns to Turkey temporarily after having spent twelve years in Germany in political exile. Encouraged by a friend who writes for the pro-secular newspaper *Republic*, Ka makes the journey to Kars to cover the municipal elections and to investigate the extraordinary number of suicides committed by "head-scarf girls." He also hopes to connect with a beautiful former classmate, Ipek, who left her husband and lives in Kars with her former communist elderly father Turgut Bey, and her "head-scarf" younger sister Kadife. After "a lifetime in which every experience of love was touched by shame and suffering," the prospect of falling in love with and marrying a Turkish woman

who he will take with him to Frankfurt and the "German-Turkish world" fills the middle-aged Ka with excitement.

The snow falls relentlessly during the three days of Ka's turbulent stay in Kars. Majestic snowflakes create piles of snow which cover "the dirt, the mud, the darkness.... cast a veil over hatreds, greed and wrath." The snow also keeps the city's unemployed, hopeless, and chain-smoking old and young men in smoke polluted coffee and teahouses, sitting "next to stoves that never gave out any heat unless stirred continuously, electric heaters that ran off illegal power lines, and silent television sets that no one ever turned off." Kars had witnessed prosperity and architectural opulence when Armenians, Russians, Ottomans, and early Republican Turks lived there and made the city "a modest center of civilization." Now, as a city of the Turkish Republic, it is in a state of decay, destitution, and depression, with an ethnically, culturally, religiously and politically diverse population in a constant state of suspicion, conflict, betrayal, and violence: Kurds against Turks, ethnocentrists against Europhiles, Islamists against secularists and atheists. He comes to feel as "if he entered a shadow world...as if he had retreated into the silence of snow to escape from these stories of misery and poverty."

Confined to this environment because of intriguing political developments, ethnic and religious conflicts, and severe weather conditions, Ka spends his days roaming the often deserted streets of Kars, visiting tea and coffee houses, engaging in conversations about politics, discrimination and oppression, murders and assassinations, art and religion. In one coffeehouse he is witness to the assassination of the Director of the Institute of Education who was not letting head-scarf girls into their classrooms. The desolation and remoteness of Kars "hit him with such force that he felt God inside him." It had been years since he last wrote a poem in Frankfurt. In the course of three days in Kars, he writes a total of nineteen poems feeling "like a medium, as if someone were whispering the poems into his ear." He calls his first poem "Snow" and is invited to read it during a town theater night which proves to be a political coup staged by the state secularists. The event leads to the killings, arrests, imprisonment and execution of many Islamists and Kurds. "You have to kill them before they kill you," declares Z.

Demirkil, the defender of the secular state. Looking at the dead body of a young Kurd who had befriended him the day before, Ka's first thought was of "the shortness of mankind's journey from birth to death in the face of executions." He meets with representatives of all political and religious fractions, is suspected, interrogated and followed, but he is spared the beatings and humiliation to which Islamists and Kurds are subjected. Ka is aware of the risks to his safety but his insight into the ways the country's system works enables him to navigate himself through the labyrinth of the many dangerous situations he encounters.

Ka is a guest at the Snow Palace Hotel, which is run by Ipek's father, Turgut Bey. In making love to Ipek in this hotel feels like a miracle, and waiting for her late arrivals to his room makes him feel the pain that "had began in his belly spread to his soul." As the hours go by, the havoc and pandemonium in Kars interfere with Ka's plans for a married life in bliss and happiness in the "German-Turkish world" of Frankfurt.

Ka is the narrator of most of the novel. His best friend Orhan joins in as an alter ego to describe events that took place: first in Frankfurt four years after Ka's return there, and later in Kars, where he traveled to see the city and get first hand information about the three days his friend had spent there, and to meet Ipek in person.

In Frankfurt, Orhan learns that Ka lived an isolated life in a cluttered apartment, visiting sex shops and using "small cubicles for viewing

porno films." He supplemented his small asylum benefit with collections from poetry readings, attended only by small Turkish audiences. When in Kars, Orhan is informed that during the past four years, the only new development in the city is that "everyone is watching a lot more TV; rather than spend their days sitting in a teahouse, the unemployed prefer to sit at home watching free films beamed from all over the world by satellite...the white dishes now itched to the edge of every window." At an official dinner given in his honor, Orhan finds Ipek "more beautiful than anyone could had imagined." It is at this dinner, he writes, "where I had my first glimpse of her, I found myself stunned, bedazzled, and deeply jealous...It was at this astounding moment that I must have decided to write the book now in your hands."

In the maze of this political novel, the major themes Pamuk focuses on include the effects of poverty and immigrant status, of political and religious oppression, of the violation of women's rights, and the divide between East and West.

Poverty runs rampant in Kars. Unemployed men are "no longer sure they could afford to go to the teahouse because of the high price of a glass of tea." These are men who know only too well that "no one else in Turkey could be as wretched, poor, and unsuccessful as they." The elements of poverty and helplessness that Ka encounters are shocking. He is informed by locals that the negative perception the West has of them is based on their poverty. "We aren't stupid, we're poor...the poor have hearts, minds, humanity, and wisdom just as everyone else."

Turks who immigrate to Germany in search of a better life or for political reasons, return to Turkey in Western dress reflecting a presence of superiority. Men and women who come to Kars from poorer neighboring countries in search of employment are detested by the locals. Being accused of his Westernization, Ka confesses "I may belong to the intelligentsia in Turkey, but in Germany I am a worthless nobody." When in Frankfurt, Orhan sees on the faces of his immigrant compatriots "the loneliness and defeat so commonly seen in first-generation immigrants and political exiles." In Kars, the army persecutes men and women from neighboring Georgia who enter the city illegally and "tackle these parasites and clean the city." In these descriptions, Pumak captures the universal plight of and discrimination against immigrant populations.

The crowning event at the end of Ka's first day in Kars is a televised stage performance which, in reality, is a staged event for a coup by the defenders of the Republic. The purpose of the coup is to influence the results of the municipal elections and to protect the state "against Kurdish separatist guerillas and Islamist fundamentalists." In the uproar that follows Kurds and Islamists are executed indiscriminately. All Koran and Kurdish political activity is suspended, and young men handcuffed to one another "were badly roughed up, their faces were covered with bruises, their heads were shaven, their faces and eyes swollen from beatings." Pamuk's detailed description of this "cleanup operation" vividly depicts the brutal side of man, the unlicensed use of power, and the unpredictable fate of the oppressed ethnic, religious and political minority.

In his attempt to investigate the suicide epidemic among young Muslim women wearing head scarves, the stories he heard "would haunt him for the rest of his life." After having been told their whole lives by parents and religious figures to keep their heads covered, the secular state wants them to take their scarves off. They are banned from schools when all they were doing is "obeying the laws of their religion" by choosing to honor God's rather than the Government's decree on women and scarves. In a state of confusion, oppression, and helplessness, they commit suicide; a grave sin for an Muslim.

According to Kadife, "the moment of suicide is the time when they understand best how lonely it is to be a woman and what being a woman really means. Women kill themselves because they hope to gain something. In Kars, men do not fear their women's intelligence; they fear their independence." Pamuk also offers descriptions of Georgian and Ukrainian women's maltreatment by Turkish men: the married dairy owners and leather merchants who use them for sexual pleasure under severe inhumane conditions. The troubling double-standard that protects the purity and virginity of a family female member and blatantly assaults the dignity of destitute helpless women is a toxic cultural practice. Pamuk's descriptions capture this universal form of toxicity.

Finally, Ka's conversations with the secular republicans, the Islamist fundamentalists, the transformed communists and the atheists, the young and the old, the male and female citizens of Kars, offer insight into the East-West divide that they believe causes irreconcilable cultural and religious differences. The terrorist acts that transcend national boundaries today can be better understood in the context of what happens in Kars in the course of three days. "Don't do me the injustice of holding me to European standards that were never designed for us! Let me tell you what happens to fools who wander around Kars pretending to be Europeans...three days, that's all it takes, three days and they are dead, shot, gone for ever," Serdar Bey, the publisher of the local paper, tells Ka. Blue, the handsome and charismatic Kurdish hero, says that in Kars, if one worships God as a European, he is bound to be a "laughingstock." In his conversations Ka is repeatedly reminded that in Kars one will be killed for being "a little Westernized," for wearing a tie or a fancy coat like the one he bought in Frankfurt. "To think like a Westerner is not possible; plus it can break a man's pride to try," he hears someone say. When Orhan visits Kars and is inspired to write *Snow*, a young male Kurd warns him that "if you write a book set in Kars and put me in it, I'd like to tell your readers not to believe anything you say about me, anything you say of us. No one could understand us from so faraway." Pamuk's reporting of these chilling expressions by Kars citizens increases the reader's skepticism about the success of attempts to bridge the East-West divide.

The globalization of concerns about freedom of speech, tolerance and respect of ethnic and religious differences, equal and equitable treatment independent of one's gender and political affiliation, make *Snow* very relevant and enlightening reading. In the words of Margaret Atwood: "*Snow*...is essential reading for our time."

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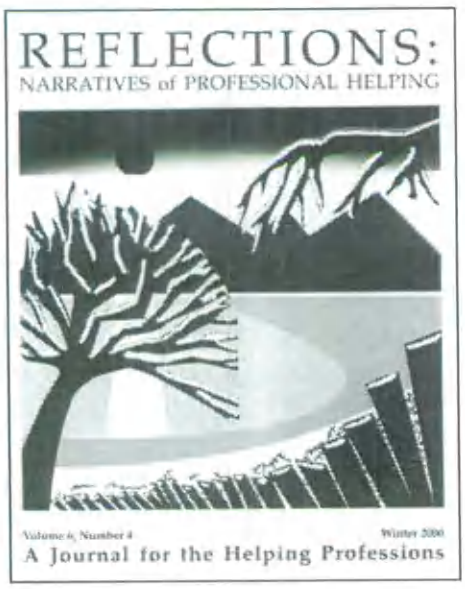

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