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## eBooks also available for review

Mackinlay, E. *Palliative care, ageing and spirituality: A guide for older people, carers and families.* Jessica Kingsley.

McCarthy, B. Hearing the person with dementia: Person-centred approaches to communication for *families and caregivers*. Jessica Kingsley.

## Address all enquiries to:

Helen Simmons Book Review Editor social work & Social Policy programme School of Health & Social Services Massey University Private Bag 11-222 Palmerston North 4442 New Zealand

E-mail: H.Simmons@massey.ac.nz

*Towards professional wisdom. Practical deliberation in the people professions.* Edited by Liz Bondi, David Carr, Chris Clark and Cecelia Clegg. Surrey, England: Ashgate, 2011. Paperback, 251 pages. ISBN: 9781409407430.

This volume brings together authors from varying 'people professions' to address the issues of professional judgement and wisdom. Based on the premise that ethics lie at the heart of these professions, they chart a paradigm shift away from the techno-rational as the basis for decision-making to 'practice wisdom'. Enlarging on the Aristotelian understanding of 'phronesis' (practical wisdom) they focus on reflection and deliberation, informed by responsible ethical judgement, as the basis for decision-making. Fifteen chapters, separated into three sections, offer substantive, wide-ranging discussions, impossible to do justice in this short review. I will comment on just a few chapters.

The shift in focus from technical empirical knowledge to practice wisdom is a welcome one. Over-reliance on technical know-how can inhibit authentic and reflective practice, responsive to this person in this context here and now. The emphasis on evidence-based practice as best practice is questioned by David Carr who asserts that in the people professions '... it is the cultivation of virtues such as courage, temperance, justice and wisdom that lie at the heart of exemplary professional conduct' (p.109), rather than a particular skill or technical base. This is picked up in a chapter by John Swinton who expands on the concept of professional wisdom as it is uniquely embodied in L'Arche communities where practitioners are seen as healers and guides.

Elizabeth Campbell presents 'ethical knowledge' as being at the core of good teacher education. She argues convincingly that cultivation of this ethical knowledge needs to be

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taught as a distinct foundation course on ethics in addition to being integrated across the learning curriculum. I believe this also applies to education for social service practitioners. We cannot assume students come already ethically aware and we need to ensure that the curriculum covers personal and professional ethics along with an understanding of how these relate to practice wisdom.

Liz Bondi highlights on-going issues in the relationship between gender and profession and gender and professional wisdom while Sue White provides an interesting reflection on the place of certainty, uncertainty and professionalism in social work. She warns of the danger of government reforms and electronic assessment formats pressuring '... social workers towards precipitous categorisations and actions' (p.181). Kathleen Marshall and Maggie Mellon reflect on research around state regulation related to child protection and conclude that we are at risk of undermining healthy adult-children relationships if we continue down a risk-averse path, 'crowding out wisdom' (p.187). While these chapters are written from a UK perspective there is much that resonates in the New Zealand context.

Alison Elliot and Cecilia Clegg offer two interesting perspectives on professional judgement in ministry, the first related to working in the field of homelessness, the second to pastoral supervision. In the final chapter Nick Totton writes of the need for the therapist to dance 'outside the frame' (p.243), asserting that good therapy cannot also be safe therapy.

Well-researched and thought-provoking, this is not a book for the faint-hearted. Had I not been writing a review, I doubt I would have persevered. The contributions vary considerably in their 'readability' from weighty philosophical and theoretical discourses to more narrative practice-based accounts. I would recommend it to those interested in an in-depth understanding of the nature of professional judgment and wisdom in the people professions rather than to undergraduate students or practitioners in general. That said, it deserves to take a place in the academic literature as a thorough wide-ranging exegesis of 'professional wisdom'.

Mary Farrelly Senior Academic Staff Member, NorthTec.

## Foundations of complementary therapies and alternative medicine. Edited by Robert Adams. Palgrave Macmillan, New York, 2010. Paperback, 404 pages. A4.

The book offers a wide range of topics on alternative medicine and therapies. It clearly provides the foundation and theories on alternative practices, context of the practice and very practical issues on policy, ethical requirements and guidelines on how a practice in this field may be set up. The book allows readers to view alternative or complementary medicine not as an alternative to western medicine as it is predominantly viewed but rather as a practice that has its own merit, philosophy and credibility. The book then offers evidence on how these therapies work, providing easy to read case studies and questions that highlight the main points of each chapter. The end of each chapter also offers a summary that is concise and practical and provides references for further reading, definitely a useful tool for any student or professional. The first few chapters of the book offer useful tips for students and professionals on adult learning processes, using the library and other resources, getting the most out of lectures and experiential and work-based learning or professional development.

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A very practical book offering a wide range of topics, relevant for social workers, managers and supervisors working in a health setting, mental health or with migrant or other ethnic communities where alternative medicine is practised. The book is very easy to follow and offers guidelines to working with patients and clients and is a useful reference for any manager or supervisor especially in an era in which alternative medicine is becoming popular. The book definitely allows practitioners to view alternative medicine as having merits in a western society. Furthermore, the practice is not seen as an alternative to the mainstream but as the mainstream in other cultures and therefore should be viewed as such.

Alternative practices in most cultures have been part of oral history. This is one of the few books that compiles it comprehensively and offers a philosophical and scientific base for the various practices. I highly recommend it for social workers working in the health field and those with migrant communities. In addition, it is recommended for undergraduate students to get an overview of working with clients as a foundation for alternative therapies and for managers and supervisors as a reference book.

Litea Meo-Sewabu Assistant Lecturer, Massey University.

## My parent has an Autism Spectrum Disorder: A workbook for children and teens. Barbara R. Lester. 2011, Jessica Kingsley, London. Paperback, 108 pages.

Barbara is a licensed clinical social worker from the United States who specialises in working with children and adolescents on the autistic spectrum and with families affected by ASD (Autism Spectrum Disorder). Barbara grew up the child of a parent with ASD although she did not know this at the time. She acknowledges that she is essentially writing this book to her younger self with advice she could have used while growing up. The book is written in an easy relaxed style suitable for all. It is honest, respectful and informative, and when reading it I felt like I was on a journey of understanding with the writer.

This book is a practical hands-on workbook for children, teens and their families. It is recommended for children and teens with a parent who has ASD although no specific age range is given. It is a useful book for parents to explore with a younger child to prompt discussion and explore possible worries, concerns or experiences and to aid understanding of their ASD parent. Older children, teens and young adults would also find the book most helpful for gaining understanding, insight and for problem solving. Equally I think this book would be a useful tool for children and teens themselves who have ASD.

There are worksheets primarily designed for families to complete together (often just a few pertinent questions) at the end of each chapter. The worksheets are fantastic and would significantly aid individual parent-child relationships through greater understanding and communication. They would also assist the whole family as they are individually encouraged to share their experience of ASD, how they see the world and identify where their differences lie. The chapters are clearly laid out and cover all relevant areas of a person experiencing ASD including what it is, understanding social skills difficulties, body language and emotion issues, special interests, strengths, and who and how to tell about the diagnosis to name just a few of the 16 chapters covered.

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I feel that this book fitted well into the New Zealand context and believe it is a good addition to this area of practice. It will be a useful tool for those who have a parent (or other family member) with ASD or who experience ASD themselves.

Wendy Fraser, BSW (Hons), PGDipEd, MANZASW Clinical Social Worker, CAFMHS, Palmerston North.

## *Professional practice in human service organisations*. McDonald, C., Craik, C., Hawkins, L., & Williams, J. (2011). Crows Nest, NSW: Allen & Unwin.

Over the last 20-30 years there have been some quite extraordinary changes in the human services. Contrary to times past, we now work in open plan offices and most of the distinctions associated with advanced professional training have, like the office walls, been flattened away. Protocols and procedures dictate how almost everything is to be done, and the personal computer rules most communication and case recording. The rise of managerialism is also evident in a resurgence of psychiatric diagnoses for young people, and this can provoke some tense moments in the daily work life of professionals if they give pre-eminence to ecology, inclusion and rights. McDonald et al describe working in the human services and human service organisations now as intellectually, emotionally, morally and politically challenging and they say that they are not particularly friendly places to be.

*Professional Practice in Human Service Organisations* is for anybody who wishes to understand what is involved in being a human service worker in the current environment. The span of the book is remarkable. It begins with an explanation of the corporatisation of the public sector, and how we got generic managers, a preoccupation with efficiency, and a horror of risk. It then successively addresses leadership, the context of human service work, recording and report-writing, information management in organisations, professional relationships, supervision and support, managing conflict, advocacy, administrative ethics, dealing with complaints, and professional ethics and ethical reasoning. It is interesting that the authors focus many of their points on non-profit community agencies and it is apparent that a lot can go wrong in these settings. McDonald et al suggest that human service workers can mistakenly assume that because they are well-motivated that they should be immune from the issues and challenges that are inherent in serving other people well.

This is a critical, optimistic and purposeful book. The authors make it clear that human service workers retain the power, and have the opportunities, to advocate for clients and to influence systems. Indeed, if the service user is our central focus we have an ethical obligation to do so as well. Cast in this way, many managerial processes can also be seen as furthering the interests of our clients rather than frustrating them. Records have to be kept and resources managed, and these provisions are both for the individual case and for the larger good. Similarly, it is incumbent on workers to maintain good relationships between agencies for the benefit of their clients both now and in the future. I have learned a lot from *Professional Practice in Human Service Organisations* and I will retain it as a reference text. However, I would like to conclude with a minor criticism and a caveat. The criticism concerns the presence in the text of some postmodern excesses. For instance, the statement that evidence-based practice is derived 'from a white, male, Westernised medical discourse' (p. 57) is a trivialisation. The caveat concerns the separation that is made by the authors between interventions and programmes and the subject matter of their book. It is a fact that really

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well designed interventions, which can demonstrate effectiveness, contribute colossally to the purpose and to the multifaceted experience of human service work.

Peter Stanley PhD Ministry of Education, Tauranga.

## Doing social work research. Hardwick, L. & Worsley, A. (2011). London: Sage. 163 pages.

In *Doing Social Work Research* Louise Hardwick and Aidan Worsley have placed a valuable resource at the disposal of the social work profession. The authors modestly claim to have developed an introductory text on social work research which will also be of value to more seasoned practitioners. They have produced much more, though. They have given the profession an easy-to-read guide that will inspire and guide solid evidence-based research on the everyday practice of social work and the policies that govern such. Both the novice as well as the more experienced practitioner will value the detailed step-by-step guide to the research process.

This thoroughly referenced work will open new vistas for the scientific pursuit of empirical knowledge, as it exemplifies to the practitioner how to undergird the research process with findings and practice examples published in an array of contemporary journals, general social work practice texts, official releases and more research-oriented publications. The more advanced researcher will not feel cheated for the effort and time spent on the text, which covers lots of common ground, but seldom without some fresh perspectives and insightful examples from everyday practice.

The reader is unwittingly pulled into the research process at an early stage, guided along the sometimes seemingly daunting research journey, and finishes the text with a sense of anticipation. Embarking on your own research journey seems the logical next thing to do. Research is shown not to be confined to those who are more academically inclined; it is well within the reach of the many practitioners who see themselves as run-of-the-mill workers. These grassroots workers have, nonetheless, a wealth of experience and valuable skills to be effective as practitioner-researchers. They are the ones who are in touch with the practicalities of real-life practice and the impact of social policies on that practice, and therefore most suited to lead research on practice and policy.

The first three chapters encompass the underpinnings of social work research, with the remainder of the work very much focused on the practicalities of the research process.

In the first chapter the authors focus on the distinctive nature of social work research. Such research is meant to improve professional practice to the benefit of both those who are at the receiving end of service delivery, as well as those who form the vanguard against social injustices and need. The authors plead for a reversal of the historical pattern that put social workers '... at the receiving end of policy and subject to the prevailing political necessities of the day' (p. 6.). It would be tautologous to say that these sentiments are shared by many if not most practitioners in New Zealand. It is hoped, however, that many will engage in significant research pursuits in response to reading this work and endeavour to shape social policy and practice through empirically verified research results and justifiable recommendations.

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Chapter two encourages a research mindedness among practitioners, whose potential to contribute to the knowledge base of social work should be acknowledged by employers, funding bodies, academics and policy makers.

In the third chapter the authors spotlight some of the ethical intricacies of social work research such as informed consent by potential research participants, the right to privacy, scrutiny by ethics committees and other ethical issues connected to research. The authors make it clear that the practitioner-researcher has to take personal accountability to ensure the research is ethical-responsible.

Chapter four expounds an ethical basis for service users' involvement in the research process, amplified by practice examples, and ends with practice guidelines for service users' involvement in research.

Chapter five highlights the use of interviews and questionnaires.

In the sixth chapter Hardwick and Worsley provide valuable information on the utilisation of focus groups in research, a form of group interview that draws information from the personal experiences of participants on the subject of the research. This under-used method of doing social work research holds much promise for practitioner-researchers, and the practical guidelines of the authors with respect to the composition of focus groups, the selection of participants, the preparation and execution of the research, and the processing of information will prove of worth to practitioners opting for this method.

Chapter seven highlights the use of observation and narrative accounts in social work research. The narrative approach provides the practitioner-researcher insight into the world of the people being researched by listening to their story. The authors are of the opinion that the skills needed for the use of observation and narrative accounts are at the heart of the skills base of the social work profession.

The design of a research project needs to consider the analysis of the data. This and other related matters are addressed in chapter eight.

In the ninth chapter Hardwick and Worsley conceptualise the research project as eight stages leading up to a robust and systematic research proposal. In the first stage the research project is planned meticulously from beginning to end. The second stage entails the identifying of a succinct and precise summary of the research question or statement, which becomes the basis for a workable research strategy and plan. Stage three turns the attention to an evaluation of the researcher's expertise for the research project, followed by the fourth stage which positions the research against its contextual backdrop. Stage five brings the relevant literature to the fore. Stage six determines the most appropriate strategic approaches and methods. The authors lay the groundwork for a comprehensive study to determine the method most suited for the research. Stage seven covers the required ethical scrutiny of the research project, and the final stage forecasts the time line of the research project, communicate the findings of the research and any new perspectives that have emerged.

May the scholarship at our disposal in doing social work research enable a rich harvest of research findings to the betterment of our practice, wiser policies at all levels and academic advancement.

### Francois Bredenkamp

Senior social worker, The Open Home Foundation, New Plymouth.

## *Family HOPE parent handbook. Happiness. Optimisim. Promise. Excellence. Positive behaviour support for families of children with challenging behaviour.* Karolyn King-Perry and Lynn K. Wilder. Illinois. Research Press, 2011. Spiral bound, 53 pages.

This handbook seems to draw from some of the basic principles of Triple P. It's been coauthored by a parent of an intellectually disabled boy and an Associate Professor in the College of Education in Florida Gulf Coast University. The book is designed to give other parents, caregivers and supporters practical skills to manage some of the more complex behaviours, based on the basic components of applied behaviour analysis (ABA) and positive behaviour support (PBS).

The goals of the book are to 'decrease problematic behaviours and replace them with new ones, help parents decrease an actual problem behaviour and teach new, positive strategies for similar outcomes'.

The book is organised into seven systematic steps and the authors encourage the use of all steps, without making any shortcuts.

There are lots of useable photocopyable resources in the book.

In the scheme of things, the information is useful. We are fortunate in New Zealand that we have Triple P programmes for children as well as the Incredible Years Parenting Programme, all of which compare favourably against the book. For parents wanting a simple step-by-step guideline, this could be a useful resource.

The book can be purchased from Footprint Books.

### Maureen Macann

Senior Clinical Social Worker, Child, Adolescent and Family Mental Health, Alcohol and other Drug Service, Palmerston North

## A little book of alcohol: Activities to explore alcohol issues with young people (2nd Ed). Vanessa Rogers. 2012. Jessica Kingsley Publishers, London. Paperback, 143 pages.

The opportunity to review this small but useful book was timely for me due to delivering alcohol and drug groups with teenagers. After a lengthy break from group work, some new ideas and refreshing group activities was pertinent. I certainly received some new ideas as well as reminders of exercises I used to use.

The book is well set out with Ground Rules, Alcohol Information, Tips for Safer Drinking and the Activities, with the activities divided up into warm-ups and review tips. Unfor-

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tunately, the book is not written in New Zealand or for the New Zealand audience so the statistics in the alcohol information may be of limited use. However, these statistics are easy to gather from New Zealand resources such as www.alac.org.nz.

I tried some of the activities with my group and they were well-received and very successful. The pre-printed activity sheets are particularly helpful and were easy to print off and utilise in the group even last minute, important considering last-minute preparation is an unfortunate reality in many employment contexts. The exercises that develop young people's skills, like being able to judge 'standard drinks' or resist peer pressure, reflect best practice guidelines for group work where the most successful group outcomes stem from not just didactic but skills development groups (Beautrais, 2012).

A few of the exercises I found to be a little irrelevant or just exercises for the sake of them, such as guessing which country a particular drink is associated with, but these were in the ice-breaker exercises and for the most part the learning benefit is clear.

I would recommend *A Little Book of Alcohol* for those working with teenagers with alcohol issues, even if this does not occur in a group context as Rogers specifies how exercises can be adapted for individual and family work. Additionally, even if alcohol issues are not the focus of work the activities could be adapted for other maladaptive coping strategies or addictions such as gambling or other drug use. The book is not limited to youth work either as the experiential exercises would be helpful for adult addiction practice contexts.

I will be accessing Vanessa Rogers' other texts on cyber-bullying and relationships in the hope that they are as practical and innovative as I found aspects of this book to be.

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Rogers, V. (2010). Let's talk relationships: Activities for exploring love, sex, friendship and family with young people. (2nd Ed.). London: Jessica Kingsley.

#### Jane Parsons

Blue Couch Consultancy (Therapy, Supervision, Education).

## *Professional boundaries in social work and social care.* Frank Cooper. London, Jessica Kingsley, 2012. Paperback, 175 pages.

A well grounded book as the title suggests, it will be especially useful in work environments with a lot of direct client contact, thus true to the descriptor of social work and social care. Having worked in residential environments and with community support agencies I have already offered it as practical reading for organisations where staff can lack clarity about their personal and professional boundaries.

There is a very useful introductory questionnaire that invites readers to rate their responses to a wide range of everyday experiences in our work. From this you quickly get a rating on how tight are your boundaries. In looking at the questions and the options that

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you chose from, it makes it clear that there are many shades of grey in response to issues we encounter. Themes do, however, emerge and it is up to both the individual and the organisation to be clear about how they come to their decisions. In knowing the how, they then understand why the decision makes sense.

The reasons for boundaries are made clear with issues such as protection of clients, and protection of workers and the agency from misinterpreted behaviours, even though they may be well intentioned. I really liked the distinction between boundary crossing and boundary violations. The former are what we would call good learning opportunities and are usually managed without recourse to censure. As the continuum leads onwards to boundary violations, clear examples of unprofessional, and on occasions unlawful behaviour, become evident.

The section on professional boundaries and the law while grounded in UK legislation, does link to common issues for New Zealand. It highlights the big change in the UK of 'required' reporting which is likely to become law here for children and vulnerable adults. They outline the change as: 'Anyone engaged in social care must take responsibility for watching out and reporting signs of abuse'. They then outline the implications for care workers.

The chapter on who has a responsibility to teach and maintain boundaries clearly makes this a shared responsibility. The issue of whistle-blowing and thus holding our colleagues and organisations who do not take this seriously, is also appropriately addressed.

Overall this is a book that is easy to read and will invite readers to explore their own boundaries. The case examples and explanations, as well as the summary questions at the end of each chapter, invite strong self reflections.

John Dunlop Community Care Consultancy.

# Law and poverty. Munger, Frank (Ed). 2006. Aldershot, UK. Ashgate. Hardback, 641 pages.

*Law and Poverty* is one of a series in 'The international library of essays in law and society'. The aim of this series is to explore how legal institutions work through social structures. Each of the editors was charged with identifying 20 essays that would 'Illustrate the most important questions, theoretical approaches and methods in (their) area of expertise'.

The editor, Frank Munger, is a Professor of Law at New York Law School. According to his bio details (Googled) he teaches Constitutional Law, Social Welfare Policy, Local Government and Land Use Planning. As well, he conducts seminars on contemporary justice, poverty and globalisation issues.

This volume is about the US legal system and poverty and is divided into 6 parts: *Part 1-* Class, poverty and law *Part II-* Legal foundations of the welfare state *Part III -* Issues of poverty, gender and race *Part IV -* Access to law

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*Part V* -Identity and legal consciousness *Part VI* - Law, poverty and social change

The most striking thing about this book is the age of most of the essays – the oldest one was first published in 1964 and the rest, apart from the Editor's essay (2004) plus one other, are from last century. The other thing that impresses about this book is the number of footnotes there are. These tend to dominate throughout the older essays especially.

Reading this book was like déjà-vu – what is happening in NZ is described in detail throughout every essay in this book. For instance, titles such as 'A genealogy of dependency: tracing a keyword of the US welfare state' explores how the meaning of dependency has been changed over time to its current negative, pejorative attribution and is resonant with how our NZ beneficiaries are labelled and stereotyped.

In the essay titled 'Civil, Justice and The Poor' the author states 'The law is, above all, a means of creating and protecting rights ... we must inquire more fully into the extent to which it performs this essential function for the poor' (pp 85). This volume shows that the poor of the US are not well served by the Law and numerous examples attest to this.

What I did find interesting was the Editor stating that 'family welfare can be improved, employability enhanced and poverty reduced ... (by) ... enabling poor women to manage their own lives given the resources and opportunities to do so' (pp 617). The resources that make a difference were listed as benefits, wage supplements, Medicaid, childcare, after-school childcare, counselling and support. Sounds like commonsense but in an age where our Government is focussed on cutting spending and is clearly comfortable with the fact that a growing number of NZ/Aotearoa citizens are living in poverty, there is no expectation that such programmes will happen here anytime soon.

Would I recommend this book to others? Not really – but there is some good reading to be had if you can overlook the age of the essays, the annoying footnotes and the sometimes longwinded essays that take dogged determination to finish. As a result of reading this book I have a more in-depth understanding of how the Law acts as a mechanism of social control against the less well-off in order to advantage the better-off in society but this is surely not a new revelation to any social worker?

Anne Marshall Social Work Advisor, Northland DHB.

# *Putting a name to it. Diagnosis in contemporary society.* AnneMarie Goldstein Jutel (Victoria University of Wellington, New Zealand). Foreword by Peter Conrad. Maryland USA 2011. The John Hopkins University Press. 175 pages. Hardcover.

This book provides a detailed and comprehensive framework for the emerging sub discipline of medical sociology. From a social work perspective, the book was enlightening because of the overview provided on how the classification and framing of diagnosis relate to social order and status. To be honest, when the book arrived in my post for review, I hardly expected to find it enjoyable reading. I was surprised that I did and found myself pulled into

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a world of the medicalisation of previously non-medical 'problems', such as 'compulsive gambling; sexuality and alcoholism.

I was intrigued when I read that between 1942 and 2000, that there were 18 different 'ideal, desirable and normal (body) weights" described. Imagine, in 1942 at 170cm and 73kg you were considered an ideal weight; by 1959, this had changed to a desirable weight; in 1985, the same weight was deemed acceptable and by 2000, you are now deemed overweight. Give it another decade and you might be called obese!!!

Diagnosis is explained as a tool that defines and legitimises sickness – the patient, or client is able to access previously unauthorised privileges, such as permission to be absent from work or school; priority parking; reimbursement for treatment or access to services. Diagnosis, the author explains, may also create collective identities which can remove the individual from isolation; provides new networks, both physical and virtual; can be a political tool and offers a social view for suffers of abuse ( for example) opening the door to care and compensation.

I sometimes felt a little overwhelmed with the detail of the book. But I also thought, as I scrolled through detail after detail, that the content serves to remind any of us working the field of medicine, social services of the place of diagnosis and how very much it informs our practice. It reminded me of the importance of working with patients or clients in a holistic, systems approach.

The author points out that diagnosis is important on many levels – firstly for compliance of the patient and secondly, for disease control; public health and education. She also states that the ultimate goal of classification is to simplify – to recognise the similarity between conditions for logical connection, research and statistical analysis.

Importantly, the author states that diagnosis continues to be at the heart of medical education. She says as far back as 1662, John Graunt published the first disease classification document (Natural and Political Observations ... Made upon the Bills of Mortality). The importance of his text cannot be stressed enough. He made a strong argument for more detailed and standardized causes of death (such as the Plague) so that such deaths could be avoided in the future. In contemporary society, medical understandings of disease trends are based on these early writings. Graunt's counterpart, the International Statistical Classification of Disease and Related Health problems (ICD), published by the World Health Organisation (and now in its tenth revision), collects and compares morbidity and mortality statistics around the world. Not every country uses the ICD and it has never been universally accepted or consistently applied. Hence, the social aspect of diagnosis has its part to play.

The author correctly points out that the ability to diagnose clearly defines doctor from patient and establishes the authority of the medical profession. For the poor long suffering patient who cannot be diagnosed medically, this often leads to a referral for Psychiatric assessment and diagnosis. Hence, and again, quite rightly, the author points out that mental illness is frequently used as a residual or wastebasket type category. The author takes us through a journey of exploration of how the American Psychiatric Association first published the Diagnostic and Statistical Manual (DSM) of mental disorders in 1952 as

a direct response to increasing pressure from the medical field on the psychiatric domain. The DSM also serves as a sociological tool – tracking social norms, beliefs, actions, power and interests. The public outcry over the classification of homosexuality as a disease, for example, saw it removed from the DSM-III. This was a clear example, states the author, of how the DSM is an arbiter of diagnosis and of how controversy and political pressure shape its content. Mental health was unfortunately categorised within a medical model and the author reminds the reader that the concretising of classification has little or no empirical grounding.

Those who would find this book helpful are medical sociologists and practitioners working across the medical and psychiatric systems. It contains chapters on social framing and diagnosis; discusses the doctor patient relationship in the context of diagnosis and how this is shifting in contemporary society; explores contested and medically unexplained diagnoses and what drives diagnoses. The author explores how the fascination with normative sexuality (in this case, testing the diagnosis Female Hypoactive Sexual Desire Disorder) is unchallenged and untested in medicine. I wondered how much we have actually learned from the debacle over adding and then subsequently removing homosexuality to the DSM when there continue to be labels attached to sexual functioning? The author points out that it has been common practice throughout the history of (noting) women's diseases to assert that symptoms are related to women's sexuality and conformity (or a lack of) to social norms.

The final chapter focuses on technologies of diagnosis. The author gives a lovely example of her own experiences with her GP, leading to a 5 month long cough which was finally 'cured' by a locum who threw caution to the wind and simply treated the symptoms rather than the diagnosis. The cough had disappeared within a matter of hours. Of course, the cough could be seen and heard, unlike a patient who might have presented with, for example, migraines.

In conclusion, from a social work perspective, reading this book was a helpful exercise. It regrounded me as a social worker employed in a mental health setting. It can only serve as a reminder to be always mindful of diagnosis and how they may drive the perceptions we have of our clients and ultimately how we treat them. It has been helpful to view the medicalisation of and treatment of diagnosis, and then to read the authors formulation of the identification of particular conditions as problematic and therefore worthy of a diagnosis. She provides some useful insights into the stigmatisation of homosexuality compared with the contemporary drive for the recognition of female hypoactive sexual desire disorder which is largely driven by pharmaceutical industry interests.

Perhaps the nursing field will fall upon this book and use it in the training of our next generations of nurses as a more than gentle reminder of the place of diagnosis in our world – both the usefulness of it in treatment options and how it can also be misused.

This book is available for purchase from Footprint books, or, according to the blurb, at any good bookseller.

#### Maureen Macann, MANZASW

Registered Social Worker, Senior Clinical Social Worker, Child, Adolescent and Family Mental Health Services, Palmerston North.

# *Reminiscence and life story work: A practice guide.* Faith Gibson. 2011. Jessica Kingsley, London UK and Philadelphia, USA.

This book provides information on all aspects of reminiscence work (which the author distinguishes from reminiscence therapy) for practitioners involved with individuals, groups and diverse communities. The value of this kind of work is introduced in relation to a developmental lifespan perspective and its transforming nature is convincingly described. This book, writes the author, 'is about creativity which brings growth and change for people of all ages' (Gibson, 2011, p.10). In this, the fourth edition of the book, emphasis is being made on working with people who are depressed, who have learning difficulties and with people in palliative care and facing the end of their life. The book is designed as a handbook and the reader is guided through each chapter which has its own learning outcomes, a summary of key points and application exercises. The first five chapters focus on introducing the reader to reminiscence work and the final chapter in this section describes each step in the process of planning and doing reminiscence work.

The reader is encouraged to work through the sequence of the first five chapters which lay down the foundations for a sound understanding of reminiscence work, its diversity and the principles and values which underly it. Ten reasons are put forward in favour of reminiscence work, and since space is limited I only refer to three: Reminiscence makes connections between a person's past, present and future; it assists the process of life review and it challenges the distribution of power. In all, the reasons are compelling and make persuasive arguments for undertaking this kind of work. The final chapter in the introductory section guides the reader through the planning stages and the actual practices and process involved in reminiscence work.

The following ten chapters guide one through working with a variety of groups and types of people, as indicated above. The last chapter in this series covers reminiscence with terminally ill people. Issues such as ways in which reminiscence work may assist family members, old and young, to work through grief are thoughtfully presented. Disenfranchised grief is acknowledged as is the place of music in the life of the terminally ill person and the value of including all concerned in the funeral rituals.

The final chapter looks at staff development, training, standards of practice and how these are evaluated. It ends by looking at research issues, with an emphasis on the need for more research in every aspect of this work.

This is a well-structured and accessible book and one I would confidently recommend to practitioners in social work and other human service areas. I particularly like the way the author takes a strengths based approach to her work. She wisely promotes recognition of human development and the way in which we all grow throughout the life cycle when doing reminiscence work, and she constantly stresses the place of respect and hope in reminiscence work. I am sure that anyone reading it will feel inspired to get started, or to continue with renewed insight.

Mary Nash

Life member of ANZASW and was a social work lecturer at Massey University, New Zealand.

# *Risk assessment and management for living well with dementia*. Clarke, C. L., Keady, J., Wilkinson, H., & Gibb, C. E. (2011). Jessica Kingsley Publishers. 128 pages. Paperback.

The content of this book 'Risk Assessment and Management for Living Well with Dementia' outlines risk from many perspectives and views; person with dementia, family and carers, professionals, practices and policy. Living well means living a life that you value and living a life where you feel valued.

This book draws greatly on research undertaken by the various authors identifying risk from the perspective of people with dementia and their carers alongside their general practitioners; these forming focus groups in their research. The first section of the book focuses on the interviews and gives narratives from the person with dementia, the carer and the practitioner. The authors, who are from Nursing, Speech Language Therapy and Social Service backgrounds, also draw on other research that each have undertaken in this field which underpin the many ideas that are conveyed.

*Risk Assessment and Management for Living Well with Dementia* focuses on practices and policies from England, nevertheless while reading this book; it was easy to reflect on legislation and policies in Aotearoa along with the various views and perspectives associated with risk related to social work practice. By eliminating some risks, we are also eliminating quality of life. This book reiterates risk as being more than just physical harm; hence emphasises the value of life stories, the use of biopsychosocial interventions alongside the challenges associated with defining risk for the health professionals working collaboratively in multi-disciplinary teams, policies and legislation.

This book promotes quality of life for people with dementia and their families to live well; looking at evidence based practice and 'situated decision making' and offers models for identifying risks and impacts from a quality of life perspective (pg. 101). Throughout the book, there are questions identified for the reader to 'think about'. This book creates confidence in decision making and choices in understanding risk from many perspectives, and having the confidence to challenge yourself as a professional.

Designed for practitioners, this book sits well alongside other books that promote the person centred approach and views of quality of life for people living with dementia. Further recommended readings would include life story, viewing policies and legislation in Aotearoa and key factors that promote and strengthen resilience for people with dementia and their families.

Patricia Cunliffe, BSW, MANZASW, SWRB Practice Supervisor, Gerontology Social Work.

# Social work in rural Australia: Enabling practice. Editors: Jane Maidment & Uschi Bay. Allen & Unwin, Australia, 2012. Paperback, 275 pages.

It was the frustration of students and my interest in rural social work that inspired me to review this book. This year I have taught a rural social work module to third year social work students. One of the difficulties with the module is a lack of relevant literature (par-

ticularly Aotearoa based) to support their learning. I was hoping this book would resolve this, however, while it will be useful and is interesting much of it does not translate easily into an Aotearoa rural practice context. Reading this book made me more aware of the differences between Australia and ourselves, for example, there was an extensive discussion about fly in/fly out workers and the impact this had on communities. While in Taranaki we have oil industry workers who work for periods of time off shore, they are not flying in to a community (although you could argue that the workers on the rigs form communities) and then flying out when their work is complete. There were other evident differences around the way rural is constructed in an Australian context as opposed to here, such as the consideration of drought due to global warming.

There are however some similarities in rural social work practice within Australasia. In a chapter by Jeni Warburton and Suzanne Hodgkin on aging in rural places there is an interesting discussion on some of the problems experienced in relation to farm succession; an issue the Guy family tragedy has highlighted.

Alongside working with the elderly a range of other fields of practice are covered by various authors, for example, working with migrants and refugees, working in the family violence terrain, mental health, offending, working with young people and housing, and other topics such as climate change and working in interdisciplinary teams. Authors took a different approach to their assigned topic which added to the interest but meant there was no theme running through the work.

My other irritation about this book was that while all the authors seemed to be reputable scholars some appeared to have limited experience of rural social work, to the extent that in some chapters rurality seemed like a 'clip on'. An issue for rural social work practice is that urban practice is the dominant discourse and some chapters of this book reinforce that.

Aside from this, the book was 'readable' and could be useful for a range of practitioners, rural or urban. While some of the chapters on Australian issues were not relevant I did find them interesting, especially Uschi Bay writing about the governance of homelands in the desert and Margaret Alston discussing the impact of climate change in Australia. This book has not solved my literature issue but it will provide a resource for students to use; I have ordered a copy for our library. I do think it is a useful read for those in rural practice and also those interested in social work practice in Australia.

### Reference

Wendt, S. (2012). Engaging with sea-change on tree-change families over time. In J. Maidment & U. Bay (Eds.). *Social work in Rural Australia: Enabling practice*. Australia: Allen & Unwin.

Lesley Pitt

Tutor, Western Institute of Technology at Taranaki.

## *Social work with lesbians and gay men.* Helen Cosis Brown & Christine Cocker. London, Sage Publications, 2011. 187 pages. Paperback.

The title suggests this book can be used as a working manual by a social worker working with Lesbians and Gay Men. I do not find this to be the case. Rather the book provides

valuable background of knowledge in regard to Queer theory that will assist in a greater understanding when working with lesbians and gay men.

The book rightly places the sexuality of lesbians and gay men within the wider context of all sexualities. The authors have achieved this by explaining the historical, political and social aspects of gay and lesbian lifestyles. They do this in a manner that is easily understood.

The book is written for the benefit of United Kingdom readership and is largely relevant to those countries. However, the authors' references to Marx, Freud, Foucault make it relevant to a world wide readership. However, its relevance stops there for a New Zealand readership.

New Zealand readers who are familiar with the history and progress of the homosexual movement in the 1970s and 1980s will identify the parallels of progress between the two countries. The history of the homosexual movement that commenced in New Zealand in the early 1980s is more intense and achieved more over a shorter time frame than the same history within the United Kingdom as described in the book. This historical path may be of the interest to a New Zealander doing gender studies at a tertiary level but I do not believe it would provide, apart from a background awareness of the homosexual lifestyle, any new skills that would assist a New Zealand social worker involved in the lives of lesbians and gay men. For example, the skills of the social worker working with foster parents of a suspected closeted gay young person as shown in the case study on page 73 are the skills that would be used in all areas of social work regardless of gender or race.

The United Kingdom has a diversity of races living within its shores. These races have varying views of homosexuality within their beliefs and cultures. This issue is not addressed in the book. This omission provides no new knowledge or assistance for Kiwi social workers working alongside the Treaty of Waitangi. Social workers in this country who wish to inform themselves in regard to working with Takataapui taane (Maori gay men) would achieve more understanding by reading chapter eleven of *Intimate details and vital statistics, Aids, sexuality and the social order in New Zealand,* edited by Peter Davis, 1996.

Michael Unverricht ANZASW, Professional Supervisor

# Social work with substance users. Nelson, Anna. London: Sage Publications. 2012. Paperback, 205 pages.

This comprehensive book is written in clear language. It is written from both an antidiscriminatory and evidence-based perspective. Made up of four parts, each has its own introduction and summary at the end. Reflective questions at the end of each chapter encourage the reader to consider their thoughts and attitudes as well as their direct social work practice, perhaps useful for both students and practitioners. Case studies are offered, providing valuable insight into how social workers might work with problematic substance use in the different practice settings. The introduction acknowledges and makes clear that problematic substance use crosses a range of social worker settings and service user groups. Part one begins by offering a social history of problematic substance use, important because it explains why users of substances are often portrayed negatively, and why they may be marginalised. This is followed by a section offering basic information on the most commonly used substances and their effects. This has been kept simple, while acknowledging that it is vital knowledge for all social workers, no matter their field of practice. While much of this offers a sound account of our shared social history, the section on drug policy and legislation are relevant to UK, their politics and public health measures being different to Aotearoa New Zealand. Therefore in part this section is not relevant to social work practice in Aotearoa New Zealand.

Part two focuses on problematic substance use among a number of diverse populations, outlining key vulnerabilities for each group, including lesbian, gay, bisexual and transgendered communities. Problematic substance use across the lifespan is also covered here – with a special focus on working with younger and older people. The number of older people drinking is increasing and comes with increased risk due to physiological changes that occur as people age. The range of ways social workers understand human development is also outlined here. Key issues for providing inclusive and anti-discriminatory practice are outlined.

Part three thoroughly covers some key concepts and models for working with clients with problem substance users in any social work setting, including examples of screening assessments and specific screening tools. There is encouragement here for all social workers to ask service users about problematic substance use and it offers many options for their intervention toolkit to achieve this. Abstinence, harm reduction and 'recovery' are defined. Motivational approaches, fundamental to working with problem users (and the best evidenced model) is covered well. The AA twelve step model is included. Relapse prevention is explained as a dynamic and complex process and as an absolute must when working with problem users who are attempting behavioural change. Finally brief interventions and suggestions of how to conduct them is well covered.

Part four has a focus on specific social work settings, including problematic substance use in disability settings, working with dual diagnosis clients in mental health settings, parenting issues and finally working in health care settings with the significant issues of pain management, HIV and HCV (hepatitis C virus). The author acknowledges that these are complex areas of practice. The chapter is comprehensive, including case studies, and outlines some key tasks that may be appropriate.

There are a number of books written by New Zealand authors available on this subject, but perhaps not targeted at social work practice specifically. This book is relevant to social work practice in Aotearoa New Zealand with the exception of Part One which covers UK policy and legislation. It is very readable, and informative. Although it must not be assumed that all substance use is, or will become problematic, this book sets out to provide information to inform and it succeeds at this. I would recommend this book to social workers in any field of practice who wish to concern themselves identifying problematic substance use among their clients.

### Janice Paulin

Registered Social Worker, Capital & Coast District Health Board Addiction Services.

# Something different about dad. How to live with your Asperger's parent. Written by Kirsti Evans and illustrated by John Swooger. London. Jessica Kingsley Publishers, 2011. 143 pages. Paperback.

There is something different about the way that this book has been written and illustrated that immediately captures me, as the reader. Kirsti is an Autism Quality Development Advisor, who writes from the perspective of Sophie, whose Dad, Mark, has Asperger's. It's a serious subject, but with great comic strip illustrations throughout.

Kirsti covers the major features of Asperger's, namely stress; emotions and relationships; communication and imagination. Sophie learns about her dad's positive attributes as well as hissocial and emotional difficulties.

I found the book easy to read but do not agree with Kirsti when she states that the book would suit seven to fifteen year olds. Seven year olds might struggle or be confused with it and find it quite complex. They also might think that they have to 'fix' Dad or make all the compromises, hence the younger children do need to have a adult support them through the reading of this.

I found the book much more fun to read when I read it aloud and could 'become' all the different characters in the book. Some of the examples are exaggerated and as long as you read the book with this in mind, it could become a really useful resource for families and professionals.

Definitely recommended reading. The book can be obtained from Footprint Books.

Maureen Macann

Senior Clinical Social Worker, Child, Adolescent and Family Mental Health, Alcohol and other Drug Service, Palmerston North.

# Baldry, E., Hughes, M., Burnett, L., & Collinson, I. (2011). *Studying for social work*. London: SAGE Publications Ltd. Softcover, 133 pages.

As a social work educator I was keen to read this book, hoping it would offer new insights that would enable beginning students to feel more confident as they start their journey of becoming a professional social worker. Studying for social work covers many of the issues other books do on the same topic. However, the approach that Baldry, Hughes, Burnett and Collinson have taken is fresh and engages the reader from the first page. Woven throughout the book is the principle of integrative practice; that the study skills an effective student develops are also vital for competent social work practice. This integration was especially evident in Chapter 4: Learning for Professional Practice: A social worker in the making. Here students gain insights about the importance of teamwork, the ability to collegially work with other students, and learning how to give and receive feedback. These skills are related to practice such as receiving feedback from clients and understanding ways to manage conflict within the team at work.

The authors have interviewed a number of social work lecturers and students, and quotes from their interviews are strategically placed throughout the book. Some of the comments

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by Australian students are very similar to the ones I hear from students at CPIT such as how do I transfer from academic writing to the first person? And still make it sound academic? In Chapter 6, 'Critical Thinking, Reading and Writing', a discussion between four lecturers is used to explore the meaning of critical thinking; Baldry et al draw conclusions from this discussion and emphasise the importance of being curious when examining a text for meaning, identifying strengths and limitations along the way.

This text would be valuable for all social work students. Beginning students are lead along a pathway developing strategies to balance study and personal life to critical thinking and making connections with texts and research. Then students engage in the process of academic writing which offer excellent tips that should ensure rough drafts are not handed in as a final piece of work. This section of the book can be utilised by students in the final year of their study.

I was surprised to find the chapter that deals with discussions, presentations and role plays at the end of the text, as students are often engaged in discussions and roles plays before they have submitted any written work.

While the layout is easy to read and the font a good size, one aspect of the publication that could be improved is the light grey colour of some headings. If readers are tired or there is a lot of natural light the pale colour may be a problem.

As an educator, I have utilised the reflective questions and tips for small group discussions. The book is now marked with many different coloured post it notes and has the appearance of being a resource that is well used. After recommending this book to students I have noticed that it is often unavailable in the library and assume it is on loan, helping students to navigate their way through their social work studies.

Karen Whittaker

Social Work Educator, Christchurch Polytechnic Institute of Technology, Christchurch, New Zealand.

# Hanvey, S., Philpot, T. & Wilson, C. (2011). A community-based approach to the reduction of sexual of reoffending: Circles of support and accountability. Jessica Kingsley Publishers, London. 192 pages.

Stuart Murray Wilson (a.k.a. the Beast of Blenheim - sic) has clearly grabbed the headlines over the past three months in terms of being paroled to the community after serving a long prison sentence for a long history of heinous sexual crimes against women. What is interesting about this case is the sense that no community wants someone like Mr. Wilson residing in their backyard. He is therefore living in a house on prison land. There is a growing body of knowledge that would indicate that isolation is the worst thing to do in protecting the community from reoffending by high risk antisocial predators such as Mr. Wilson.

I was therefore pleased to read this book in the context of the current debate about what to do with entrenched and difficult sex offenders. For those who are not aware of the Circle movement, a brief history lesson. Since 2001 a growing body of practice has developed around building accountability and support for men who have sexually offended, probably the most

despised group within society. The foundations of the approach were laid by the Canadian Mennonites, a faith-based community, who had an interest and a conviction to make faith active. Circles are primarily designed to reduce reoffending. Each circle is a small group of between four and five people from diverse backgrounds. They don't get paid for their time and because they stand outside of the formal systems of control, can act as a protective factor in terms of reducing potential reoffending. Circles of support and accountability have at the heart a restorative justice philosophy. It is the belief that when people are in relationship with each other, this develops mutual responsibility and expectation. It stands therefore in contrast to exclusion and retribution processes that have been shown to increase risk.

The authors make no pretense about writing a non-academic piece. However, the book is grounded in practice and the narrative of four main stories along with that of Circle members. The book reads well and covers a brief theory section on what we know about sex offenders to provide context for the rest of the book. Circles of support have been utilised most for those men who have sexually offended, who are isolated and at the high end of the reoffending risk spectrum. These men are more likely in terms of presentation to exhibit the following factors: exhibit anti-social predatory practices, possesses strong criminal dispositions, be highly invested in criminal behaviour, actively search for criminal opportunities, more easily succumb to temptations, exploit opportunities, have a pattern of offending that generally started during adolescence, and are persistent over time in terms of sexual offending. While this group are the smallest across the sex offender population, the numbers of victims are significant.

The power of circles of support and accountability is in having a group of people who actually know in detail what is happening with the man who has sex offended. As one man (Gerry) in the book describes:

I was sitting there and thinking, 'Why are they doing this? Why on earth would they want to be involved with me?' I was honest about it, I felt pretty suspicious. 'I don't really get this,' I said. 'I understand the idea of a Circle, but why on earth would you want to associate with me?' Again, it was, 'The fact you're a person, you're a human being, you know you're not your offenses, you've done bad things, but that doesn't mean that you're all bad, and the good stuff is good.'

It took me a while to accept that, but as I say, now I have various friends that I associate with. I wouldn't say I have any real close friends outside the Circle, but my Circle members actually know me, they know everything about me, and I feel safe with them. I can go to my Circle if I'm feeling down or, for arguments sake, I get invited to go somewhere and I think, crap, there are going to be kids there (p83).

The critical question for social work is do circles of support reduce risk to others. While circles are still relatively new as an intervention for sex offenders and may not necessarily meet the standards of the risk – needs - responsivity model, it does resonate well with the Good Lives Model of offender rehabilitation which is predicated upon meeting 'human goods' through pro social means (Ward & Maruna, 2007). Research is beginning to emerge and the book reports that those attending a circle had a reoffending rate of 70% less than a non-Circle control group (N=45).

The last chapter of the book is thoughtful in that it deals with the media frenzy around sex offending. It draws attention to the moral panic and the language used in the political

and public discourse around men who have sexually offended. Words such as monster, beast, and pedophile position sex offending as a constant worry and an ever present threat. This hides the fact that most sexual offending is carried out by family members or those known and trusted by the child. It gives pause to reflect upon the impact of naming and shaming. While on the one hand it is important that children break 'bad secrets' by bring-ing abuse into the open, on the other it is important that we do not ostracise men who have sexually offended as this increases risk. Describing Mr Wilson as a 'beast' does little to create accountability and therefore greater safety to the community he is now living in. I recommend this book to social workers who work in the area of child safety as well as sex offender intervention.

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