REVISITING "THE CASE FOR THE CONTRACT"*

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In this narrative, the author re-introduces his article, "The Case for the Contract," co-written with Wilma D. Marlow, and discusses its relevance to current social work practice. The article following this introduction has been reprinted in its entirety from the Journal of the National Association of Social Workers.

In the late 1960s, I went through a period of recovery from a prolonged dosage of psychoanalytically-oriented social work training in graduate school, and then practice in an exciting child welfare agency where "psychoanalytic work" was clearly *de riguer*. One outcome of such recovery was the re-discovery of my earlier interest—and indeed roots—in cognitive psychology and learning theory along behavioristic lines, which had been the focus of my undergraduate major in psychology nearly two decades earlier.

In this process I "discovered" the writings of such authors as Helen Harris Perlman (1957) on the problem-solving process in social casework; Ruth Smalley (1967) on the functional approach to social work; and William Schwartz (1971) on the use of the "contract" in group work. Suddenly, I found that my long repressed cognitive and behavioristic impulses came alive even more vividly and began to influence my practice in social work with families, teaching of clinical social work, and research in the area of family and children's services.

Then in the early 1970s, as a doctoral student at the Columbia University School of Social Work, I was privileged to become associated with such scholars as Alex Gitterman, Irving Miller, and William Schwartz, who helped expand my horizons through their emphasis on group work – an area that had not been part of my earlier training or practice in *clinical* social work. In particular, in a course with Schwartz, I became interested in

the use of the contract not only with groups but in social work in general and in diverse agency settings.

One outcome of this process was "The Case for the Contract", an article which I co-authored with Wilma D. Marlow, a dear colleague at the University of Connecticut School of Social Work, who at the same time was confronting, with courage and dignity, her struggle with a newly-diagnosed terminal illness. Our collaboration on this article was most meaningful for both of us. In my case, it refined and strengthened my commitment to cognitively-oriented social work practice. In her case, and more importantly, it provided a context for her determination to live fully

even while confronting death, which indeed came shortly before the article was published in *Social Work*.

In re-reading this article nearly three decades later, beyond the flood of personal recollections and emotions, I feel a sense of satisfaction in having contributed to the development of a central construct in social work theory. At the risk of sounding immodest, I see the article as continuing to be timely and useful. There is little that I would change in regard to its basic contents, beyond trying to be a little less dogmatic or certain about the value of the contract as a practice tool. Also, I would now place more emphasis on the less



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"tangible" components of the process of formulating and using the contract in practice, such as the value of the perceptions and feelings of clients and the role of the social worker's intuitive sense regarding the client's readiness to participate in formulating the contract and her or his possible need for more time, support, and encouragement.

As for application of the contract in social work practice, I would of course also consider what we have learned more recently—or have appreciated more keenly about the needs and qualities of vulnerable populations, the significance of human diversity, and the role of knowledge about race and ethnicity in our theoretical perspectives and practice approaches (Gitterman, 2001). In addition, we have seen how important it is to assess any potential risks in cases involving substance abuse, family violence or child maltreatment, and the consequent urgency of considering safety issues in contract negotiations within agencies serving children and families.

In my own research and writing I have also realized even more clearly the importance of thoughtful application of our "cherished" concepts in our practice. For example, in my later studies of client and worker perspectives on the helping process, the contract emerged as a much more complex concept than Wilma and I had originally envisioned. In particular, I appreciated more than previously that in interpersonal practice "the contract apparently serves not only instrumental functions (such as clarification of mutual tasks) but also expressive functions (such as provision of attention and interest by the worker to the client)" (Maluccio, 1979: 187). In other words, the process of contract formulation is not only a prerequisite to effective practice but also may be "therapeutic" in and of itself.

Later, through Germain and Gitterman's (1996) formulation of the life model of social work practice and my own work on a

strength-oriented perspective in social work, I learned to appreciate the value of focusing on the potentialities, strengths, and resources of clients and their social networks: the contract can be used as a means of involving clients as partners in the helping process—rather than viewing them as carriers of pathology (Maluccio, 1981). Especially crucial in this regard is the following:

"...obtaining client feedback so as to engage clients more actively in the helping process, enhance their self image, and improve practitioner skills" (Maluccio, 1999: 362).

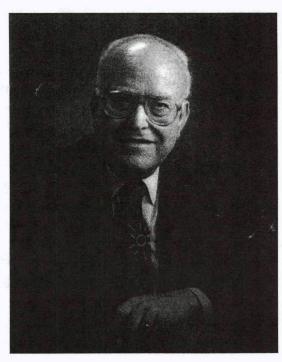
As an example from family preservation services, the emphasis on the contract and its underlying principles and values can serve to guide and reinforce the worker's efforts to involve birth parents and their children in the process of formulating and achieving the goal of maintaining the child within the family or providing a more appropriate permanent plan. In particular, contract negotiation helps to bring out and clarify different perspectives or substantial disagreements in planning, specify mutual expectations, and reach agreement regarding the best plan for the child and family.

As a result of experiences and lessons such as those noted above, along with other theorists as well as practitioners I have increasingly appreciated that the contract—as with other tools—is something that should be considered and applied not as rigidly as implied in my original article, but thoughtfully and flexibly on the basis of our understanding of each person as well as her or his readiness and motivation to engage in a "helping" endeavor. May the contract and its use in social work practice continue, but with full awareness of the potential for its corruption by the contemporary emphasis on managed care, move toward greater accountability, and other dangers in our supposedly enlightened postmodern society!

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