



AOTEAROA NEW ZEALAND SOCIAL WORK

VOLUME 32 • NUMBER 4 • 2020

ISSN: 2463-4131 (Online)

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This final issue of *Aotearoa New Zealand Social Work* for 2020 is a rich selection of diverse content. The first part of the issue is a special section on social work and animals which has been edited by Simon Lowe and Carole Adamson. In “Expanding the field: animals and social work,” Lowe and Adamson introduce contributions to the issue reflecting a popular new field of social work, spanning animal rights, the human–animal bond and animal-assisted activities, and interventions and therapies. The section comprises four full articles, two research brief reports and a viewpoint, with several further contributions to be published in March 2021.

Raewyn Tudor leads the general section of the issue with a report on a qualitative study of recovery policy and school social work practice following the Canterbury earthquakes. Tudor provides a Foucauldian analysis of social workers’ perspectives on the emotional and psychological challenges for children, where often the main interventions were direct therapeutic work. These practice accounts reveal moments where social workers contest predominant, individualising conceptualisations of need. Tudor argues that, after disasters, social workers can reflect on various responses schools offer children and families and critique the dominant norms of risk and vulnerability.

Jo Appleby, Barbara Staniforth, Caroline Flanagan, and Clarke Miller discuss the development of clinical social work in Aotearoa New Zealand against the background of the debates about professionalisation and registration in the profession. An overview of the social work training landscape and post-qualifying mental health specialisation options precedes a discussion of the theoretical underpinnings of clinical social work, including systemic models, recovery approaches, strengths-based models,

indigenous models, narrative therapy, cognitive behavioural therapy and dialectical behaviour therapy. Four vignettes of clinical social work are presented before a discussion about the future implications for clinical social work in Aotearoa New Zealand.

Sharnee Diamond and Chrystal Jaye report on a project which aimed to identify the support needs of older people living in rural Central Otago, Aotearoa New Zealand; and to ascertain if a pilot social work position was meeting these needs. The article reports the positive impact that a social work position in Age Concern Otago has had for clients of the service and describes the growing need for social support for older rural people in Central Otago. The authors advocate for greater resourcing of social work services and better coordination and linking between the government and non-government agencies serving older adults.

In a second article focusing on the needs of older adults, King Lok Kan, Helene Connor, and Liz Beddoe report on a study of the experiences of older Chinese migrants living in Auckland and local social service practitioners who work with older adults. Both Chinese migrants and social workers agreed that language barriers and transportation problems were obstacles that hindered retired Chinese people accessing social support and health services. These barriers stood in the way of their fuller participation in social life in Aotearoa New Zealand and the enjoyment and ease of their daily lives. The migrant participants connected their lack of English proficiency to their dependence on family and wanted more support to improve their English in order to reduce their reliance on their children. Practitioners recognised that support for those working with retired Chinese migrants is insufficient because there are insufficient Mandarin- or Cantonese-speaking social workers or

support workers in their organisations.

Canadian authors, Trish Van Katwyk, Veen Wong and Gabriel Geiger consider the ethics and efficacy of a nonviolent, “braided” methodology used by a research study called “The Recognition Project”. The methodology of The Recognition Project wove participatory, community, and arts-based approaches to create a cooperative, relationally oriented environment where three distinct communities of interest could contribute respectively—and collaboratively—to the sharing, creation, and public dance performance of stories about self-harm. The project brought together university-based researchers, community-based researchers who had engaged in self-harm, and an artist team of choreographers, a musician, and professional youth dancers. Van Katwyk and colleagues argue that it is important for social work researchers to critically examine the research methodologies that are used and to reflect about the ethical implications of research practices. A case is made to develop non-oppressive practice by privileging the knowledge that has been gained through non-oppressive research.

The final full article in this issue explores the role played by news media in the representation of mental health issues. Natasha Oliver, Liz Beddoe, and Carole Adamson report on a study which sought the perceptions of key informants on this topic. Participants included those with perspectives as mental health professionals, mental health advocates, mental health consumers and/or media professionals. The participants in this small study felt that news media strongly influence how the public views mental health, but believe media representation has improved in recent years. However, participants described an ongoing absence of stories illustrating successful interventions and felt that the portrayal of mental illnesses still misrepresents them and encourages stigma. Mental health services and mental health professionals were seen as poorly represented by the news media,

which was thought to deter help-seeking and hinder trust.

We take this time to thank all of the authors and reviewers who have contributed to our four issues in 2020. We recognise those who said “yes” to an extra task in a very demanding year. At the time of writing we have a good number of articles in review for 2021. The journal is expanding its readership and in 2021 we will build on our international audience. In the last calendar year, we have had 27,533 unique users: 46% are from Aotearoa, 12% from the USA, 11% from Australia, 10% from the UK and the remainder from other countries. Over the four 2020 issues, our authors have hailed from Canada, Ireland, Australia, Scotland and England, as well as from Aotearoa.

We started tracking users using Google analytics in June 2016. In that year the number of monthly unique users peaked in 2016 at 1,507 unique users during the month of August. There has been a steady year-on-year growth in the number of unique users with the most recent monthly peak in August 2020 at 3,626 unique users (the user base has more doubled in four years).

Finally, the Editorial Collective would like to draw your attention to the two current calls for papers which can be accessed in announcements on the journal website. *Tu Mau*, our Pasifika research and commentary edition, seeks contributions on a broad range of themes of significance to Pasifika communities of practice. This 2021 issue of *Tu Mau* will be edited by Yvonne Crichton-Hill, Tracie Mafile’o and Analosa Veukiso-Ulugia. A call for papers has also gone out for a special edition to capture new ideas, developments and critiques of practice in the mental health sector. The editors, Simon Lowe and Joanna Appleby, hope to receive articles that analyse contemporary government policy, consider social and cultural co-determinants of mental health, and address public mental

health understanding, or interventions that have helped to target mental disorders and promote mental health nationally and internationally.

As always, for information, or to discuss your idea for an article, please contact us at editors@anzasw.nz

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Expanding the field: Animals and social work

Carole Adamson and Simon Lowe

In calling for articles related to social work and animals, the ANZSW journal invited contributions from what has become a wide-ranging field of social work spanning animal rights, the human–animal bond (HAB), and animal-assisted activities, interventions and therapies. This issue contains the first collection of articles, with more to follow.

Central to positioning animals within the professional gaze of social work in Aotearoa New Zealand is the significant change within the new *Code of Ethics* (ANZASW, 2019). The final ethical principle of Manaakitanga in the code is:

We recognise the sentience of animals and ensure that any animal engaged as part of our social work practice is protected.

The inclusion of animal sentience, and its imperative for seeing human beings (social workers included) in relationship to other animals, follows the same recognition of animal status within the Animal Welfare Amendment Act (2015). Globally, these shifts in perception regarding the human–animal relationship parallel recent court decisions regarding the rights of the natural world (La Follette & Maser, 2019) and, specifically relevant in Aotearoa New Zealand, the *personhood* of rivers (Argyrou & Hummels, 2019). Overall, these legal statements reflect a sea change in the construction of values about the relationship of human beings to the rest of the natural world. The One Health concept (Destoumieux-Garzón et al., 2018) sets out a platform for the integration of human health, animal health, plant health, ecosystems' health and biodiversity as an aspirational statement that represents much

current thinking about the status of our planet. The ANZASW *Code of Ethics* (2019) is an articulation of social work values within this purview; this issue considers how animal-inclusive knowledge and practice might also inform social work.

We are practising and learning about social work at a time when a shift in values is apparent, from regarding humans at the top of the hierarchy in the natural world, with *our* needs holding dominion over all other living beings, to a profound interconnectedness appreciated, protected and sustained by indigenous and traditional societies globally, but eroded and undermined by economic forces manifesting in urbanisation, industrialisation and commodification of the natural world for profit. This understanding of the interconnectedness of all things is not the exclusive domain of indigenous societies although, in Aotearoa New Zealand, it is Māori who have been the kaitiaki and standard-bearers for holistic perspectives in the face of scientific and economic systems that have separated humans from a recognition of their interdependence on nature. Nevertheless, the notions of *dominion* and *domination* suggest an intersectional relationship between processes of colonisation on one hand, and the nature of the human relationship with animals on the other.

Covid-19 is a case in point. At the time of publication, we are currently embedded in a series of lockdowns and pandemic management levels following a worldwide coronavirus outbreak. The global response to Covid-19 has raised considerable issues for social work over human rights, the implications of which are likely to have

generational impact. However, as to *non-human* rights, world attention is currently at a minimal level. The virus, spreading so easily from human to human, has been profiled by governments and media as a health and economic disaster *for humans*. There is little recognition of, or dynamic response to, the zoonotic (animal to human) link in the origins of the outbreak despite considerable evidence that this pandemic (as many others) originated in a wet market, this one in Wuhan, China (Riou & Althaus, 2020). Both living and dead animals from farmed and wild sources are sold in wet markets, where cross-species transmission can easily occur (Woo, Lau, & Yuen, 2006). This highlights the intimate inter-relationship between animals and humans: the consumption of animals by humans, the trade in exotic animals as commodities, and human attitudes to the care and wellbeing of animals. These issues, it can be argued, are intrinsically rights issues for us to consider, ones that expand our gaze from humans to the nature of our relationship with animals.

Even without a virus-infused lens, we need to consider human–animal relationships from a rights-based perspective. The implications of regarding animals as sentient beings puts on our agenda issues of consumption, commodification, welfare and relationship (for instance, Evans & Gray, 2012). It provides an imperative to practise social work from an animal-inclusive standpoint, one that (as depicted in Figure 1), represents a shift away from seeing animals as secondary in rank to humans, towards an inclusive stance which forces us to reconsider how we see and relate to companion animals, farmed animals and those remaining in the wild.

Positioning ourselves at different points on this continuum allows us to tease out strands of our relationship with other animals, both within and outside of the profession of social work. Through the processes of recognising that animals have feelings, can sense pain and make choices (see, for instance, Marino & Merskin, 2019), our perception of human rights in relation

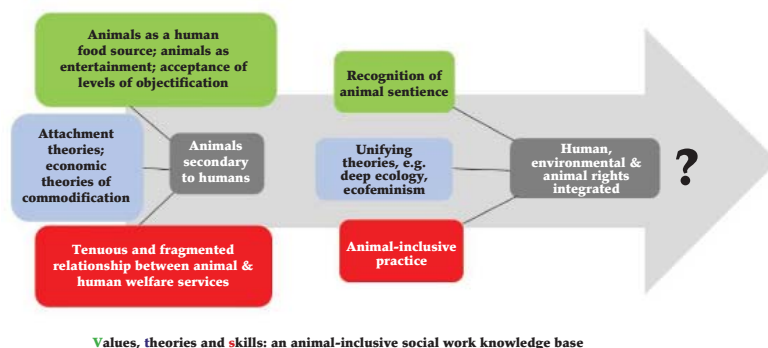


Figure 1. A continuum of human–animal relationships.

to animal rights may shift from seeing human rights as a core mandate of social work whilst still seeing animal rights and activism as being still somewhat of a fringe activity that sits uncomfortably in a nation still reliant on animal-based food production (Adamson & Darroch, 2016). As Evans and Gray (2012) challenge us, “is it enough that we don’t eat our co-workers?”

So why should we, as social workers, pay attention to animals? Our IFSW / IASSW Global definition, after all, refers to people and not to animals (IFSW, 2014). An animal-inclusive gaze can tell us more about us as human beings, including issues of attachment, abuse, and disaster, and the role that companion animals play in wellbeing, shaping our behaviour as they are, in turn, influenced by us. The development of the SPCA Targeted Interventions Portal (<https://spcatargetedinterventions.nz/>), the establishment of Animal Evac, a charity assisting animals (and therefore their people) in times of disaster (<https://www.animalevac.nz/>) and the ANZASW Practice Note on Animal in Social Work Practice (developed by Nicole Robertson and the ANZASW Animals Interest Group) reflect the growing recognition of the impact of the HAB and the implications when this breaks down. Other stances represented within this issue and the broader literature capture some elements (underpinned by our understanding of attachment theory amongst other perspectives) of how animals can contribute to wellbeing and can assist us

in learning and healing, such as in Michele's Jarldorn's research report on the benefits of companion animal relationships for formerly incarcerated women. A social justice lens in the article by Atsuko Matsuoka, John Sorenson, Taryn Mary Graham and Jasmine Ferreira reminds us that housing provision for older adults with companion animals is not just a resourcing issue, but intersectional institutional oppression. Other examples of the positive benefits of the HAB are through animal-assisted activities such as rest home visits; animal-assisted interventions (such as equine-human interactions described by Leitz and Napan in this issue); and animal-assisted therapies. All of the following articles therefore shine some light on the key question: what is the relationship between social work and animals?

First up in this collection is an article by Polly Yeung, Nicole Robertson and Lucy Sandford-Reed, reporting on research conducted with social workers in Aotearoa New Zealand regarding their familiarity with, and level of knowledge of, practice using the HAB within social work intervention. They highlight the gap between, on one hand, the high levels of awareness regarding both the positives of human-animal interaction and its negative aspects such as domestic violence, and on the other hand, the scarcity of guidelines and training that can ethically support the incorporation of animals within social work practice. Locating their findings on the continuum of human-animal relationships in Figure 1, we can see that this foundational research suggests a huge need for the sentiment for, and practice of, involving animals within social work to be supported by training, guidelines and ethical codes of practice. Without these, the lack of structural and organisational support for animal-inclusive social work practice puts both human and animal welfare at risk.

Nik Taylor, Heather Fraser, and Damien Riggs's article makes the case for companion animal-inclusive domestic violence service delivery, discusses the implications for the domestic violence and wider social service

fields, and challenges the assumptions that have been made within the previous, human-exclusive focus of health and social service practice. Making a separation between human- and animal-directed violence, they argue, is not only anthropocentric but not the best social work practice, given the presence of companion animals in 64% of households in Aotearoa New Zealand. These recommendations corroborate the findings of Yeung, Robertson, and Sandford-Reed's research, from the perspective of social work interventions in domestic violence as opposed to animal-assisted interventions and therapy. Beyond highlighting the dynamic relationship between humans, companion animals and abuse, the strength of the article is in its consideration of practice, policy and procedures, and the importance of including animals in social work education and post-qualifying training. The authors position themselves in a perspective towards the right-hand side of the continuum in Figure 1, suggesting that animal-inclusive practice in domestic violence moves beyond seeing such abuse only through an anthropocentric lens but, instead, recognising the impact of domestic violence on the sentient beings who share our homes.

Interspecies social justice issues are continued in the article on older people with companion animals and their housing needs. Atsuko Matsuoka, John Sorenson, Taryn Mary Graham, and Jasmine Ferreira suggest justice for companion animals underpins the social justice needs of older people seeking adequate rental housing, and that classism and speciesism contribute to the struggles of older people seeking to be housed along with the animals that share their lives. Kainga Ora, the social housing agency for Aotearoa New Zealand, now enables people to include their companion animals on their tenancy agreement where previously, a companion animal had to be identified as an assistance animal for the physical or emotional needs of their companion human. The restrictions on those seeking to live with companion animals in private rental accommodation remains.

A case study in equine-assisted learning is provided by Leitz and Napan as an example of how animal–human relationships can enhance human wellbeing. The authors suggest that, through relationship with animals, people experiencing violence, abuse and trauma can safely explore issues of trust, relationship and interdependence. Whilst focusing exclusively on the benefits to humans (and therefore, reflective of only one side of the human–animal relationship), the article explores the perceived sensory, physical, emotional and behavioural as well as relational benefits of interacting with horses, as experienced by participants at this equine centre north of Auckland.

Two rich research reports and a practice viewpoint supplement this issue’s focus on human–animal relationships and their importance to social work. Jarldorn’s study with formerly imprisoned women concerned the factors that we need to understand about imprisonment and release into the community, and found that relationship and connection were the significant factors for a successful re-adjustment into community living. The study had produced an unanticipated finding—that for many of the women, their relationships of importance were with their companion animals rather than humans, echoing Leitz and Napan’s suggestion that, for people who have had trust in humans damaged by life experiences and trauma, animal relationships can provide necessary non-judgmental affirmation. From a social work education perspective, Letitia Meadows, Karen Howieson, Tessa Bashford and Brooke Silke-Atkins consider the benefits of animal-assisted intervention both on students and young people, in their reflections on youth work placements involving animals. Nerilee Ceatha’s research report provides us with a reflective account of the parallel experiences

of writing a PhD and the experience of living with a rescue dog, framed up within theory and methodology underpinned by the ethics of *learning with* those with whom you have a connection. Her summary provides a fitting conclusion to this editorial:

By attending to our relations with all living beings and ‘learning with’ companion-animals, we can become better social workers, researchers and human beings.

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Aotearoa New Zealand social workers and their views of inclusion of animals in social work practice – A descriptive study

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ABSTRACT

PURPOSE: Given the benefits of the human–animal bond (HAB), animals are being used in a range of social work settings. It is important to gain a more in-depth understanding of social work practitioners' knowledge and actions in these interactions. The purpose of this study was to examine the views and knowledge of social workers in relation to the HAB in Aotearoa New Zealand.

METHODS: A survey using an online portal was administrated to qualified social workers via professional and community networks to assess their exposure, level of knowledge, support, training, and barriers to animal–human relations.

RESULTS: A total of 140 questionnaires were used for analysis. The results, similar to findings from Canada and the United States, indicate that social workers seemed to have high exposure to information about the benefits of HAB and understanding of the connections between animal abuse and child abuse/domestic violence. Only 68% have included animals in their social work practice. The vast majority have had no specific training in HAB. Untested or untrained animals were also reported to have been used in social work intervention practice. The lack of clear workplace policies, support and professional training in HAB were key barriers that inhibited the inclusion of animals in practice.

CONCLUSIONS: Lack of understanding over how to include HAB in practice has serious implications for social work. HAB continues to influence and contribute to the lives of families and individuals and social workers have a duty to develop general awareness and knowledge of the benefits to human health and wellbeing of interacting with animals.

KEYWORDS: Human–animal bonds; social work practice; animal-human relations; social justice

The human–animal bond has received growing interest in recent years (e.g., Holcombe, Strand, Nugent, & Ng, 2016; Krause-Parello, Gulick, & Basin, 2019; Payne et al., 2015; Payne, DeAraugo, Bennett, & McGreevy, 2016). Bonding between animals and their human caregivers has been shown in numerous studies to improve human emotional and physical health (Barker, Rogers, Turner, Karpf, & Suthers-McCabe,

2003; Friedmann & Son, 2009; Walsh, 2009; Wells, 2019). In Aotearoa New Zealand (NZ), there are at least 4.6 million companion animals and 64% of households are home to at least one companion animal (New Zealand Companion Animal Council Inc., 2016). Pets and/or companion animals are no longer considered just as a member of the family (Risley-Curtiss, 2007) and are perceived as sources of social support

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potentially reducing their caregiver's reactivity to stressful situations (Allen, Blosscovich, & Mendes, 2002; Taylor & Fraser, 2017). Companion animals and other animals are increasingly included in animal-assisted intervention (AAI) or animal-assisted therapy (AAT) as therapeutic agents to treat physical, mental and behavioural disorders for children, young people, adults and older adults, such as depression, attention deficit/hyperactivity disorder, schizophrenia, alcohol/drug addiction, trauma and chronic diseases (e.g., Fraser, Taylor, & Signal, 2017; Gan, Hill, Yeung, Keesing, & Netto, 2019; Gee, Mueller, & Curl, 2017; O'Haire, Guerin, & Kirkham, 2015; Schuck et al., 2018; Taylor, Fraser, Signal, & Prentice, 2016; Uglow, 2019). Fine (2010) provides a succinct compilation and discussion on how AAI/AAT can offer therapeutic benefits for social work clients. The presence of animals in therapy sessions can provide a bridge into therapeutic alliances as clients may find it easier to engage with an animal before forming a trusting and working relationship with a therapist, particularly for children and people with a history of abuse and trauma (Geist, 2011; Thompson & Gullone, 2006).

While a substantial amount of research has supported the powerful relationships between humans and companion animals and other animals from a positive perspective, companion animals are also victims of human cruelty (Arkow, 2019; Ascione, Weber, & Wood, 1997; Gallagher, Allen, & Jones, 2008; Holcombe et al., 2016). In 1987, cruelty to animals was added as a criterion for conduct disorder in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (Arkow, 2019). Further studies continue to confirm the growing evidence of a link between animal cruelty, child maltreatment, domestic violence, elder abuse and increased criminality with child and adult animal cruelty (Arkow, 2015; Ascione, 2005; Ascione & Shapiro, 2009; Faver & Strand, 2003, 2008; Flynn, 2011; Humphrey, 2002; Long et al., 2007).

Despite the prolific research correlating interpersonal violence, family violence, and child and adult animal cruelty mentioned, the benefits of cross-sector reporting continue to be hindered by the separation of animal and human welfare when it comes to intervention (Long, Long, & Kulkarni, 2007). This disconnection ignores animal abuse being an indicator of human violence that often exists concurrently with domestic violence (Faver & Strand, 2003) which has become a serious public health issue. In recent times, a *One Welfare* approach has also been established to complement the *One Health* approach, which focuses on the interconnections between animal welfare, human wellbeing and the environment in order to improve ways of working in a more integrated approach to achieve better animal welfare and human wellbeing globally (Pinillos et al., 2016).

Professionals in many disciplines, such as veterinarians, are now more aware of the link between animal abuse and human violence and several commentaries and reviewed articles have discussed the importance of active participation of these professionals in the cycle of violence (Benetato, Reisman, & McCobb, 2011; Lockwood & Arkow, 2016; Robertson, 2010). Despite scientific publications that have shown an association between animal abuse and interpersonal violence, and that animal abuse is an indicator of other forms of violence (Arkow, 2019; Flynn, 2000), studies in Australia, NZ and the USA reported that veterinarians were still reluctant to report cases of animal abuse (Donley, Patronek, & Luke, 1999; Green & Gullone, 2005; Williams, Dale, Clarke, & Garrett, 2008). Moreover, despite the recognition of the existence of the link between animal abuse and family violence in veterinary medicine, only around 50% of respondents in Australia, NZ and the USA reported to have felt responsible for the human victim of violence (Green & Gullone, 2005; Sharpe & Wittum, 1999; Williams et al., 2008). Although veterinarians can play a key role in detecting animal abuse and intervening

in different types of human violence, research has also reported barriers such as the lack of training to identify animal abuse (Sharpe & Wittum, 1999); lack of clarity in definitions of abuse, cruelty and neglect (Green & Gullone, 2005); lack of resources to help victims (Williams et al., 2008); lack of information regarding legal rights and responsibilities toward the victims of abuse (Sharpe & Wittum, 1999); and, lack of professional education about preventing animal abuse and human violence (Green & Gullone, 2005).

Social work has been connected to human–animal issues in practice for over 30 years starting with Gerda Bikales (1975) who called for consideration of human–animal relationships into intervention planning. Emeritus Professor Christina Risley-Curtiss in the USA has advocated for many years for social workers to focus on human–animal interactions to address the social support role of companion animals for individuals and within family systems, the connection between animal cruelty and violence towards humans, and the therapeutic benefits of companion animals (Risley-Curtiss, 2007, 2010, 2013; Risley-Curtiss, Holley, Kodeine, 2011; Strand & Risley-Curtiss, 2013). This has, however, historically been a challenge for social work, as Sable (1995) argued that the social work literature has given little attention to the research or theoretical explanation of the human–animal bond while other social work scholars (e.g., Arkow, 2019; Ryan, 2011) have criticised social work training and practice and the focus solely on humans, which limits a holistic response to other inhabitants in the shared eco-system (Hanrahan, 2011; Ryan, 2011). While some social work literature has advocated for social workers' responsibility to attend to the welfare of animals as part of their code of ethics and practice (O'Brien, 2003; Wolf, 2000), social work as a discipline is still struggling to solidify and professionalise the integration of animals into social work theory and practice (Fraser et al., 2017; Strand et al., 2012).

Veterinary social work (VSW), developed by Dr Elizabeth Strand from the University of Tennessee (Jackson, 2013), has pioneered the intersection between veterinary medicine and social work practice. VSW focuses on the human side of the human–animal bond through four key areas: grief and loss of an animal, compassion fatigue in the animal service fields, the link between animal abuse and human violence, and animal-assisted intervention (Holcombe et al., 2016). If animals and social work have been connected for decades, it is very likely that social workers already work with individuals who have valued relationships with animals, rather than simply as tools in a therapeutic sense (Tedeschi, Fitchett, & Molidor, 2006) and therefore, discussions around the inclusion of animals in social work practice should not just apply to those involved with VSW but be addressed in social work education programmes and curricula (Taylor et al., 2016; Tedeschi et al., 2006). A recent research by Chalmers et al. (2020) suggested the application of zooeyia within social work as one approach to understand HAB. Zooeyia refers to positive impacts on human health from the HAB, which includes the physical, psychological, social and spiritual health benefits from the interactions with animals, particularly with companion animals (Hodgson & Darling, 2011). Operating from the profession's ecological, strengths-based or family-centred perspective, which requires one to look at people in social and natural environments, social work researchers, educators, and practitioners can join other disciplines to incorporate human–animal relationships into their work to enhance the professional's ability to help clients and animals (Risley-Curtiss, 2007). However, studies conducted in the USA (Risley-Curtiss, 2010; Risley-Curtiss, Rogge, Kawam, 2013) and in Canada (Chalmers et al., 2020; Hanrahan, 2013) reported significant gaps within social workers' knowledge of human–animal relations in social work practice. Interest in the human–animal bond and social

work practice in Aotearoa NZ has been gaining momentum in recent years (e.g., Adamson & Darroch, 2016; Darroch & Adamson, 2016; Evans & Gray, 2012; Evans & Perez-y-Perez, 2013; Walker, Aimers, & Perry, 2015, Walker & Tumilty, 2019). The Aotearoa New Zealand *Social Work Code of Ethics* has also included a statement to recognise “the sentience of animals and ensure that any animal engaged as part of our social work practice is protected” (ANZASW, 2019, p. 11). Despite the importance of the bond between animals and humans being discussed in Aotearoa NZ based literature, there remains a paucity of empirical evidence on social workers’ views on the inclusion of animals in their practice. Gaining an understanding of social workers’ knowledge in the area of human and companion animal relationships and examining the barriers to inclusion of animals in social work practice can contribute to a better understanding of the potential benefits to social work practice and policy development.

Based on these aforementioned findings, particularly the research conducted in the USA (Risley-Curtiss, 2010) and Canada (Chalmers et al., 2020; Hanrahan, 2013), the overall purpose of this study was to examine the views and knowledge of social workers in relation to the HAB in Aotearoa New Zealand. This study had three objectives: (a) to explore the extent of exposure of social workers to and knowledge of HAB in social work practice; (b) to investigate how much social workers have included companion animals in their assessment and treatment of clients; and (c) to identify the degree of professional education and/or training received by social workers to include companion or other animals in their practice.

Methods

Study population

Between late-October 2018 and mid-February 2019, an online survey with the aim of exploring social workers’ perspectives

on including animals in their practice was sent out to qualified social workers to invite them to participate. This was sent out via the Aotearoa New Zealand Association for Social Workers and other professional and community networks. A low-risk ethics notification was obtained from Massey University prior to the commencement of the research. One hundred and fifty-three responses were retrieved from the online survey portal. After data cleaning and mining, 13 responses were omitted due to significant data missing (50% or more) from the main questions and the socio-demographic information (80% or more). A total of 140 responses were retained for analysis. Given the online survey was circulated to many different groups and networks, we were unable to ascertain the actual response rate.

Measures

The measures used were primarily derived from previous research and are outlined in this section.

Exposure of animal–human relations. To ascertain the level of exposure about the human–other animal bond, respondents were asked to rate a total of 7-item, derived from Risley-Curtiss (2010), on a 3-point scale (1 = *very little/none* to 3 = *a lot*) on how much they had heard or read about human–other animal relationships. Examples of these items were “Have you heard, read, been given information on link between animal abuse and child abuse, animal abuse and domestic violence, how to help people who abuse animals?” Cronbach’s alpha was at an acceptable level at 0.78.

Social work practice and animal–human relationship. Five questions were adapted from previous research (Risley-Curtiss et al., 2013; Risley-Curtiss, Zilney, & Hornung, 2010) to ask if social workers had come across animal abuse issues in their practice during the past five years using a 3-point scale (1 = *very little/none* to 3 = *a lot*). An example of the question was “Have you

encountered clients who reported safety-related concerns for animals in their own homes in the past five years?" Cronbach's alpha was reported at 0.61. Participants were also asked to rate two statements regarding their views on the benefits of animal-human relationships in social work practice "inclusion of animal in practice is a beneficial adjunct to my social work practice" and "participation in human therapeutic interventions is beneficial to animal wellbeing", using a 5-point Likert scale from 1 = *strongly disagree* to 5 = *strongly agree*.

Education and training. This section included questions adapted from Risley-Curtiss (2010) and Schlote (2002). Respondents were asked whether they have received any training in including animals in social work practice (formal or informal) (yes/no); in what areas the animals were involved; reasons that would prevent them from using animals in their practice; how many years of experience in using animals in their social work practice; where the context in which animals were used in practice was; who the clients were; what service areas were the animals involved with clients; what kind of animals were used and whether they have been tested or certified. A text box was available to provide written responses regarding the type of animals used in practice.

Organisation commitment. Respondents were asked eight questions regarding the role of their organisation in relation to the use of animals in service provision. These questions were developed based on reviewing existing literature (Risley-Curtiss, 2010; Risley-Curtiss et al., 2010; Schlote, 2002; Trembath, 2014).

Socio-demographics. Participants reported their age, gender, education levels in social work, ethnicity, years of practice experience, main area of social work practice, current employment, professional affiliations and ethnicity.

Open-ended comments. The final question in the survey was an open-ended question

which screened for any additional comments.

Statistical analyses

The IBM SPSS Statistical package (version 25, IBM SPSS Statistics for Windows) was used for data entry and analysis. Descriptive statistics, mainly through frequencies, was used to describe the results derived from the data. Open-ended responses were gathered to provide a context for quantitative data, and thus were not analysed using a qualitative research approach. Illustrative quotes were selected to highlight certain common and otherwise noteworthy concepts, paraphrasing is indicated by square brackets.

Results

Social workers who participated in this research were older, with 57.9% ($n = 81$) reported to be aged 50 and over and most of them were female (93.6%, $n = 131$). The age group and high percentage of female participants also mirrored the aging workforce and a "female-dominated profession" found in other social work studies (Lewis, 2018; Yeung, Mooney, English, & O'Donohue, 2020). Most of the respondents identified themselves as New Zealand European/Pākehā (75.0%, $n = 105$). Over 50% ($n = 75$) of the participants had a social work qualification at Bachelor's level and 19.3% ($n = 27$) had a Master's level qualification. Around 43% ($n = 60$) of the participants had 16 or more years of social work practice experience and 22.9% ($n = 32$) had five years or less of practice experience. The main area of social work practice reported was in children and family (51.4%, $n = 72$), followed by adults (19.3%, $n = 27$). Half of the participants ($n = 70$) indicated their current employment was in statutory while 37.9% ($n = 53$) was in non-government organisations. As to professional affiliation, 65.7% ($n = 92$) reported to have dual affiliations with ANZASW and SWRB (Table 1).

Table 1. Socio-demographic Descriptions of Study Participants

Items	Number	%
Age groups		
29 or less	11	7.9
30-39	21	15.0
40-49	27	19.3
50-59	43	30.7
60-69	34	24.3
70 and over	4	2.9
Gender		
Male	9	6.4
Female	131	93.6
Ethnicity		
NZ European/Pakeha	105	75.0
Maori	15	10.7
Pacific nations	3	2.1
Indian	2	1.4
African	1	0.7
Chinese	1	0.7
Korean	0	0.0
Other	14	10.0
Social work qualification		
Diploma level	21	15.0
Bachelor level	75	53.6
Entry Master level	27	19.3
Other	17	12.1
Years of social work practice experience		
0-5 years	32	22.9
6-10 years	18	12.9
11-15 years	29	20.7
16-20 years	22	15.7
20+ years	38	27.1
Current main practice area		
Children and family	72	51.4
Adults	27	19.3
Older people	14	10.0
Other	9	6.4
Current employment		
NGO	53	37.9
Statutory	70	50.0
Volunteer	4	2.9
Self-employed	8	5.7
Other	4	2.9
Professional affiliation		
Single affiliation (either ANZASW or SWRB)	43	30.0
Dual affiliations (both ANZASW and SWRB)	92	65.7

Exposure to information on animal–human relations

Participants were asked how much they had heard, read or been given information about the human and animal bond. The majority of the participants responded that they had read or read some/a lot about the positive influence of companion and other animals on humans (97.9%, $n = 137$), followed by a link between animal abuse and child abuse (92.9%, $n = 130$), a link between animal abuse and domestic violence (92.1%, $n = 129$), how to help people who have experienced pet loss (70.0%, $n = 98$), inclusion of animals in assessment and intervention (60.0%, $n = 84$), social workers who include animals in their practice (42.2%, $n = 59$), and how to help people who abuse animals (30.7%, $n = 43$) (see Table 2).

Extent of animal-human relationship in social work practice

Nearly 51% ($n = 71$) of the participants reported that they had come across animal abuse issues in their practice during the past five years. Out of the 71 participants who had encountered animal abuse, 74.6% ($n = 51$) indicated some/a lot in relation to becoming aware of animal abuse as a rising concern in their practice with clients, followed by 64.8% ($n = 46$) who had worked with clients who reported safety-related concerns for animals in their own homes, having worked with perpetrators of animal abuse and with one child (49.3%, $n = 35$) or an adolescent client who reported abusing an animal (49.3%, $n = 35$), and worked with one adult client who reported abusing an animal (29.6%). In addition, they were asked whether there would be any benefits of animal–human relationships in social work practice. Of the 140 participants, 94.3% ($n = 132$) of them agreed/strongly agreed that inclusion of animal in practice such as animal-assisted intervention would benefit their social work practice, followed by 90% ($n = 126$) reporting that they agree/strongly agree that participation in human therapeutic interventions would be beneficial to

animal wellbeing (see Table 2). Over 90% of the final comments provided by participants expressed strong interest in learning more about how to include animals in social work practice or to have this service available to clients even if it was not provided by themselves. These are demonstrated by the following selected quotes from different participants:

“I am looking into post-graduate veterinary social work study and would like to see the field being introduced in NZ. This is an exciting area of growth for New Zealand social work practice.”

“It is a whole new area of concern for social workers that I have only in the last year to become aware of. But nonetheless crucial to develop and be able to access some training.”

“These questions [asked in the survey] have prompted me to have discussions [with my colleagues] about abuse of animals in our assessments and interventions.”

“I think this area is like a gold mine that no one has really clicked [into]. I desperately want to bring animals into my social work practice; however, I don't know where/how to get training or training for my animals. I feel that so many people do not understand the value of animals in practice!! I would love to be an animal practitioner and would advocate for it every day!!”

“I am not interested in taking animals to my clients; however, I would definitely use a service that use animals for therapeutic purposes. Human can benefit greatly from the devotion and trust of animals in their lives.”

Education and training

Out of the 140 participants, 67.9% ($n = 95$) reported to have included animals in their social work practice. However, many of

the participants (87.9%, $n = 123$) reported that they did not have any training (formal or informal) related to including animals in their practice and within this group 64.2% ($n = 79$) had included animals in their social work practice. In fact, one participant expressed a different view about having a specific qualification to practice in this area:

“I don’t think a person needs to be certified. This is an emotional area ... it is more important the therapist has a strong recognition of the role of animals in our world and have a strong personal experience of the value of across species relationships.”

Of the 79 participants who reported having no training but included animals in their practice, 51.9% ($n = 41$) reported to have included animals as part of their interventions, followed by 40.5% ($n = 32$) who included animals as part of their assessment, 20.3% ($n = 16$) who included animals in treating clients for companion animal loss and grief and 3.8% ($n = 3$) included animals in treating clients for animal abuse.

When asked what reasons would prevent including animals in their practice, the top four reasons reported by all participants included: no clear guidelines in agency policy of allowing (or not) animals in practice (45.7%, $n = 64$), lack of training from my social work degree or continuing professional development (37.9%, $n = 53$), not being encouraged by supervisors/management team (35.0%, $n = 49$), and lack of standards of practice and ethical guidelines using animals in practice (33.6%, $n = 47$) (see Table 3). Lacking clarity from agency guidelines and limited training from their social work degree and professional development were also the top barriers reported in Hanrahan’s (2013) survey. It was also interesting to see some specific comments in the final comment box from participants that highlighted the gaps or challenges in including animals in a statutory social work context:

Table 2. *Animal–human Relations (AHRs) and Social Work Practice*

Items	Number (%)	
	Very little/None	Some & A lot
Exposure to information on AHRs		
Positive influence of companion and other animals on humans	1 (0.7)	137 (97.9)
Link between animal abuse and child abuse	9 (6.4)	130 (92.9)
Link between animal abuse and domestic violence	10 (7.1)	129 (92.1)
How to help people who have experienced pet loss	38 (27.1)	98 (70.0)
Inclusion of animals in assessment and intervention	55 (39.3)	84 (60.0)
Social workers who include animals in their practice	78 (55.7)	59 (42.2)
How to help people who abuse animals	95 (67.9)	43 (30.7)
Extent of AHRs in social work practice	Yes	No
Have come across animal abuse in their practice the last five years	71 (50.7)	62 (44.3)
Answered “yes” to encounter animal abuse ($n=71$)	Very little/None	Some & A lot
Become aware of animal abuse as a rising concern in your practice with clients	20 (14.3)	51 (71.8)
Worked with clients who reported safety-related concerns for animals in their own homes	19 (26.8)	46 (64.8)
Worked with perpetrators of animal abuse	30 (42.3)	35 (49.3)
Worked with one child or adolescent client who reported abusing an animal	29 (40.8)	35 (49.3)
Worked with one adult client who reported abusing an animal	42 (59.2)	21 (29.6)
Benefits of AHRs in social work practice	Disagree & Strongly Disagree	Agree & Strongly Agree
Inclusion of animals in practice is a beneficial adjunct to my social work practice	7 (5.0)	132 (94.3)
Participation in human therapeutic interventions is beneficial to animal wellbeing	12 (8.5)	126 (90.0)

“I think [including animals in practice] is a great idea. Unfortunately, in a statutory environment it often would not be the focus, but I can see the benefit of it for

Table 3. Education and Training in AHRs

Items	Number (%)	
	Yes	No
Inclusion of animals in practice	95 (67.9)	45 (32.1)
Training		
Receive any training (formal or informal) related to including animals in practice	15 (10.7)	123 (87.9)
No training but include animals in their practice (N=123)	79 (64.2)	44 (35.8)
Inclusion of animals (no training received) in which areas (n = 79)		
Part of interventions	41 (51.9)	38 (48.1)
Part of assessment	32 (40.5)	47 (59.5)
Treating clients for companion animals' loss and grief	16 (20.3)	63 (79.7)
Treating clients for animal abuse	3 (3.8)	76 (96.2)
Reasons preventing them to include animals in practice*		
No clear guidelines in agency policy of allowing (or not) animals in practice	64 (45.7)	75 (53.6)
Lack of training from my social work degree or continuing professional development	53 (37.9)	86 (61.4)
Not being encouraged by supervisors/management team	49 (35.0)	90 (64.3)
Lack of standards of practice and ethical guidelines using animals in practice	47 (33.6)	92 (65.7)
Have not thought of doing so	25 (17.9)	115 (82.1)
Fear of liability (animal hurting a client or clients' fear)	19 (13.6)	120 (85.7)
Against agency policy	15 (10.7)	124 (88.6)
Clients allergies	8 (5.7)	130 (92.9)
Fearful to animals myself	5 (3.6)	133 (95.0)
Do not see the value of using animals in my practice	4 (2.9)	135 (96.4)

***Multiple answers allowed**

long term intervention with children/ young person in care."

"I am very interested in statutory social work to ensure there are robust and clear processes in place to always have animals

interlinked to assessment, investigation and intervention."

"I would like to see more training for statutory social workers to recognise signs of animal violence/cruelty and its links to child abuse/family violence. I would like to see animal welfare factor into the practice framework for Oranga Tamariki social workers."

Table 4 provides information on the context of where and how animal-human relationships (AHRs) have taken place for 95 participants who reported to have used animals in their social work practice. Just over 40% ($n = 39$) indicated that they had five years or less of experience in using animals in their social work practice. The main practice context where animals were used was at an agency or organisation (28.4%, $n = 27$), followed by private practice or self-employment (12.6%, $n = 12$). Participants typically used animals in social work practice for children (aged 0-12 years) (35.8%, $n = 34$), followed by adolescents (aged 13-19 years) (32.6%, $n = 31$), and adults (25.3%, $n = 24$). Mental health (e.g., depression, anxiety) was the main service area where animals were used in therapeutic practice (53.7%, $n = 51$), followed by grief and loss (45.3%, $n = 43$) and trauma (43.2%, $n = 41$). A total of 24% ($n = 23$) reported to have used their own animals in their practice and, among them, only nine (39.1%) have had their animals tested or trained for therapeutic work. Dogs (67.4%, $n = 64$) were reported to be the most common species of animal used when providing therapies to clients. Quite a few participants provided reasons for why they included untested or untrained animals in their practice, which mainly derived from their own personal perceptions and subjective assessment on their own animal's temperament:

"I had a small dog that would read people's stress and in doing so would quietly move to be next to them for comfort."

"I have used two of my own dogs, both of whom have been brought up in an

office setting with lots of interaction with a wide range of people.”

“My dog is naturally attuned to children and with parental consent has helped a child who was fearful of dogs.”

“[My] own pet that I take to rest home to visit my own family member and then it morphed into therapy with other residents as they asked to see/pat my dog. My dog is used to be around older people. She is small and non-threatening which I think is why the residents asked me to work with them.”

“The animals I have used with clients are chosen for their calm but fun nature and ability to sit quietly with the client.”

Commitment from organisations

Among the 140 participants, the vast majority indicated that their current organisation did not provide training that included skills for workers to recognise and assess for animal abuse (90.7%, $n = 127$), followed by assessing the types of relationships that families and/or households have with their animals (80.0%, $n = 112$) and whether the families and/or households have animals (67.9%, $n = 67.9$). Even when professional development and training were available from the organisations, over 90% ($n = 131$) of the participants reported that the training was not about the benefits of using animals in practice. Around 70% responded that their current organisation did not include animal abuse in safety assessment and risk assessment protocols ($n = 106$) and service provision to clients ($n = 102$). Less than 40% ($n = 53$) of the responses indicated there were policies or training to interagency sharing or collaboration of animal abuse and human violence. Only half of the responses ($n = 70$) indicated that their current organisation would encourage them to document and take action when/if animal abuse was identified in their social work practice (see Table 5). These results are similar to the ones reported in

Table 4. Context of Where and How AHRs Take Place ($n = 95$)

Items	Number (%)	
	Yes	No
Practice contexts where animals were used		
At an agency/organisation	27 (28.4)	68 (71.6)
In private practice/self-employed	12 (12.6)	83 (87.4)
At a residential treatment centre (e.g., nursing homes)	11 (11.6)	84 (88.4)
In a hospital	9 (9.5)	86 (90.5)
In a school	7 (7.4)	88 (92.6)
Client groups		
Children (aged 0-12 years)	34 (35.8)	61 (64.2)
Adolescents (aged 13-19 years)	31 (32.6)	64 (67.4)
Adults	24 (25.3)	71 (74.7)
Young adults (aged 20-25 years)	11 (11.6)	84 (88.4)
Older adults	17 (17.9)	78 (82.1)
Couples/families	9 (9.5)	86 (90.5)
Service areas where animals were used		
Mental health (e.g., depression, anxiety)	51 (53.7)	44 (46.3)
Grief and loss	43 (45.3)	52 (54.7)
Trauma	41 (43.2)	54 (56.8)
Personal growth and self-awareness	27 (28.4)	68 (71.6)
Self-regulation	27 (28.4)	68 (71.6)
Interpersonal relationships	27 (28.4)	68 (71.6)
Group development and team building	6 (6.3)	89 (93.7)
Use your own animals in your practice?	23 (24.2)	72 (75.8)
If yes, have your animals been tested or trained? ($n=23$)	9 (39.1)	14 (60.8)
Species of animal used in therapy		
Dogs	64 (67.4)	31 (32.6)
Cats	22 (23.2)	73 (76.8)
Horses	21 (22.1)	74 (77.9)
Farm animals	5 (5.3)	90 (94.7)
Domesticated birds	4 (4.2)	91 (95.8)
Rabbits	3 (3.2)	92 (96.8)

the USA (Risley-Curtiss, 2010) and Canada (Hanrahan, 2013). Many of the participants indicated that they would want to see more support and training provided to include animals in social work practice:

“Can we have more PD [professional development] to help us begin using this therapy in our practice please?”

Table 5. Commitment from Organisations

Items	Number (%)	
	Yes	No
Does your organisation provide training to ask the followings in your social work practice?		
Ways for workers to recognise and assess for animal abuse	12 (8.6)	127 (90.7)
Assessing for the types of relationships that families and/or households have with their animals	27 (19.3)	112 (80.0)
Whether the families and/or households have animals	44 (31.4)	95 (67.9)
Does your organisation provide the following trainings?		
Training related to the benefits of including animals, such as AAI, in practice	9 (6.4)	131 (93.6)
Include animal abuse in safety assessment and risk assessment protocols	34 (24.3)	106 (75.7)
Inclusion of animals, such as animal-assisted intervention (AAI), in services provide to your clients	38 (27.1)	102 (72.8)
Policies or training related to interagency sharing or collaboration of animal and child/domestic/family/elder abuse	53 (37.9)	86 (61.4)
Encourage you to document and take action when/if animal abuse is identified	70 (50.0)	70 (50.0)

"I have not formally used animals in my practice, but I have worked with people who have service dogs. If I had the opportunity, I would most definitely use animals in my work more often, but it is not encouraged except under very special circumstances."

"I would love the opportunity to train in this area as I am very committed to animals in therapy and healing. I believe the link between animal abuse and family harm is a very strong link that cannot be denied."

Interestingly, only one participant wrote about the importance of embedding animal welfare in using animals in social work practice: "overall to me animals are the same

as humans and deserve the same right[s]. If we do not do that, then there is a problem."

Discussion

This study investigated the knowledge, experiences and perceptions of social workers in relation to including animals in their practice. To our knowledge, this is the first study conducted in Aotearoa New Zealand regarding social workers' views in the area of HAB, its potential contribution and implementation in social work practice and the challenges faced by practitioners. The current results provide a preliminary profile of what social work participants know about how social work issues are informed by HAB, and how such understandings are operationalised in practice. The first key finding of this study indicated that most of the participants have been exposed to fairly high level of information on AHRs, particularly in relation to the positive influence of animals on humans and the links between animal abuse and child abuse/domestic violence. However, being exposed to HAB does not necessarily translate into actual practice or being able to practise competently. The current study's rates of exposure to information on animals and AHRs are similar to the USA (Risley-Curtiss, 2010) and Canadian (Chalmers et al., 2020; Hanrahan, 2013) studies, but our cohort scored lower in exposure to hearing about including animals in social work practice and how to help people who abuse animals. While more than 90% of the participants reported that the inclusion of animals in practice was beneficial to social work practice, only a small number have received either formal or informal training. Such results align with Risley-Curtiss's (2010) findings that, of those who included animals in their practice, a significant number were practising without relevant training and education. Even if they claimed to use animals in their practice, many of them in the current study (between 48 and 60%) did not include animals as part of their interventions and assessment, and showed discrepancies in practice, consistent with previous research outcomes (Chalmers et al., 2020; Hanrahan, 2013; Risley-Curtiss, 2010).

Participants in this study reported a high level of exposure on how to help people who have experienced pet loss but, interestingly, only 20% of social workers have included animals in treating clients for pet loss and grief which was different to previous research findings of 57.7% (Risley-Curtiss, 2010). Risley-Curtiss argued that social workers in her study may prefer the treatment of loss and grief due to its more ubiquitous nature and requires less specialised aspects of treatment than abuse occurring in HAB. The low uptake by social work participants in the current study in involving animals to treat clients for pet loss and grief could be impacted upon by the limited inquiries about pets when gathering family / personal background information. Donohue (2005) recommended that social workers should include a few standard questions in assessments including whether a person owns a pet, how the pet is integrated into the daily life of the individual or family, and if there have been any recent pet losses, in order to provide appropriate interventions.

The second key finding highlighted the importance of having competence in AAI/AAT. Participants' limited integration of animals as part of interventions and assessment, and the low involvement in treating clients for animal abuse (3%) in social work practice are likely to be related to the lack of qualification in this field, lack of education and training from social work courses, professional development and organisational support (Hanrahan, 2013; Risley-Curtiss, 2010; Wenocur, Cabral, & Karlovits, 2018). Social workers are ethically bound to "exercise due care for the interests and safety of those for whom we have professional responsibility, by limiting professional practice to areas of demonstrated competence" (ANZASW, 2019, p. 11). This should also apply to relationships with non-human animals. The importance of recognising the role of animals in social work practice and our obligations to protect them can be seen in the 2019 *Social Work Code of Ethics* in ANZASW, which provides a formal acknowledgement of animals by the social work profession. Given the rising

popularity of the benefits of AAI/AAT and pet ownership, social workers will inevitably become more involved in non-human-animal interactions. This was further explained by Fine's (2015) argument that, when social workers involve non-human animals in their work, they should be subject to the ethical and moral responsibilities of understanding the important mechanisms of the inclusion of animals in practice and ensure safety for both the client and animal. Our study provided an interesting but also concerning phenomenon of competence in AAI/AAT. Out of the 95 participants who reported that they have included animals in their practice, 23 of them reported using their animals but only nine of them indicated that they have had their animals tested or trained. Chandler (2005) argued that therapy animals, even if they belong to the therapists themselves, play a different role in an unfamiliar environment, such as school, nursing homes or hospital, and they may be required to interact with clients or people they do not know on physical and emotional levels. Research has strongly suggested that professionals need to have competence in including animals in practice as it is their duty of competence to determine the appropriate role for their animals to work with potential clients (Howie, 2015; VanFleet & Faa-Thompson, 2017). As social work aims to be a justice-oriented profession, it is also important for social workers to promote sensitivity to, and knowledge about, social and cultural diversity. Wenocur et al. (2018) have claimed that social workers should not presume or pressure clients to conform to their own conceptualisation of HAB. Individual and cultural differences may dictate how clients respond to the suggestion of using animals in therapeutic contexts or how they view the purpose of their own animals/pets in their daily living situations (Risley-Curtiss, Holley, Wolf, 2006). Not all clients will have pets or want to participate in AAI/AAT. In fact, some may have allergies or fear of the animals for personal, social and/or cultural reasons. Social workers are encouraged to maintain openness to diverse social and cultural perceptions of using animals

for assessment and intervention and find opportunities to engage in open discussion with clients (Hyers, 2015).

The lack of competence in implementing AAI/AAT and the inclusion of animals in social work has been criticised by social work scholars for disregarding human–companion-animal relationships to enhance our best ability to help our clients (Risley-Curtiss, 2010; Taylor et al., 2016; Walker et al., 2015). The current research provides an indicative trend that there is a push to challenge anthropocentrism (privileging of human interests over animals), which can be seen from the respondents' motivations to include animals in practice and a willingness to pursue this. However, it is important to emphasise that more work is still needed to close the gap between people being interested to learn more and putting knowledge into practice ethically and competently. Within Western culture, consideration of the interests of animals may have become more prevalent but ultimately animals are still considered inferior to humans (Garner, 2003). An anti-oppressive approach has been suggested as a useful lens to examine how the involvement of animals in social work practice can be considered in a just way (Legge & Robinson, 2017) as the integration of animals can continue to benefit the many fields of practice where social work has already played a significant role in addressing marginalisation and inequality. This can be seen in addressing sexism and oppression (Adam & Donovan, 1995) and, as Fraser and Taylor (2016) have argued, the notion of intersectionality must include human–animal interactions to address the unequal distribution of power that further oppress both animals and women.

Aside from identifying animal abuse as an important risk factor of harm and risk to humans, further focus on the animals themselves as victims is vital in challenging the traditional status quo (Solot, 1997). By addressing animal and domestic/family violence together, there is a potential to find new ways to challenge other, related, forms

of oppression and move closer towards social justice for animals and humans (Potts, 2010). To achieve this, examining organisational policies to create spaces in which humans and other animals can work together is a crucial step. Despite the growing literature and research evidence to report the link between animal abuse, domestic/family violence and child cruelty over the past two decades, it is discouraging to note the high percentage of participants reporting the lack of policies, guidelines and training provided by organisations in AAI/AAT, including animal abuse in assessment, and cross-report/interagency collaboration. These findings raise intriguing questions regarding whether those participants who did report having experiences in dealing with animal abuse and family violence were by chance rather than through formal intake or assessment protocols. Research has indicated that people who experienced family or animal violence were more likely to be exposed to at least one additional type of abuse (DeGue & DiLillo, 2009). Therefore, the process of cross-reporting may help to identify an initial reliable red flag for the presence of child maltreatment, domestic violence and animal abuse. The low level of training or policies relating to cross-reporting or interagency sharing reported in the current study is probably attributed to the limited resources available to social welfare agencies and a lack of legislation. Currently in Aotearoa New Zealand, there is a memorandum of understanding (MOU) between SPCA New Zealand and the Ministry for Children, Oranga Tamariki, to encourage cross-reporting of child and animal abuse between agencies, but it is not mandated (SPCA, n.d.).

Risley-Curtiss et al. (2010) identified similar issues in their study of the limited integration of questions about animal abuse in assessment protocols for child protective services. They argued that most assessment protocols used standardised instruments which tended to be developed by outside agencies or personnel who may not have the necessary knowledge in this field and where

these instruments were too difficult and costly to change once they were developed. Social service organisations need to consider the importance of the relationships that people have with their companion/pet animals when accessing services, particularly for those involved with housing or family violence in which not only people experience oppression and marginalisation but also the welfare and safety of animals is involved (Legge, 2016). The lack of policy and practice was highlighted in the research conducted in 2011 by SPCA New Zealand in Aotearoa New Zealand, which identified that women wanted to take their animals with them during violent relationships but faced several structural barriers. These included a lack of support agencies, such as refuge, and crisis/rental accommodation, that allowed animals (Roguski, 2012). The debate about including animals in practice by social work practitioners has received substantial attention since the work published by Risley-Curtiss in 2010 and 10 years later, perceptions and knowledge of its importance and applications remain a challenging area to develop. Consequently, the findings of the current research further highlight a growing obligation for social work educators and researchers to engage in more critical discussion around the consideration of how our professional discipline responds to non-human animals encountered during the course of practice.

In recent times, more skills emphasis has been given to the need to ensure that animal welfare, rights and wellbeing are protected and their connections with, or benefits to, human beings is understood (Taylor et al., 2016; Walker & Tumilty, 2019). In fact, concerns about animal welfare are not exclusive in the therapeutic context but also in research. A study by Ng and colleagues (2018) reported that AAI/AAT publications seldom report how animals were used or the possible adverse outcomes for the animals, along with limited discussion on training, certification and veterinary care of the animals involved. While extended guidelines on how to treat therapy animals have been

published by the International Association of Human-Animal Interaction Organisations (IAHAIO) (Glenk, 2017), precise criteria to ensure welfare among therapy animals are still missing due to the diverse spectrum of types of AAI/AAT; hence, establishing a set of universal guidelines remains underdeveloped (Ng, Albright, Fine, & Peralta, 2015). Although social workers in the current study may be enthusiastic and feel ready to include animals in their practice, without proper qualifications in this field and accompanied by uncertified and unqualified animals, could lead to detrimental effects on the welfare of both clients and animals. Existing research has reported that, even for certified animal handlers, the familiarity with dogs' behavioural cues such as spotting signs of discomfort varied substantially between them (Hatch, 2007). This means, even if professionals like social workers have acquired the appropriate qualifications to implement AAI/AAT, they must be aware of their animal's temperament and the settings in which the animal might best meet the needs of clients (Adamson & Darroch, 2016; Wenocur et al., 2018). Lack of knowledge and uncritical anthropomorphism to detect an animal's feelings and personality, particularly when they are anxious and stressed, can cause serious harm to people (McBride & Montgomery, 2018). Therefore, it is central for social workers to reflect on their positions in relation to offering AAI/AAT. If they present themselves or claim to be specialists with an expertise to include animals in social work practice, they should legally be held to the standards of a social worker specialising in this area of practice (Wenocur et al., 2018).

Conclusion

There are several limitations in this study to consider when interpreting the results of these findings. First, this was a cross-sectional study and its results cannot be generalised to other social workers. Given the surveys were circulated to social workers from different professional networks, it was impossible to estimate the exact response

rate. The focus of this research included social workers who have had experience working with family/whānau and animals and were interested in the area of HAB or included animals in social work practice. This may have excluded social workers from other fields of practice who have used animals in their social work practice or those that are unfamiliar in this area of work but who could see the potential benefits for their clients to contribute further to this topic. In addition, the rate of familiarity with HAB reported may have been positive skewed by social work participants answering the survey due to their own interest. Future research should focus on a national study to canvass Aotearoa New Zealand social workers' views on HAB and including animals in social work practice. Secondly, although the study did not set out to look at ethnic diversity among social workers in relation to HAB, only 11% of the participants identified as Māori. As professionals in a discipline that recognises Te Tiriti o Waitangi as the basis of our governance (ANZASW, 2019), understanding the concept of kinship between human and other animals in indigenous cultures can enrich social workers' interactions with the people who use their services. Legge and Robinson (2017) argued that social work cannot overlook the impact of colonisation and its ongoing impact for indigenous communities and the use of animals in their traditional practice and the significance of this. If social workers are to support Indigenous peoples to enhance their own wellbeing, we must understand how that wellbeing is intimately connected with humans, animals and the natural world within the context of physical and spiritual dimensions (Watene, 2016).

Overall, the findings of the current study are quite similar to those of the USA (Risley-Curtiss, 2010) and Canadian (Chalmers et al., 2020; Hanrahan, 2013) surveys. Despite some notable contributions of the importance of HAB articulated in social work literature in the past decade, the current results continue to illustrate the lack of integration of animals in social work practice from social

workers themselves and also organisational support and guidance, which reflects the concern raised by Ryan (2011) that social work practice seems to assume human distinctiveness from other animals. This study also reveals the lack of training and competence among social workers in HAB and the use of untrained and uncertified animals to provide interventions or to be included when working with clients. As articulated by Taylor and colleagues (2016), future social work does not need to exclude animals or be anthropocentric, but to integrate them into practice that can be beneficial to clients with diverse backgrounds, as well as to social workers themselves (Evans & Gray, 2012).

Not all clients want to participate in HAB or consider it as an appropriate intervention or support for them, just as not every social worker would want to include animals in their practice. However, if social work is grounded in the core values of "meeting individual, group, national and international changing needs and aspirations; and the achievement of social justice for all" (ANZASW, 2019, p. 9), social workers need to have a responsibility to honour the non-human animal relationships in an ethically informed manner, rather than these being based on individual curiosity and interests.

Accepted 31 August 2020

Published 15 December 2020

Funding Acknowledgements

No funding attached.

Conflict of interests

The authors declare that there is no conflict of interest.

Ethics approval

Low-risk notification was obtained from Massey University.

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Companion-animal-inclusive domestic violence practice: Implications for service delivery and social work

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ABSTRACT

INTRODUCTION: Based on an understanding of links between human- and animal-directed domestic violence, this article: 1) argues for companion-animal inclusive domestic violence service delivery; and 2) reflects on the challenges this offers to social work and the human services.

APPROACH: We start by considering the importance of companion animals in many people's lives and then offer an overview of material on "the link" between human- and animal-directed violence, specifically as it pertains to domestic violence.

CONCLUSIONS: Implications for service design and provision are discussed. We conclude with brief comments about the importance of centring animals in future considerations of human-animal violence links and outline how this offers an opportunity to challenge and re-think the humanist foundations on which traditional social work is built.

KEYWORDS: Companion animals; domestic violence; victims/survivors; service provision; social work

Domestic violence is a significant and potentially fatal social problem that has short- and long-term effects on individuals (Fraser & Seymour, 2017). In Australia, more than one woman a week is killed by a male partner or ex-partner (Bryant & Bricknall, 2017) and, in 2016, police conducted one family violence investigation every five minutes in Aotearoa (It's Not Ok, 2017). Seldom mentioned by the mainstream media but also often caught up in domestic violence are companion animals who experience similar kinds of physical and emotional abuse to humans (Taylor & Fraser, 2019). In Aotearoa there are close to 5000 companion animals in 64% of households (Companion Animals in New Zealand (NZCAC), 2016) and an estimated 24 million companion animals in 62% of households in Australia

(RSPCA, 2019). These animals are mostly perceived of and treated as family members (Charles, 2016; Risley-Curtiss, Holley, & Kodeine, 2011), not trivial adjuncts to the lives of humans. This leaves them open to abuse. It also means that they can be used against human victims of domestic violence, as seen in the fact that many humans experiencing domestic violence who live with companion animals, report remaining in abusive relationships or significantly delaying leaving, due to concern for their animals' well-being (Collins et al., 2018; Roguski, 2012; Taylor & Fraser, 2019). This should put domestic violence against animals firmly in the purview of service provision.

In this article, the case is made for companion-animal-inclusive domestic

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WORK 32(4), 26–39.

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violence service delivery. Implications for domestic violence service providers are given and programmatic considerations are discussed. We conclude the article by briefly discussing the implications this has for traditional social work that is built upon humanist assumptions (Ryan, 2011) and argue that it offers the discipline an opportunity to extend thinking about power, domination and control and thus contribute to important debates in critical and radical social work thinking. Throughout the piece we use images from the “Loving You, Loving Me: Companion Animals and Domestic Violence” project conducted throughout 2016–2017. This project aimed to investigate the meaning of companion animals to those fleeing domestic violence. Of particular importance to the current article was to at least partially include animals in the research process, achieved by asking participants to ensure their presence during interviews, and by offering all participants the opportunity to take part in a photo shoot where volunteers from a local photography club took images of participants and their animals. These images were gifted to the human participants to acknowledge their participation. In keeping with the arguments presented in this article and made more extensively throughout the Loving You project outputs, ensuring the animals affected by domestic violence were not invisible, or made visible solely through their human caretakers’ accounts, was of paramount importance. Also important was the belief that images have the power to engage many in conversations about domestic violence and animal abuse who might otherwise turn away from such a difficult topic (see Taylor & Fraser, 2019, for more details)

Companion animals and human wellbeing

People the world over have long indicated that animals play an important role as companions in their lives and families (Charles, 2016). Research highlights many

positive benefits for humans that stem from this, and from broader aspects of animal interaction and companionship, including those related to:

- a. daily assistance, for example, dogs assisting humans with visual impairment (Whitmarsh, 2005);
- b. therapy, for example, animal assisted therapy (dogs, cats, horses, guinea pigs, chickens and so on) but also informal, family pet arrangements (Perkins, Bartlett, Travers, & Rand, 2008; Taylor, Fraser, Signal, & Prentice, 2014); and
- c. physical and mental health, such as giving humans a sense of connection, purpose, and daily routines, many of which include physical exercise (see e.g., Ryan & Ziebland, 2015).

Increasing recognition is now being given to the role that companion animals can play in reducing social isolation, increasing social connectedness and mental wellness among humans (see Fraser & Taylor, 2017; Riggs, 2019). Animals can help humans connect—with other animals, with other humans, and with themselves. Humane education programmes for children, for example, have been shown to induce greater empathy for other animals that may extend to other humans (Arbour, Signal, & Taylor, 2009). Companion animals have been found to assuage loneliness and feelings of social isolation, so much so that they are considered by some to be ‘social lubricants’ who facilitate social interaction by providing “a shared focus of non-threatening interaction between strangers or casual acquaintances” (Sanders, 1998, p. 11). Companion animals in particular can help humans feel loved especially during times when they may feel unlovable (Charles, 2014; Rhoades, Winetrobe, & Rice, 2015; Taylor & Fraser, 2019).

These benefits are particularly salient for many members of marginalised groups,



Image 1: "I've got your back" (Taylor & Fraser, 2019), courtesy of Mawson Lakes Photography Club.

such as women, young people and the elderly, and homeless people, all of whom are most at risk of being abused (Cronley, Strand, Patterson, & Gwaltney, 2009; Flynn, 2000; Fraser & Seymour, 2017; Taylor & Fraser, 2019). Image 1, below, depicts the sense of comfort, support, friendship and protection young people can feel in the presence of dogs.

Sexuality and gender diverse groups are also likely to be marginalised, with many forming multi-species family arrangements. For instance, Taylor, Riggs, Donovan, Signal, and Fraser (2019) conducted a study of experiences of violence against humans and their companion animals among 503 people of diverse genders and sexualities living in either Australia or the United Kingdom. Findings revealed that those most marginalised in terms of gender or sexuality were also those most vulnerable to abuse, particularly identity-related abuse from family members (e.g., threatening to 'out' someone, withhold their medications, using wrong pronouns and so on). They

also found that animal companionship can help mitigate LGBT+ people's experiences of discrimination and abuse and so contributed to improved health and wellbeing (Taylor et al., 2019).

Companion animals are non-judgmental, having no regard for human hierarchies or conventions relating to sex, gender, age, class or any other aspect of social status (Charles, 2014). Across diverse populations, companion animals offer many other potential benefits to human health and wellbeing. They can, for example, help some humans when they are lonely, unwell or managing an episode of a disorder (Smith, 2012). For example, early research demonstrated that newly widowed elderly companion animal owners had less frequency of minor ailments like headaches and tended to use less drugs during the period of bereavement than their counterparts without pets (Akiyama, Holtzman, & Britz, 1987), and that companion animal attachment and depression were inversely related (Garrity, Stallones, Marx, & Johnson, 1980). More recently, research has demonstrated that companion animals may help older women feel less lonely and depressed (Krause-Parello, 2012). Rhoades et al. (2015) found that homeless young people with animals reported less depression and loneliness than non-animal-owning peers, in part because the animals offered company, reduced loneliness and made them feel loved. These connections and the unconditional support offered by other animals to some humans can be comparable to, and in some cases surpass, that offered by human-human relationships (see Bonas, McNicholas, & Collis, 2000). This proximity to human family lives, however, leaves some companion animals open to abuse.

The link(s) between human and animal abuse

In recent decades there has been a greater recognition of "the link", or more accurately, "the links" between human and animal

violence (Becker & French, 2004; Flynn, 2012; Taylor & Fraser, 2019). For instance, in one US study 65% of those arrested for crimes against animals had also been arrested for battery against humans (Degenhardt, 2005). In another, 1.8% of 43,093 people surveyed (extrapolated to equate to about 215 million Americans) admitted to animal cruelty. When compared to those who did not report animal cruelty, they were significantly more likely to have committed all 31 antisocial behaviours also measured. The strongest relationships were between committing animal cruelty and robbery/mugging, arson, harassment and threatening behaviour (Flynn, 2012).

Research demonstrates an even clearer link between animal abuse and other forms of family abuse (Flynn, 2012). Animal cruelty occurs more frequently in families where domestic/family violence is also occurring (for overview see Flynn, 2012; Taylor & Fraser, 2019). Roguski (2012) surveyed 203 Women's Refuge clients in Aotearoa New Zealand (27.6% Māori; 8.4% Pasifika; 77.8% NZ European) and found that 36.5% of respondents reported an animal had been harmed during their relationship, 11.8% reported that this occurred without any previous threats being made. Thirty-two percent of those who had children ($n = 159$) reported their children had witnessed threats to a family animal, and 24.5% had witnessed the animal being harmed or killed. Acts of animal cruelty in the home may also be an indication of violence perpetrated against elders or between siblings (Peak, Ascione, & Doney, 2012).

Not only are animals important in identifying potential forms and occurrences of abuse, but bonds between humans and their companion animals have been shown to be crucial both during the abuse and to recovery post-abuse (e.g., Fitzgerald, 2005), partly because they may be the only positive relationship present in the abused person's life (Fitzgerald, 2007; Taylor & Fraser, 2019). In some cases, human survivors talk about their animals being "life-savers"

due to the emotional support they offer (Fitzgerald, 2007). For example, Flynn (2000), in his interviews with women who had experienced domestic violence along with their animals, found that the animals acted in the role of comforter after violent episodes, offering unconditional love. The women also suffered additional stress and guilt when having to leave their animals behind. Both of these findings are well documented elsewhere (for an overview see Taylor & Fraser, 2019).

Implications for domestic violence service providers

Given that research shows that, for some human victims of domestic violence, having a bond with a companion animal can help them recover, we now consider some of the key implications of this for domestic violence service providers.

Animal abuse often means increased violence against humans

Domestic violence service providers are wise to take seriously reports of animal cruelty because domestic abusers who hurt animals also tend to use more extreme violence against humans (Barrett, Fitzgerald, Peirone, Stevenson, & Cheung, 2018), with abusers who emotionally harm animals being the most likely to do so to exert power and control over their human victims (Fitzgerald et al., 2019).

Human-animal bonds can intensify through shared experiences of violence

Companion animals are an important and often underestimated source of support for many (human) domestic violence victims (Fitzgerald, 2007; Flynn, 2000; Taylor & Fraser, 2019). Research has shown us that, in violent households comprising of both human and animal family members, relationships between humans and animals may intensify in meaning, and provide crucial forms of support and comfort (Fitzgerald, 2007; Flynn, 2000). Image 2,



Image 2: "My world" (Taylor & Fraser, 2019), courtesy of Mawson Lakes Photography Club.

below, illustrates the love, comfort and support survivors can feel for each other.

Due to connections many have with animals, both adult and child victims/survivors who witness animal abuse often experience acute guilt and emotional trauma over it. Faver and Strand (2007) found this in relation to heterosexual women, especially mothers. Other studies with LGBT+ survivors of

domestic violence have shown similarly (Fraser et al., 2019; Taylor et al., 2019).

Victims/survivors unwilling to leave without pets

It is now well-established that one factor preventing many victims/survivors of domestic violence from seeking help is unwillingness to leave companion animals with perpetrators (Ascione et al., 2007; Barrett et al., 2018; Flynn, 2000; Taylor & Fraser, 2019). For example, Barrett et al. (2018) found that concern over companion animals often contributes to a woman's decision to return to her abuser after having initially severed the relationship.

Supporting companion animals can assist human victims

Many people, especially people from marginalised groups, find talking about and sharing photographs of companion animals to be a pleasurable experience, and often a source of great pride (Fraser, Bartholomaeus, Riggs, Taylor, & Rosenberg, 2019). Workers are more likely to establish rapport with victims if they take an interest in both human and animal relationships that victims' report as important (Fraser et al., 2019), so much so that animals can be "conduits to social work assessment" (Evans & Gray, 2012, p. 603; Papazian, 2014). Discussion of companion animals and their exposure to violence can become a bridge into human experience (Fraser, Beddoe, & Ballantyne, 2017; Fraser, Taylor, & Morley, 2017). This can be particularly important with groups who may not respond well to social workers initially for any variety of reasons. Risley-Curtiss et al. (2011), for example, suggested that social workers working with boys and/or men, might incorporate questions about animals routinely as it is perceived as less threatening, and is a way to establish rapport.

Conversely, ignoring animals in social work practice might hinder workers' abilities to help their clients. Risley-Curtiss (2013, p. 126)

argued that ignoring animals in child welfare practice “can shortchange our abilities to help clients” in numerous ways. These include failing to include family-centred assessments, failing or slowing the chance to recognise problem behaviours such as animal abuse and domestic violence and thereby limit options for early intervention, failing to recognise and promote potential healing and resiliency relationships with other animals, and failure to validate important family members (i.e., the animals). Ignoring the roles other animals play in families may also mean ignoring their potential to help their humans in previously unconsidered ways. For example, in relation to LGBT+ people’s experiences, Taylor et al. (2019) found that some human victims will seek help when the abuse against their animals escalates (rather than when it escalates for themselves). Service providers are wise to take seriously both the love victims can feel for their animals, and their concerns about experiences of abuse and possibilities of recovery in the future (Fraser et al., 2019).

Service providers who consider companion animals in their service design and operations, marketing material and staffing arrangements may have increased chances of reaching clients when they are in danger, hurt and abused (Fraser et al., 2019). Volant, Johnson, Gullone, and Coleman (2008) found that the positive identification of at-risk members of the community (both human and animal) by community professionals (i.e., vets, animal welfare agents, police, child welfare agents, counsellors) promises to enable the negative consequences of animal abuse and domestic violence to be addressed more effectively.

*Benefits of human and animal victims/
survivors recovering together*

Human victims are right to be concerned about the animals that they love and do not want to leave behind with perpetrators. Apart from the ongoing abuse and neglect, if not escalation of abuse that many animals

will face post-separation, there are also other similarly dire possibilities: animals running away and being hurt or killed in the process; animals being surrendered or abandoned, left in animal shelters that cannot secure enough homes for them to go to; shelters often face euthanising otherwise healthy animals (Flynn, 2000; Taylor & Fraser, 2019). For both human and animal survivors of domestic violence, including the many who suffer post-traumatic stress from their experiences of violence, there are many possible health benefits of remaining together through common processes such as escape, relocation and recovery (Krause-Parello, Sarni & Padden, 2016; Taylor, Edwards, & Pooley, 2013). Before, during and after violent episodes, animal and human victims can provide each other with a sense of protection, solace, love and loyalty. Service delivery that takes into account the needs of those with companion animals—as well as, potentially, the needs of the animals themselves—is therefore beneficial. In the next section we consider some of the ways in which services might be able to consider including and/or helping animals.

Animal-inclusive service delivery design

Offering animal-inclusive and/or centred services is not without its challenges. Risley-Curtiss (2013) lists the following barriers to including animal–human relations into child welfare practice: 1) speciesism, “dismissing animals and the importance they have in the lives of humans” (p. 121) due to the anthropocentrism of the human and social services. To this we would add the existence of a hierarchy of caring, one that indicates caring about people is more important than, and antecedent to, caring about animals. As Adams argues, this is an inherently dangerous idea, given that “[m] any of the arguments that separate caring into deserving/underserving or now/ later or first those like us/then those like us constitute a politics of the dismissive” (Adams, 2016, p. 5); 2) administration

whereby speciesism manifests in the refusal to incorporate animal-centred practices; 3) computerised case management that leads, for example, to risk assessments being copyrighted and ensures that any changes made are extremely slow; 4) confidentiality that makes cross-reporting initiatives (between human and animal services) difficult and time consuming; 5) lack of knowledge at both the practice level and within social work and human services undergraduate training programmes; and, 6) lack of staff and time (Risley-Curtiss, 2013, pp. 120–124).

Despite these difficulties, however, there has been an increase of services that attend to domestic violence faced by human and animal victims often through temporary fostering services such as those offered through Pet Refuge NZ (<https://www.petrefuge.org.nz/>) and Safe Pets, Safe Families (<https://safepetssafefamilies.org.au/>). Fewer services offer housing for human domestic violence victims that allow companion animals to stay with them although they are increasing. In Australia, the Northern Domestic Violence Service (NDVS) in South Australia has animal-friendly housing for instance and client feedback has been extremely positive, with several indicating that they would not have reached out for help if this option had not been available (Taylor & Fraser, 2019). Throughout 2016, two of the authors of this article worked closely with NDVS on a research project aimed at understanding the importance of animal-friendly housing (Taylor & Fraser, 2019). Below are some of the insights we gleaned during this project.

Staff need to be willing to champion the importance of human-animal bonds

Recognising the significance of animal companionship, writing it into policies and procedures and helping to operationalise services that are animal-inclusive, can take time and expertise, but most importantly, the will to do so. Each agency or branch of an organisation is likely to need people willing

to champion the idea of an animal-friendly service and help make it happen.

Domestic violence services are often well placed to move to, or extend, their animal-inclusive service delivery design given they are predominantly provided by women, many of whom care about and, most importantly, advocate for animals. Even those staff who are not particularly interested in other animals are often well placed to understand the ethics and practices associated with animals being victims of domestic violence given both forms of violence (to humans and animals) are based on power and control. From this general support, individuals may take up specific roles to advance the work. They may also provide support to other services regarding what animal-friendly will mean and how it will be operationalised. Liaising with animal protection agencies and related others may be part of the roles directly tied to helping make animal-friendly service delivery a success. As Fitzgerald, Barrett, Stevenson, and Cheung (2019, p. 2) note:

Specifying the factors that increase the probability of pet abuse is critical to inform the development of risk assessment measures that can identify pets that may be in elevated danger, as well as people who are being victimised and whose decision making regarding leaving the relationship may be shaped by the abuse of their pet(s). Such knowledge can be used by organizations and/or practitioners engaging in safety planning with survivors to promote the safety of not only women and children but also their pets, as research indicates that fear for the safety of pets may delay a woman's decision to leave an abusive relationship ... Therefore, promoting the safety of pets is critical not only for the well-being of animals but also for the protection of the people who care for them.

Physically accommodating animals and associated requirements

While temporary foster care arrangements for animal victims of domestic violence offer an important avenue, many victims would do better staying together. Human victims, for example, often report that separation from their animals leads to guilt and loneliness (Flynn, 2000), while animal victims often suffer separation anxiety and potential behavioural issues as a result of forced separation (Taylor & Fraser, 2019). Keeping human and animal victims of domestic violence together usually necessitates the physical redesign of housing arrangements to accommodate animals without jeopardising the safety of other residents. Appreciating the important role humans and animals can play in their shared recovery from domestic violence, therefore, has resourcing implications for organisations. Physically accommodating animals is likely to add costs to the budget, particularly if emergency animal supplies are to be made available, and if some leeway is to be given to the potential damage of furniture by resident animals. These issues are exacerbated considerably if the animals in question are numerous, very large and/or species other than cats, dogs and small rodents/birds.

Caring for pets who are also recovering from exposure to violence

Most animals brought into supported accommodation will have been exposed to emotional and/or physical abuse, if not directly targeted. This abuse may have been occurring for many months if not years. Growing numbers of studies are showing how animals can exhibit similar reactions to violence as humans (anxiety, depression, hyper vigilance, acting out etc.) (see Taylor & Fraser, 2019, for an overview). Recognising animals as victims of violence in their own right can help to ensure that their welfare is not neglected. As with humans, animals will also need time and space to recover from the trauma of violence. Care is needed to ensure the safety of the animals in residence but also the other humans around them (staff,

other residents, visitors). Young children will ordinarily need to be supervised around animals to prevent them from being rough with animals or re-enacting animal cruelty, which can evoke animal aggression—fear based or otherwise. It is important to note that whether young or old, human survivors of domestic violence are often good to animals—but *not always* (Riggs, Taylor, Signal, & Donovan, 2018). Also, some people will be so traumatised that they will need support to provide the daily care that animals need. Without this support, animals risk further neglect and harm. For the relatively small numbers of victims/survivors who find caring for their animals too overwhelming not just in the present but in the foreseeable future, foster care arrangements, or adoption of the animals, may be necessary.

Creating and updating pet policies and procedures

Necessary parts of animal-inclusive service delivery design are the policies and procedures designed to protect the safety and wellbeing of all in residence, including staff and visitors. To have achieved some of the work described above, policies and procedures are necessary. In plain language they will outline the expectations of humane treatment of animals (for example, positive training techniques to correct animal behaviour and other RSPCA-endorsed methods), and the kinds of behaviours that the animals will be expected to display or be taught (for instance, wearing collars with identification and being kept in their own yard unless being walked with a human).

In addition to creating policies aimed at protecting the animals present in companion-animal friendly services, policies, clear processes and support are needed for staff willing and able to work in this area. Seemingly few human and social services have formal policies in place to address animal abuse. Stevenson, Fitzgerald, and Barrett (2018), in their survey of 116

domestic violence shelter staff from 40 shelters across Canada reported that 25.9% of responders stated they had no policy and no services for animals. The most common kind of service reported offered was referral to another community group that could help (46.6%), boarding at the local kennels (43.1%), foster care (12.9%) and boarding at a local vets (8.6%). This lack of formal policy adds stress to workers trying to help families in violent situations. Montminy-Dana (2007), in a study investigating the experiences of child welfare workers assigned child maltreatment cases where animal abuse was also present found that all of their participants who reported on cases where both forms of abuse were present indicated they were the most challenging to deal with (p. 92). Moreover, as a result of the lack of formal policies and directives, they began developing their own best practices regarding how to intervene in cases where animal abuse was present. These included the removal of animals into safer, alternate, places such as animal shelters and/or into foster care. Laing (2019), in her study of the ways Australian social workers work creatively and/or subversively to develop animal-inclusive practices, also documents that many social workers take animals in need to their own homes and/or withhold information from colleagues or other services about the presence of other animals so they would not be intentionally excluded.

Taken together this suggests the urgent need for social workers and human service professionals regarding the importance of recognising and addressing animal cruelty.

Training and development

Professional development for staff and community education regarding the importance of human–animal relationships for many child and adult victims of domestic violence will also be needed, as will training about the necessity of including information about animals in risk assessments (Humphrey, 2002; Walker, Aimers, & Perry, 2015). The workers in Montminy-Dana's

study (2007) suggested that mandatory training should be provided to both current and new staff. They indicated this training should involve: 1) an overview of animal cruelty; 2) the connections between animal cruelty and family violence; and 3) issues pertaining to methods of assessment and treatment (pp. 92–93). Other suggestions for moving forward included the need to make workers aware of existing resources addressing the complexity of human–animal abuse and the needs of families in these situations; establishing groups for animal abusers, especially relevant where children are the perpetrators; including assessment measures in formal processes such as having the initial human services contact ask about companion animals, and adding questions to intake forms that are designed to elicit information about behaviours toward any current and/or past companion animals. This call for more information is echoed by Randour (2007) who further noted the need to employ consistent terminology across any attempts to collect data about animal abuse.

Research into human–animal abuse links has grown considerably over the last two decades or so and, as part of this, there is more awareness and more information upon which to base training. As a result, training opportunities are increasing but still seem to be far from mandatory. For instance, Stevenson et al. (2018) in their survey of 40 shelters across Canada reported that 37.7% of respondents indicated their training had no animal abuse content. Some 36% stated that there was a “brief mention” of animal abuse in their training and 19.3% indicated their training included a “short discussion” of animal abuse.

From the intersecting fields of domestic violence, aged care, child welfare, poverty relief, homelessness and corrections, more people are sharing stories of new initiatives and experiences with some form of pet-inclusive service design (see for example, Lynch, 2017; Reading Buddies, 2019). As Randour (2007) noted, the development of services aimed at helping animal

victims of domestic violence indicate that practitioners readily recognise the importance of animals in family dynamics. Given this awareness, any training initiatives are likely to be well received.

This training also needs to occur in human services and social work curricula (see Risley-Curtiss, 2010) and could involve, for instance, instituting social work student placements at animal rescue organisations. One report of a successful example of this notes that social work students placed in shelters can offer numerous skills such as developing and implementing support animals in community services; addressing compassion fatigue among the shelter staff; raising community awareness regarding links between human- and animal-directed violence (Hoy-Gerlach, Delgado, Sloane, & Arkow, 2019). The authors concluded that the Humane Society, while being a non-traditional setting for a social work placement, offered an environment eminently suitable for the development of social work skills. At the same time, the placement allowed shelter staff who initially did not understand how a social worker might fit at their workplace, to recognise the value of a social worker, so much so they were eager for the placements to continue. As human–animal studies courses begin to grow, it will be worth considering whether relevant students can be placed in domestic violence service provision in order to continue the kind of cross-pollination of information identified by Hoy-Gerlach et al. (2019) as useful for social work students. Similarly, the inclusion of animal-centred issues in human services and social work curriculums offer many opportunities, not least of which, as Adamson and Darroch (2016, p. 41) point out, is “an opportunity to highlight what is an under-explored element of human experience within social work education – that of the human–animal bond and its implications for social work intervention.” In their reflection on embedding animal-centred issues into a social work class

through focussing on animals in disasters and animals in domestic violence, they also noted that such approaches offered the possibility of forging new theoretical connections between existing student knowledge and “practice realities” (p. 46).

Associated activities

Beyond the need for formal training and policies, there are numerous activities those in the social work and human service professions can, and do, engage in to promote animal-friendly services.

These include:

- advertising on websites and social media platforms the inclusion of pets in some parts of the service;
- asking about pets from initial inquiries made about crisis support;
- counting pets that accompany clients into new housing arrangements;
- liaising directly with animal foster carers, animal control officers, police and/or the RSPCA to help reunite lost animals or animals still in crisis at home;
- supporting clients to access veterinary care for their pets, and council registration, including, microchipping and desexing;
- teaching staff and other residents how to interact—or avoid interacting—with animals in neighbouring units;
- fundraising and applying for grants related to pets that help sustain the budget; and
- partnering with researchers to (further) examine the benefits and challenges of a pet-inclusive service design.

Resistance and change

The above recommendations are not unproblematic and they will inevitably face resistance from some quarters. Stevenson et al. (2018, p. 242) reported that the domestic violence shelter workers they talked to included the following reasons for lack of animal-friendly policies: 1) staff and/or resident allergies; 2) lack of funds; 3) lack of physical space; 4) hygiene concerns and/or concerns over property maintenance; 5) lack of community partnerships; and 6) safety concerns. These are valid considerations and need to be included in considerations of the development of animal-friendly domestic violence services and policies. However, they are not necessarily insurmountable barriers. For instance, Stevenson et al. (2018) reported that only 6 of their 116 respondents indicated that staff resistance was a reason for the absence of animal-friendly policy development.

One of the main reasons animal-friendly practices may face resistance is entrenched speciesism and associated anthropocentrism (Risley-Curtiss 2013). And, while these are structural issues that are difficult to counter, it is worth noting that we are beginning to see the seeds of change. For example, due to an expanded ecological consciousness social work is experiencing challenges and opportunities such as 'green social work' and 'veterinary social work' (see Boetto, 2017; Dominelli, 2012). Many of those advocating such a shift in social work argue that a significant barrier to the adoption of social work practices that include other animals is the discipline's reliance on positivist and modernist roots that are embroiled in maintaining the status quo vis-à-vis power relations (Boetto, 2017, p. 49). As Bell (2012) argued, uncritical adoption of traditional post-enlightenment, positivist paradigms that are grounded in notions of rationality leaves unchallenged the dualistic and hierarchical frameworks that we know from radical social work traditions must be removed if we are to meet the social

justice aims of the discipline (Fraser et al. 2017). Leaving such frameworks intact is problematic, not least because it gives epistemic privilege to a certain masculinist perspective wherein the "perspectives of 'others' are either excluded entirely, incorporated as pathological and atypical according to the male-as-standard yardstick and/or have interpretive frameworks imposed on them regardless of fit" (Bell, 2012, p. 413). While the majority of those espousing arguments like this acknowledge the roles that these ideologies play in excluding both the environment and marginalised humans, they often fall short of acknowledging that this also ignores other (nonhuman) animals. There is a need, then, to further develop this line of critique to address how it pertains to other animals generally and to those animals who are domestic violence victims specifically.

In closing, we would like to reiterate that animals are victims of domestic violence in and of themselves. Throughout this article, we have deliberately used the phrase human and animal victims of domestic violence. We have done this to make clear that animal-friendly practices need to also consider centring the experiences of other animals. This means, in the context of domestic violence service provision, moving beyond the idea that acknowledging animal abuse within family dynamics as important *only* because it serves as a red flag for interhuman abuse. Instead, it means acknowledging that animals are sentient beings whose own experiences of physical and emotional abuse is worthy of attention and redress.

Accepted 5 May 2020

Published 15 December 2020

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Appendix

Pet-inclusive training and information opportunities can be fun, uplifting and inspiring for staff and residents, and useful content is freely available on many platforms (videos, posts, blogs, news reports and so on). For instance, people might start by exploring the following websites:

Lucy's Project	https://lucysproject.com/
My Saving Grace	http://www.mysavinggrace.org.au/
Safe Kennels RSPCA	https://www.rspcasa.org.au/safe-kennels-project/
Safe Families, Safe Pets	https://safepetssafefamilies.org.au/
National Link Coalition	http://www.nationallinkcoalition.org/
Delta Therapy Dogs	https://www.deltasociety.com.au/delta-therapy-dogs
First Strike	http://www.scottishspca.org/campaigns/43_first-strike
The Links Group (UK)	http://www.thelinksgroup.org.uk/index.htm
One of the Family (NZ)	http://rnzspca.org.nz/education/one-of-the-family

Horses and worthwhile causes: Exploring equine-assisted learning at Dune Lakes Horse Inspired Learning Centre in Aotearoa New Zealand

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ABSTRACT

INTRODUCTION: Equine-assisted therapies and trauma-informed interventions have become increasingly popular with a growing literature suggesting that people can deeply relate to experiential work with horses, where silence, emotional growth, reflection and acceptance are prioritised over talking about problems.

APPROACH: This research, undertaken at a rural learning and retreat centre near Auckland in Aotearoa New Zealand, examines how practitioners tailor equine-assisted interventions (EAI) and sheds light into values, theories and frameworks that underpin their work. The study is based on personal and professional experiences of four practitioners who engage in equine-assisted learning.

FINDINGS AND APPLICATION: Findings are drawn from the thematic analysis of the transcripts of four semi-structured interviews, highlighting the process of facilitating post-traumatic growth in a professional, supportive and client-centred environment involving a facilitator, a horse, and a person keen to improve the quality of their life. Application of this modality, particularly when working with clients with complex trauma, is explored with a special emphasis on the relevance of involvement of animals in social work practice.

KEYWORDS: Horse-assisted learning; horse-assisted intervention; animals in social work

The context

Located close to the Auckland's North-West Coast and adjacent to Lake Kereta and Woodhill Forest's ancient sandhills, Dune Lakes Retreat and Equine Centre is situated at the South Kaipara Head Peninsula in Aotearoa New Zealand. It is a learning and retreat centre which offers programmes, workshops and interventions for individuals, groups and organisations, as well as school holiday programmes, team building and trauma work, programmes for youth in conflict with the law and workshops focused

on prevention and building connections. Dune Lakes Retreat and Equine Centre's registered charity, Equine Pathfinders Foundation, was created with the mission to make equine-assisted learning and growth possible to all and to improve wellbeing of children, youth, adults and families as well as the wider community. The Equine Pathfinders Foundation accepts referrals and offers a diverse range of programmes throughout the year. Courses for young people include life skills training, holiday camps, interactive experiences with

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WORK 32(4), 40–54.

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horses for youth, particularly suitable for youth-at-risk, where connection to others can be learned through practising caring and appropriate life skills, as well as adventure-based experiences for young people. Programmes assisting individuals and families include teaching respect, loyalty, horsemanship skills, boundaries and resilience but also mutual support and empowerment, enabling inclusion, healthy and fulfilled relationships, healing and trauma recovery. These courses often attract people with lived experience of abuse or violence as well as people recovering from addictions. Personal discovery retreats allow participants to integrate nature, movement and meditation or to learn dealing with problematic behaviour or anger issues by spending time with horses, in a group, and in self-reflection. The centre's workshops offer corporate team building, leadership and self-awareness trainings as well as annual festivals and special retreats (Dune Lakes Lodge, 2015).

Dune Lakes works from the premise of horses being engaged at liberty with humans, meaning they are never forced to interact and are free to leave the interaction at any point. This principle extends to all participants. Underpinned by such a non-oppressive framework, a detailed and descriptive approach in this research was taken in order to gain in-depth insights about the process of EAI, allowing practitioners' voices to be heard.

Authors' intentions

Author 1: I have carried out this research from the perspective of a social worker and a survivor. The aim was to understand the overarching frameworks equine-assisted intervention (EAI) practitioners use for their work and if those could be useful in social work practice. Having experienced childhood trauma, I found comfort and soothing in my relationship with horses, without having been aware of the underlying therapeutic effects that had a significant impact on my wellbeing. I wondered if having a practitioner alongside would have

been even more beneficial. A curiosity about how and why the magical learning and healing processes unfolded in my past and how similar processes may benefit my clients, enabled me to explore ways how this modality can be used in social work practice. Targeting emotional, psychological and mental health challenges is a relatively new way of utilising a horse's presence. Viewing this research through a social work lens, I wondered if horses might be perfect to assist social work clientele experiencing complex trauma and my intention was to explore the horse-practitioner-client triangle interaction as a whole rather than presenting a snapshot.

Author 2: I always felt deeply connected to animals. Most of my peak experiences involved animals, I learned how to be a parent through my dogs, and they influenced my decision to have children and become a social worker. Swimming with wild dolphins gave me insights and experiences I could never imagine. Experiencing "join up" and "belly button" riding at Dune Lakes, "holding space" with horses and lying down next to the fully relaxed horse lying on his side enabled me to transcend the mundane, discover who I really am and relate to the world in a more connected and appreciative way.

This research is a part one of a wider ongoing study about humans, interspecies communication and particularly horses and their relationship with us. It focusses on EAI practitioners' views on the process and content of their sessions. The second part of a larger inquiry that is in process now, focuses on benefits for clients and the third part (I am still looking for a most appropriate methodology for this), will focus on horses themselves in order to discover what is there for them and why do they engage in relationships with humans.

The purpose, aim, intention and study design

The purpose of this study was to look at the process of EAI at Dune Lakes Lodge by

exploring practitioners' views on the horse-practitioner-client triadic relationship and how it affects their wellbeing. The aim was also to gain a deeper understanding of what EAI consists of in the context of social work and how healing of complex trauma can be facilitated. The universal term, EAI, is used in order to include all interventions in which interactions with horses assist humans in encouraging personal and post-traumatic growth as well as in overall well-being or acquisition of new skills and abilities. A qualitative, interpretative research design using semi-structured interviews best suited this purpose. Four experienced practitioners have been interviewed; all interviews were transcribed and thematically analysed in order to outline the process and the content of the sessions and their effectiveness from practitioners' viewpoints.

Literature review

The literature review focusses on EAI as a learning and therapeutic approach, excluding other animal-assisted therapies and modalities that involve horses, such as riding for people with a physical disability or pet therapies.

A number of articles about horse-assisted learning and therapy from practitioner and client perspectives were reviewed and analysed (Trotter, Chandler, Goodwin-Bond, & Casey, 2008; Dunlop & Tsantefski, 2017; Johanson, Wang, & Binder, 2016; Szczygiel, 2018; Schroeder, & Strout, 2015; Tuuvas, Carlsson, & Norbert, 2017). Meaningful, educative and multi-layered information was found in several research articles and books where horses are involved and where humans feel that they facilitate the process of learning and personal growth on an experiential level (Brandt, 2004; Buck, Bean, & Marco, 2017; Lee & Makela, 2018; Yatchmenoff & Sundborg, 2017). Research suggests that a variety of beneficial EAI pathways are available. EAI can be useful for young people who experience difficulties with transitioning into adulthood

(Waite & Bourke, 2013), children and adolescents who are at high risk of social or academic failure (Frederick, Hatz, & Lanning, 2015; Trotter et al., 2008), children and youth experiencing problematic parental substance abuse (Dunlop & Tsantefski, 2017) and for people with a history of substance abuse (Adams et al., 2015; Kern-Godal, Brenna, Arnevik, & Ravndal, 2016). EAI proved to be helpful for adolescents who deliberately self-harm (Carlsson, 2017) and children and youth with psychosocial and behavioural difficulties, post-traumatic stress symptoms and complex trauma (Buck et al., 2017; Mueller & McCullough, 2017; Naste et al., 2017). EAI can facilitate general psychological improvement and address unexpressed feelings and unresolved conflicts from the past which are still causing psychological distress in the present (Klontz, Bivens, Leinart, & Klontz, 2007) and attachment issues (Carlsson, 2017; Naste et al., 2017). Therapeutic work with horses showed improved social attitudes and skills as a result of reduced cortisol hormone stress levels and increased oxytocin levels in people with autism, alleviating their stress responses (Sanchez, Castro, Herrera, & Juanez, 2014).

Trauma-informed interventions are becoming increasingly popular in the field of psychotherapy, counselling and social work (Albright, 2018). Schroeder and Strout (2015) found that EAI group work with trauma survivors who were struggling with post-traumatic stress helped to increase confidence and develop meaningful and trusting relationships. The benefits of building a bond and a relationship based on trust and mutual respect as well as the importance of the connection to nature are sufficiently described and in agreement with research completed in the last few years (Burgon, Gammage, & Hebden, 2018; Carlsson, 2017; Naste et al., 2017; Sullivan, 2014; Tuuvas et al., 2017). The relationship between trauma-informed social work and EAI indicates that horse-assisted therapeutic interventions offer support and learning

for clients who have experienced trauma in the past or currently have emotional, mental or social problems. The recognition of the experience of past or current trauma, the provision of trauma-informed care as well as a safe relational environment are also essential for empowering social work practice, as Yatchmenoff and Sundborg (2017) and Szczygiel (2018) have claimed.

Horses are social animals. Their high state of awareness and their use of body language facilitates human-horse communication and plays a major role in working with horses (Brandt, 2004; Buck et al., 2017). This seems particularly important from a survivor perspective and in the context of trauma. Humans can deeply relate to non-talking horse therapy where silence, emotional growth and acceptance is supported (Albright, 2018; Buck et al., 2017; Waite & Bourke, 2013). By mirroring the client's emotions, the horse responds to the client in a reflective way, which then can be identified by the facilitator, social worker or a therapist and utilised for growth or transformation. Increased control over one's own life, as well as a growing confidence in one's own ability to cope with life's circumstances can be developed through the direct feedback given by a horse and a facilitator. The learned information can then be applied to personal present and future challenges (Albright, 2018; Buck et al., 2017; Carlsson, 2017; Waite & Bourke, 2013). Lee and Makela (2018) also emphasised the importance of the minimal but skilled input by a highly trained practitioner and recommended further exploration of EAI in therapeutic settings by integrating interdisciplinary perspectives. This recommendation influenced us to further explore the field of the experimental, yet skilled work of EAI practitioners.

The influence of particular settings to clients' healing processes is also discussed in the literature. Significant for clients' increased wellbeing is a rural and tranquil environment (Kern-Godal et al., 2016; Hamilton, 2011; Mueller & McCullough, 2017). A rural environment can be

experienced as less threatening and the absence of stigma, often attached to clinical places, is calming (Brandt, 2004), especially in a social work context, where children and youth have been involved with numerous social services in the past (Albright, 2018; Donaghy, 2006; Kern-Godal et al., 2016). "When services feel safe, empowering, and welcoming for those affected by trauma, service recipients are more likely to engage and benefit from care" (Yatchmenoff & Sundborg, 2017, p. 167).

Limited research is available on how therapeutic work with horses can be utilised to a greater extent as an effective mental health and wellbeing tool by social services (Lee & Makela, 2018) and this project aims to provide more insight into this field of practice. Literature covers the importance of the setting, positive aspects of the idea to replace talk-therapy with non-verbal concepts as well as the general positive achievements of EAI in the context of complex trauma which impacts the lives of social work service users. Literature suggests that more research exploring the importance of the practitioner's professional background knowledge would be beneficial in order to prove that more than a horse and a paddock is required to support clients on their healing journey (Anestis, Anestis, Zawilinski, Hopkins, & Lilienfeld, 2014; Buck et al., 2017; Dunlop & Tsantefski, 2017).

Identifying shortcomings and gaps in EAI literature

Research about psychotherapeutic and social work theory and practice with horses is often limited to links between investigated therapeutic interventions and a specific group of clients (Naste et al., 2017). Research providing more detailed descriptions of how exactly EAI expert knowledge, skills and expertise is applied in practice would be beneficial (Anestis et al., 2014; Buck et al., 2017; Dunlop & Tsantefski, 2017). Limited research is also available on how the therapeutic work of EAI can be utilised to a greater extent as an effective mental health and wellbeing tool by

social services (Lee & Makela, 2018) and this project aims to provide more insight into this field of practice. The decision to use the term EAI was based on the definitional difficulties outlined in the literature and the fact that the exact intervention used by individual participants was unknown until the selection was established.

Existing literature covers a wide range of possibilities in the area of EAI, being predominantly qualitative studies. Effectiveness (assessed by an in-depth analysis essential for qualitative research, in this case, as perceived by practitioners) is investigated providing findings that support the importance of safety and bonding in the relationship with the horse. The unassuming presence of a horse allows clients to open up and communicate freely, allowing unexpected insights to emerge. Further literature covers the importance of the setting, positive aspects of the idea to replace talk-therapy with non-verbal concepts as well as the general positive achievements of EAI in the context of complex trauma (Wamser-Nanney & Vandenberg, 2013). This, however, has also been found to be an area which may benefit from more research where light can be shed into increased opportunities for greater utilisation in social work.

Research design, ethical considerations and data analysis

A qualitative, interpretative research methodology was used in order to allow a detailed description of the elements of EAI and its relevance for social work. The goal was to allow a deeper understanding of EAI and its effectiveness. A bottom-up inductive research approach has been taken as the study has progressed from findings into thematic coding and interpretation and progressing into generating clarification and new insights (Smith & Osborn, 2003; Tolich & Davidson, 2011).

The four participants were professionals trained in EAI, who work in Aotearoa

New Zealand and who have offered EAI services at Dune Lakes Lodge for a minimum of five years. Participants had insight and knowledge about what social work consists of in the Aotearoa New Zealand context and which social services are available.

Semi-structured interviews allowed for a wide and comprehensive variety of answers. An analysis of the interviews was conducted, allowing patterns and key themes from within the data to become actively identified. The researcher was aware of the possibility for these themes to be influenced by her own position and a thematic analysis process offered insight into meaningful patterns while establishing a systematic and organised approach (Braun & Clarke, 2012; Garden & Kabacoff, 2011). By analysing and coding qualitative data in a systematic manner, generic codes were established linking themes to broader issues (Braun & Clarke, 2012). Themes showed patterns in the data that connect to the research question and provided meaning (Braun & Clarke, 2006). Codes and categories were generated, themes and sub-themes grouped accordingly and set aside before beginning with the next transcript. Finally, the selected themes and quotes were written up and interpreted in a light of the research question which led to a deeper understanding of the findings.

Ethical approval was granted by Massey University Human Ethics Committee under the number 4000019422 for research entitled: "Exploring equine-assisted learning and therapy in the context of trauma-informed care and its relevance for social work in New Zealand".¹

Qualitative studies need to be conducted with the "right" ethical attitude (Merriam, 2002) so critical reflection of our own positions ensured that our own biases and worldviews have not influenced our investigation and we were fully aware how our love for horses can blind us. Ethical dilemmas had been considered and discussed beforehand to ensure ethical safety for participants involved. Full information

about the purpose of the study before starting each interview was revealed, the participants understood that they could withdraw from participating in the study at any time and written consents were signed before interviews commenced.

During the process, the *Code of Ethics/ Ngā Tikanga Matatika* (ANZASW, 2019) was respected and participants were professionals trained in therapeutic client care. In the unlikely case that the interview may have triggered traumatic memories or other disturbing images, all would have been able to contact their supervisors. The interviewer made sure that she had a person at hand with whom she could talk to in case the interviews triggered negative emotions. All participants, documents and the environment were treated in respectful ways. The participants did not have access to their colleagues' interviews but were given their own full transcripts before agreeing for the report to be published. Participants granted their consent to use their full names in this publication and have been given a final draft of this article for approval.

Participants

Rosemary Wyndham-Jones is the owner of Dune Lakes Lodge and founder of the charitable organisation Equine Pathfinders Foundation. Her journey with horses started approximately 25 years ago with a year-long horsemanship training in Wales where she worked with a woman who taught her how horses communicate with each other. Extensive training and certificates followed, such as the Equine-Assisted Growth and Learning Association (EAGALA) training and modules with the Gestalt Equine Institute. She is a natural horse-friendship trainer, an EPONAQUEST Riding Focused Instructor and qualified with Hiltrud Strasser in Holistic Hoof-Care Management.

At the time of this research, Alistair Wait worked alongside Rosemary at Dune Lakes Lodge. He has conducted business consultations and educational programmes

in the private and governmental sector and has more than 20 years of experience as a Certified Master Trainer in NeuroLinguistic Programming (NLP), facilitating transformational learning. He has also trained extensively in EAL under the EAGALA model and is an accredited trainer in Spiral Dynamics Integral.

Geraldine Keith is a clinical psychologist in practice for over 40 years in Wellington, providing consultancy, assessment, and therapeutic interventions. She also is a certified professional in EAL and psychotherapy under the EAGALA model, has completed two training modules of the Gestalt Equine Institute of the Rockies (GEIR) and offers workshops at Dune Lakes Lodge.

Rob Pliskin is from the United States, has Masters degrees in Social Work and Education. He advocated for American wild horses in the 1970s and had worked since 2003 as an EAGALA Advanced Dual Certified Equine Specialist and mental health professional through the gestalt therapy lens. Rob has supported children, youth and adults in northern Israel, Aotearoa New Zealand and the Appalachian Counties of Ohio.

All participants were qualified and experienced practitioners in therapy, social work and horsemanship with minimum of 10 years of expertise in these endeavours.

Identified themes and findings

This section presents the findings from the collected data. Five key themes have been identified. The first highlighted the importance of the context, including choice, inclusiveness as well as the client's physical and emotional safety. The second theme explored social work values, such as non-judgmental attitudes, being strengths-focused and client-centred. The third focusses on the role of the practitioner as a knowledgeable guide, exploring the particular knowledge, values and skills required in this practice modality. The fourth theme explores the importance of holding



Holding space with horses.

space for transformational, long-lasting change in the context of trauma and personal growth and the fifth theme examines the role of bonding, nurturing, and connecting with the horse in this therapeutic triangle.

Theme 1: The importance of the context

Participants agreed that being able to leave stress or stressful thoughts behind and just being surrounded by peaceful nature emphasises the importance of the environment of calmness and a focus on the present. Rosemary shared that a client's physical and emotional safety is also essential and the creation of a safe space where people can be and explore themselves is of utmost importance:

And all I feel I do is like hold, hold the space for that to happen. [...] The horses give the learning experience.

Participants agreed that their personal and unique experience with the horse is paramount and Geraldine added that a sense of respect, concern and consideration for the horse must also be part of the environment's role. Rosemary agreed that keeping the

horses in a herd and giving them a choice about whether they want to communicate with humans or not, is essential:

I much prefer to do what I do with horses that is being at complete liberty, so that they are actually not restricted in any way, so that they have a choice whether they want to be with you or not.

Alistair explained that the intervention starts before people's arrival and ends long after:

One of the things I think that makes a huge difference with the boys and the young offenders that are coming out is that when they arrive, we'll sit around the table and have lunch with them.

Rob confirmed the importance of taking the time to be welcoming, kind and inviting for participants to engage in shared activities. He mentioned that all that is part of the intervention.

Theme 2: Compatibility with social work values

Participants agreed that strength-focused practice and a high degree of being person-centred and supportive is essential for people to recognise their own strengths and find their own answers. Part of a holistic approach is also the awareness that EAI can be a spiritual process, highlighted Rosemary, and Geraldine confirmed that:

Out of it can come a greater sense of purpose in life, a greater sense of spiritual connections, a greater sense of new possibilities.

Counselling, psychotherapy and social work share values and principles, but differ in the methods practitioners use. It seems that EAI practitioners blurred these divisions and worked with clients utilising techniques that suited their clients. Participants agreed that being a provider of therapy through the lens of trauma-informed care is essential in order to respond to traumatic experiences.

There was a strong view of benefits of the strengths perspective in practice and a belief in post-traumatic growth. They all claimed that everyone has their own individual experiences based on who they are, and the process should be non-directive, as Alistair outlined:

Horses are interested in who a person is right now, regardless of their upbringing or what happened in the past, which includes them as equal participants in a perfect therapeutic alliance in social work contexts. It allows people to trust and confide in a horse and tell them a story.

Alistair reflected here on the principles of safety, trust, collaboration, choice and empowerment which are of importance for social work practice. Geraldine deepened that thought by stating:

It's just simply being, sensing, reacting, noticing. A completely non-judgmental, objective observer.

Both Rob and Alistair noted that people create their own inner, subjective experience, based on the horse's and the practitioner's non-judgmental input. The communication of a positive and non-judgmental attitude and the unconditional acceptance of others are social work values in action.

Geraldine confirmed that the practitioner provides guidance only, however, practitioner's knowledge and expertise are essential:

I think one important thing to be good at is getting out of your own way and actually... quit being the expert. [...] It's your duty to know as much as you do know to help the person figure out what they need to figure out. But you must have a really astute sense of how important it is to be in the background as much as possible because the magic happens between the horse and the client.

Integrating an understanding of people and their situations, compassion, warmth

and a non-judgmental attitude into practice allows the practitioner to value and validate a person and professionally respond to client needs, thereby fully engaging in interpersonal social work skills (Trevithick, 2008), yet in a very discreet way.

Theme 3: The knowledgeable guide on the side

Interacting with a large and powerful animal can create an opportunity for the client to overcome personal fears and to regulate emotions. The ability and willingness to go on a transformative journey with the client must be at the centre of the practitioner's role, supported by sound theoretical knowledge, professional frameworks and individual approaches.

Participants confirmed that a sound professional background allows choice between whatever is needed in the moment and negotiate it with the client. Gestalt, as a therapeutic modality, has informed and shaped Geraldine, Rosemary and Rob's practice in seeking to understand trauma and how to work with it and promote post-traumatic growth.

Neurolinguistic programming (NLP) provides the framework for Alistair in doing transformative work and his practice is also informed by mindfulness and yoga practice. Rob offers eye movement desensitisation and reprocessing (EMDR) sessions for clients with complex trauma and combines them with EAI as this can enhance the healing process (Shapiro, 2017). Rob, who on top of his social work degree, is educated in cognitive behaviour therapy (CBT) and dialectical behaviour therapy (DBT), finds gestalt and the EAGALA learning (being holistic and allowing to view a person in the context) most relevant in his work.

Geraldine, as a registered psychologist, uses constructed activities, such as the trauma acceptance ally in her psychotherapeutic, trauma-informed work, which allows her

to address client trauma based on evidence-based practice. Rosemary incorporates breathing techniques, mindfulness, horsemanship skills and brings her many years of personal experience in order to expand client learning on a spiritual level as well by focusing on meditative practices during a session.

Sound professional knowledge as well as the ability to provide the right guidance at the right moment contributes to the meaningful EAI practice.

Theme 4: Holding space for transformational, long-lasting change

Participants indicated that EAI's beneficial effects are suitable for most people. However, Alistair and Rosemary have found in their practice that particularly people who have experienced complex trauma or who did not receive the help they needed in other therapies, such as talk-therapies or medication, can benefit from EAI. Alistair highlighted:

A lot of the children are burned out with talk therapy where the client is reliving the past over and over again. And so is the pre-preposition that goes with that: the past is always going to be there.

All participants highlighted the importance of non-verbal communication in the context of EAI and trauma (van der Kolk, 2002). Talking about personal trauma can be part of the transformational process, but as Rosemary, Alistair and Rob pointed out, because EAI is about the present moment, telling the story is not necessarily required. Rosemary explained that encouragement to share feelings with the horse, for example, can be a more powerful tool:

I just say to them, whatever is going on for you, just go and tell the horse [...] They tell it out loud or they normally tell it to the horse in their head. [Or] I ask what message the horse may have for you? Of course, it's themselves talking

to themselves [laughs], but it's always very powerful. [...] Like, within fifteen minutes they are like, they've got this different look on their face, and they are like smiling, they are happy.

Participants agreed that this process allows change of perception to be achieved within minutes, opening pathways to change in behaviour with a minimum of guidance, and free of over-interpretation. This makes EAI a powerful and robust tool, with a possibility of fast and long-lasting results. Geraldine explained:

In terms of a systems theory, you only have to change one thing for a whole lot of other things to change. And the horse, the relationship a horse offers to a person and what they discover in terms of their patterns of approach, avoidance, intimacy, trust [can reveal that] sometimes the horses are the greatest teachers.

Participants also identified that EAI shifts the focus away from the person to the horse. People can talk about a horse and will often unconsciously refer to their own feelings, projecting these feelings onto the horse, as Rosemary explained:

That allows people that are shut down to open up because they [did not have] to talk about themselves. They can talk about the horses.

Rosemary added that for the practitioner holding the space is often all that is necessary in order to give a meaningful learning experience and to enable personal growth. Part of a holistic approach is also the awareness that EAI can be a spiritual, even sacred, process, highlighted Rosemary. She demonstrated how profound "a safe space" can be experienced:

And I just got [the group] into holding that sacred space and they all where probably there for about half an hour, just sitting or laying, or just being there

with the horses. [...] It was like a ... you know, I am not religious, but it was almost like I went into a church or going into a very special place. It was like, it was very sacred. And all I feel I do is like hold, hold the space for that to happen. So, yeah. I take them into that very space because often they don't spend enough time in that space.

The process is simple, but not simplistic, confirmed Alistair and Geraldine, as much of the learning is simply created by the practitioner's guidance through observation and feedback.

Theme 5: The horse's role in a therapeutic alliance

Relational aspects, such as the horse offering communication and companionship, have been found central to positive achievements. Rob commented:

Horses are highly relational, they are completely social animals [...] They are prey animals, they live in herds, and so they are highly attuned [...] and they are also great interpreters of what a relationship could be and what is happening in the here and now.

The healing process starts unfolding when the horses generate the learning experience by mirroring people's behaviour (Porter-Wenzlaff, 2007). The horse mirroring a person's behaviour therefore encourages client connection and a relationship based on trust and equality. Sessions may begin with tasks as simple as the client choosing a horse or the horse choosing the person and this process already contains meaning. Alistair explained why just brushing a horse could already be profound:

It's about bonding, it's about care, it's about nurturing. It's about all those things that maybe they don't have in their life. They get the opportunity to rebuild the bonds that were there in their childhood.

Participants thought that these authentic reflections were the foundation of the client's truthful self-discovery process. Rosemary confirmed:

There is no hiding, you can't really hide anything where you probably can in another dynamic where you can say "Well, that wasn't true." But you can't say that when the horse is standing there, reflecting back what's happening!

Horse–client interaction is achieved energetically, through clues or body language and the emphasis is always on relationship, stated all participants. People in abusive relationships may feel more comfortable with horses who are prey animals as the predator role is taken out of the interactive activity (Hamilton, 2011). The horse mirroring a person's behaviour therefore encourages client connection, shared meaning and a relationship based on equality (Brandt, 2004).

The practitioner as the knowledgeable guide working in the background holds space for transformational, long-lasting



Let me tell you about this.....

change, emphasising the importance of the therapeutic alliance (Burgon et al., 2018; Porter-Wenzlaff, 2007).

Themes that emerged during the interviews with four participants were introduced and explored. The following discussion will critically reflect and analyse the findings and compare them with those found in the literature.

Discussion

This research commenced with a curiosity about the therapeutic effects of the horse, practitioner and client triangle in EAI in relation to work with trauma and its compatibility with creative social work practice.

The findings of this study outlined the main themes that EAI practitioners find essential for effectiveness when working with clients who have experienced trauma or are facing emotional and psychological challenges. They unanimously pointed to the significance of a rural setting and the relationship based on respect and these findings confirmed results from international literature mentioned earlier. In the light of working with trauma and relevance of EAI, some other essential aspects emerged, which included:

- the provision of holding a safe space in order to create new learning and change;
- concepts of client inclusiveness;
- keeping horses in their natural environment; and
- providing choice and liberty for clients and horses.

These contributed significantly to what is perceived as a physically and emotionally safe environment.

Focusing on mutual trust, respect and clients' strengths resonates well with the

main principles of effective social work practice (Clark & Hoffler, 2014; Szczygiel, 2018; Yatchmenoff & Sundborg, 2017). The findings highlighting alignment with humanistic values may promote easy implementation of EAI into social work practice. Participants claimed that, when working with clients with a history of complex trauma, EAI has particular potential to be utilised as complementary to traditional social work processes.

Underpinning values and frameworks, personal and professional experience, as well as techniques and knowledge, assist practitioners to accompany people on their transformative journey in a professional manner, thereby highlighting the importance of the practitioner's professional background. While the practitioner's willingness and non-directive influence have been documented as important, the practitioner's skilled guidance through the process and the ability to counterbalance the emergence of trauma reflects that EAI practice needs to be based on sound knowledge and expertise. A lesser known concept in this context is the illustration of a focus on mindfulness, the integration of silence and the present moment (Burgon et al., 2018; Hamilton, 2011; Klontz et al., 2007). The connection and exchange between client and horse on a deeper level can also allow the experience of a spiritual journey if the person is open to it, adding an opportunity of meaning and purpose in clients' lives and utilising the experience with a horse as a metaphor for an issue a client may be struggling with, as Alistair explained:

It's never about the horse and it's never about the task. It's always about the response that comes with that. So, that's why the simplest, smallest things can have such a profound effect on people. [...] People want to move. People don't want to be stuck.

The shift of attention away from the person to the horse can be central to a person's

authentic reflection and self-discovery process (Buck et al., 2017). Shifting away from the person is contrary to traditional therapeutic settings where clients may become repeatedly involved in discussions about their narratives of hurt or painful past events (Buck et al., 2017). Talking about traumatic events can enable some to regain mastery of their lives; however, as van der Kolk (2002) highlights, trauma must be seen as deeply connected to sensations and perceptions rather than to words. The traumatised individual may not necessarily find the words to verbally communicate these collections of feelings and bodily sensations, but when confronted, the process can easily lead to re-traumatisation and the avoidance of future talk-therapy (van der Kolk, 2002). Findings also suggest that EAI may also be useful for people who have not been reached by mainstream social work therapeutic processes.

The comforting warmth and presence of horses as well as the therapeutic relationship based on connection had been confirmed by previous literature and participants. Findings suggest that EAI brings, not only a practitioner who is non-judgmental to the practice, but also a benevolent horse who appears to be joining without prejudice and expectations, with the given choice of leaving in liberty at any moment. In this context, whatever happens can be used for reflection and growth and is guided by a client and supported by the knowledgeable EAI practitioner. This non-threatening alliance encourages clients to be authentic and to address issues they may want to attend to in order to live more fulfilling lives.

Recommendations and limitations

Although horses may have offered some sort of solace to humans for a long time, only recently EAI has been formalised and researched. Participants indicated that the reason might lie in the current trend of integrating a stronger focus on mindfulness and the present moment into professional practice. We wonder if connecting to the

inner self in order to experience who we really are and then connecting with a horse from that authentic place may enable us to perceive our current issues in a different light and as a result, find out what is the core of the issue that has been perceived as a problem or an area of growth. It seems that a stronger utilisation of meditation and mindful concepts into social work practice might also be beneficial for social work clientele experiencing challenges.

EAI practice promotes authenticity and enables clients to step outside of performative roles and connect to themselves and others with grace and integrity. EAI has the potential to be utilised to a much greater extent in social work practice. Although the practitioner's interventions were based on knowledge, values and skills familiar to social workers, additional training in EAI will be required for its effective application in social work practice.

Currently, Oranga Tamariki (the statutory child protection and child welfare agency in Aotearoa New Zealand) recognises the benefit of this work by financially supporting children and youth to attend school holiday programmes offering opportunities to grow and develop new skills and abilities. However, it is not a panacea. It requires a willing participant open to an alternative approach, motivated and ready to explore how past trauma may have been embodied and how it may have impacted their current lives. Safety issues need to be addressed when clients are faced with a large and unpredictable animal as well as exploration of prior fears or allergies that may prevent people from being fully engaged. However we have witnessed people benefiting from this work from a distance—just observing what was going on in a paddock and later reflecting on it and linking it to their familiar patterns of being. In this modality, there is no coercion and participants are called to be responsible for their actions. This prevents accidents and ensures safety for horses and for humans equally. Cost is usually not a preventive

factor as fees match usual therapeutic fees. The school holidays camps and team building activities are often more affordable than other programmes offering similar services.

Future research

The concept of EAI supports social work in various aspects and requires further exploration. Although it is relatively new field of research, a wealth of literature is available on the benefits of EAI. However, few studies provide information about the potential role social work practice could have in this field or the impact on practice with

social work clients, which is also connected to empowering projects that allow horses to collaborate on a voluntary, not forced, basis. Future research needs to investigate how EAI's therapeutic work could be utilised to a larger extent as an effective mental health and wellbeing tool by social services and how social work as a profession could integrate equine-assisted concepts. As a consequence, principles of EAI such as reflection, silent communication and equal power would reach a larger clientele, more social work clients could be referred to EAI practices and more social workers could be trained to become EAI practitioners.

Future investigations into funding issues, on how EAI could become a proven, cost-effective treatment that can be used widely and be accessible for everybody who could benefit from having a learning experience with horses. Equine therapy establishments are not cheap to run and funding from the public sector would allow social work service users to utilise EAI. More research might have the potential to positively impact the view of EAI in the context of future trauma-informed care funded by the government, thereby multiplying opportunities for effective and affordable therapies for clients from all walks of life as well as for EAI-trained therapists offering their expertise. These may include more training opportunities, more field trips for school children and young people and more team-building activities where people from various walks of life can experience benefits from working with horses.

Final comments

Aotearoa New Zealand, with its vast open spaces and green pastures for large part of the year, enables people to keep horses at liberty in their paddocks. Dune Lakes Lodge offers holistic approaches and possibilities in a beautiful setting, including a herd of horses and highly trained practitioners with a background of theories and frameworks closely related to social work. Effects of EAI may not be immediately visible or



Trust and equality.

felt, although sometimes they may feel like a lightning bolt as some participants described. Regardless, this research shows it is definitely worth further exploration and enabling as many social work clients as possible to explore this appreciative and mind-opening modality.

The next stage of the wider project at Dune Lakes Lodge is research with clients and their experiences of EAI with the focus on transformative learning from their perspective. This stage will be followed with the focus on horses, attempting to discover how reciprocity of interspecies communication plays out.

The emotional depth of a learning experience with a still mind and a horse that offers relationship and connection, enhances EAI's relevance for social work in the context of trauma-informed care. Treating horses with respect and allowing natural communication and behaviour to happen enables all participants to have an interspecies experience that has potential for emotional growth. EAI needs to be experienced widely and on a personal level, as Rosemary concluded:

Everyone should have a horse experience once in their life and that does not mean they go riding. It means to have a horse experience. A learning experience.

Note

¹ The Ethics approval was granted with the reminder to include the following statement on all public documents:

"This project has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research.

If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Associate Professor Tracy Riley, Acting Director (Research Ethics), email humanethics@massey.ac.nz."

Accepted 20 August 2020

Published 15 December 2020

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No pets allowed: A trans-species social justice perspective to address housing issues for older adults and companion animals

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ABSTRACT

INTRODUCTION: Significant benefits of companion animals (i.e., pets) for older adults are recognized and publications on Animal-Assisted Intervention, Animal-Assisted Activities and Animal-Assisted Therapies with older adults are growing. Studies on housing and community-residing older adults with companion animals from a non-utilitarian perspective on other animals, however, are rather limited.

METHODS: For this scoping review, we used a Critical Animal Studies perspective, in particular, a trans-species social justice framework to address two questions: “What are the scope and size of the literature on housing for community living older adults with companion animals?” and “What is known from the existing literature?” We searched peer-reviewed publications from 1980 to 2019 by using MEDLINE, PsychINFO, ProQuest and Scopus.

FINDINGS: Six works from Canada, Aotearoa New Zealand and US met our criteria. A disturbing reality was discovered: Restrictive leasing (‘no pets’ for rental housing) among low-income older adults with companion animals in public housing has persisted for the last 40 years and prevents them from accessing affordable housing. Also, the discourse of pets as problems or risk seems to justify prohibiting older adults from living with companion animals.

CONCLUSION: Utilising the concept of speciesism and a trans-species social justice framework for analysis, we argue that intersectional institutional oppression of speciesism and classism is a root cause of the situation. Justice for older adults cannot be achieved without justice for their companion animals. Future studies in human–animal relations and education and practice in social work need to incorporate ideas of speciesism and justice beyond humans.

KEYWORDS: Housing; companion animals; pets; aging; trans-species social justice; Critical Animal Studies; human–animal relations

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Examination of housing and aging is typically conceptualised solely in relation to humans; however, this may provide an incomplete picture. In some situations, companion animals (i.e., pets) may be the only stable, long-term, significant

relationships in the lives of older adults. Yet housing issues of older adults continue to be conceptualised within an anthropocentric paradigm. Most social workers do not include any questions about companion animals, for example, in home care

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WORK 32(4), 55–68.

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assessments, which is problematic when considering that the majority of households in North America today include companion animals. In the US, a 2019/2020 survey of pet owners found that the number of US households with a companion animal increased from 62% to 67% since 2010, from 71.4 million pet-owning homes, to 84.9 million (American Pet Products Association, 2020). A Canadian survey found similar growth in pet ownership, with an estimated 10% increase in cat and dog ownership in the past 10 years (Canadian Animal Health Institute, 2019). A global survey in 2015 cites 61% of Canadians owning at least one companion animal (Growth from Knowledge, 2015). In other words, most Canadians and Americans have companion animals and having companion animals is no longer an exception but a norm in the 21st century in these countries. Many who live with companion animals consider them as family. These changes in perceptions of and experiences within families suggest social work practitioners and educators in this century need to reconsider the current anthropocentric paradigm and professional ethical commitment (Ryan, 2011). The purpose of this paper is to discuss key findings from a scoping review study on housing and non-institutionalised older adults living in communities with companion animals from a Critical Animal Studies perspective, specifically a trans-species social justice framework (Matsuoka & Sorenson, 2014, 2018; Sorenson & Matsuoka, 2019). By doing so, we will bring the core social work value, social justice, to the centre of discussion on human–animal relations. Some concepts are likely new to social work readers and we begin this paper by defining these.

Critical animal studies

Critical Animal Studies is an interdisciplinary field of study which challenges anthropocentrism, recognises nonhuman animals as beings with agency, personhood and subjectivity, whose lives are intrinsically valuable and respects their

autonomy and dignity. It challenges a human–animal binary and rejects not only the cruel treatment of other animals but their use as resources or tools for human ends. Importantly, it opposes the systemic and institutionalised exploitation of nonhuman animals and supports efforts to liberate them from oppressive conditions by taking an intersectional perspective (Nocella, Sorenson, Socha, & Matsuoka, 2014).

Trans-species social justice and speciesism

Social justice is the core concept of the social work profession and it is widely accepted in relation to class, gender, race, age, sexual orientation, ability, and so on, but the profession has been slow to acknowledge that species is equally important. The term *speciesism* was coined in 1970 by clinical psychologist Richard Ryder (1983) and popularized by Peter Singer's (1975) book, *Animal Liberation*. The term refers to an ideology which supports treating sentient and morally equivalent beings differently on the basis of species alone, rather than giving them equal consideration. Many works on human–animal relations focus on individuals and are indifferent to speciesism completely or to the structural nature of speciesism. Critical Animal Studies scholars, such as Nibert (2002, 2013) and Sorenson (2010, 2016) examined intertwined systemic oppression by using a political economy approach and ecofeminists Adams (2010, 2014), Donovan (2018), Gruen (2007), and Kheel (2008) investigate the intertwined oppression of women and nonhuman animals, i.e., patriarchy and speciesism.

We created the term *trans-species social justice* to highlight the importance of social justice in addressing human–animal relations, which is core to Critical Animal Studies, but also to social work. It refers to the "consideration of interests of all animals (including humans) in order to achieve institutional conditions free from oppression and domination" (Matsuoka & Sorenson, 2014, p. 70). This concept helps bring in an

examination of structural issues, whereas the dominant trend is to examine individual relationships. We believe that this also helps social workers reflect on human-centred practice and policy.

Literature review

Most studies related to animals and older adults are on animal-assisted interventions (AAI), animal-assisted activities (AAA), and animal-assisted therapies (AAT). Many conducted these studies with older adults in long-term care or retirement homes (e.g., Kogan, 2001; Le Roux & Kemp, 2009). Research on community-living older adults focuses mainly on the health benefits gained from companion animals (e.g., Krause-Parello & Kolassa, 2016). The most recent systematic review on older adults and animals found that, although the effect on cognitive functioning among residents with dementia or Alzheimers disease in a long-term care setting is inconsistent, close to 80% of relevant studies reported positive mental and physical health outcomes of having companion animals, based on the respective aspects they measured (Hughes, Verreynne, Harpur, & Pachana, 2020). As benefits of animal companionship for older adults are increasingly understood, its potential as an intervention strategy is being recognised (Gee & Mueller, 2019). Thus, companionship with other animals is frequently conceptualised as a means to enhance the quality of human life, although more now acknowledge the importance of considering the welfare of animals as well (e.g., Gee & Mueller, 2019; Hughes et al., 2020). Aside from such works, a smaller number of studies focus on issues such as grief and loss of pets (Laing & Maylea, 2018; Morley & Fook, 2005), elder abuse (Boat & Knight, 2001; Peak, Ascione, & Doney, 2012), end of life care (Dorfman, Denduluri, Walseman, & Bregman, 2012; Engelman, 2013; Geisler, 2004), and animal hoarding (Koenig, Leiste, Spano, & Chapin, 2013; Nathanson, 2009). Still others encourage social workers to include companion animals in geriatric practice as hard-to-reach older

clients may accept visits by social service agencies if they help them to care for companion animals (Ebenstein & Wortham, 2001) or to promote food security and health among older companion animal owners by including pet food in local foodbanks (Rauktis et al., 2020). However, studies that conceptualise other animals not as tools to benefit human animals and examine animal companionship among community-dwelling older adults in relation to housing seem to be limited; this important topic requires closer investigation and our scoping review set out to locate existing work.

Method

Arksey and O'Malley's (2005) approach was adopted to conduct a scoping review to address two research questions: "What are the scope and size of the literature on housing for community living older adults with companion animals?" and "What is known from the existing literature?" We defined "older adults" as over 65 years of age but we accepted some studies that defined them differently; "companion animals" as any dog, cat, or other animal kept for companionship, as opposed to livestock, laboratory animals, working animals, therapy animals, or sport animals, which may be kept for other reasons; finally, "housing" as privately owned or both private and public rental housing. We excluded emergency shelters, assisted living residences and long-term care accommodations.

The search

In order to identify relevant studies, we began with electronic databases. We first searched MEDLINE, PsychINFO, ProQuest and Scopus. The following keywords were combined for the searches: keywords related to housing ("housing OR home OR accommodation OR residential OR rental OR tenants OR landlords"); keywords related to older adults ("older adults OR seniors OR elderly OR aging") and keywords related to companion animals ("pets OR companion animals OR dogs OR cats"). We

used keywords related to the human–animal field (“human-animal studies OR human–animal bond OR human–animal interaction OR human–animal relations”) in place of keywords related to companion animals, which yielded similar articles and no new citations. Using ProQuest, which includes over 50 databases, we identified databases with many relevant works such as Sociology Collection, Social Sciences Abstracts, Applied Social Sciences Index and Abstracts, Social Services Abstracts, and Sociological Abstracts. We then searched these databases individually, including additional terms for three key areas (i.e., older adults, housing and companion animals) by using their thesauruses. However, no additional work was found. We repeated these processes three times (April and October 2019 and May 2020) and obtained similar results. Then, using the same key terms, we searched specific journals which came up frequently, such as *Gerontologist*, *Journal of Gerontological Social Work*, and *Ageing and Society*. We also searched *Canadian Journal on Aging* to ensure we did not miss Canadian publications which may be relevant for future research. Again, these searches did not yield any new citations. We concluded that our search was comprehensive. The paper is based on our May 2020 search using the selection criteria listed below.

Selection

Using the keywords listed earlier in MEDLINE, PsychINFO, ProQuest and Scopus we found in 323 citations in total. We added 13 articles known to the authors. Studies were not excluded based on their methods, nor on any assessment of their methodological rigour. Our inclusion criteria were as follows and we excluded those which did not meet them:

Publication period: 1980 to fall 2019

Language: English

Type of work: Peer-reviewed journal articles based on empirical studies

Focus: Non-institutionalised older adults living in communities with companion animals or those who wish to live with them and housing.

We removed duplications and those focused on health-related outcomes such as allergies or respiratory symptoms, those that focused on pets as threats or nuisances such as problems with barking dogs, cat bite wounds, zoonoses or the health of older companion animals and veterinary care. We also removed citations whose focus was on assessing outcomes of AAI, AAT, or AAA. We excluded studies on robots in place of AAI, AAT or AAA. Those that addressed use of animals in long-term care settings were excluded. As a result, we removed 299 citations in total at the first screening stage based on titles by using the inclusion criteria. We kept 37 articles to further review their titles and abstracts. We removed those which had limited focus on independent living older adults and housing. We selected 26 articles. When their references were checked, six were added as potential citations. We further conducted back searches by utilising Google Scholar and Worldcat to identify articles which cited these 32 selected works. No work met our inclusion criteria from the back search. Thirty-two articles were used for full review. After the full review, we removed those on temporary shelter (neither owned nor rental housing, such as emergency shelters), care homes, commentaries or those which were not based on original empirical studies. Six articles met our final inclusion criteria to chart (Figure 1).

Results

This scoping review identified six relevant works which met our criteria. Half were published in the 1980s, only one in the 1990s and none in the 2000s; two found in the 2010s were by the same lead author. Four considered situations in the US, two in Canada and one in Aotearoa Zealand. All are descriptive studies. Recent studies are all qualitative with smaller sample sizes and two qualitative studies and one mixed

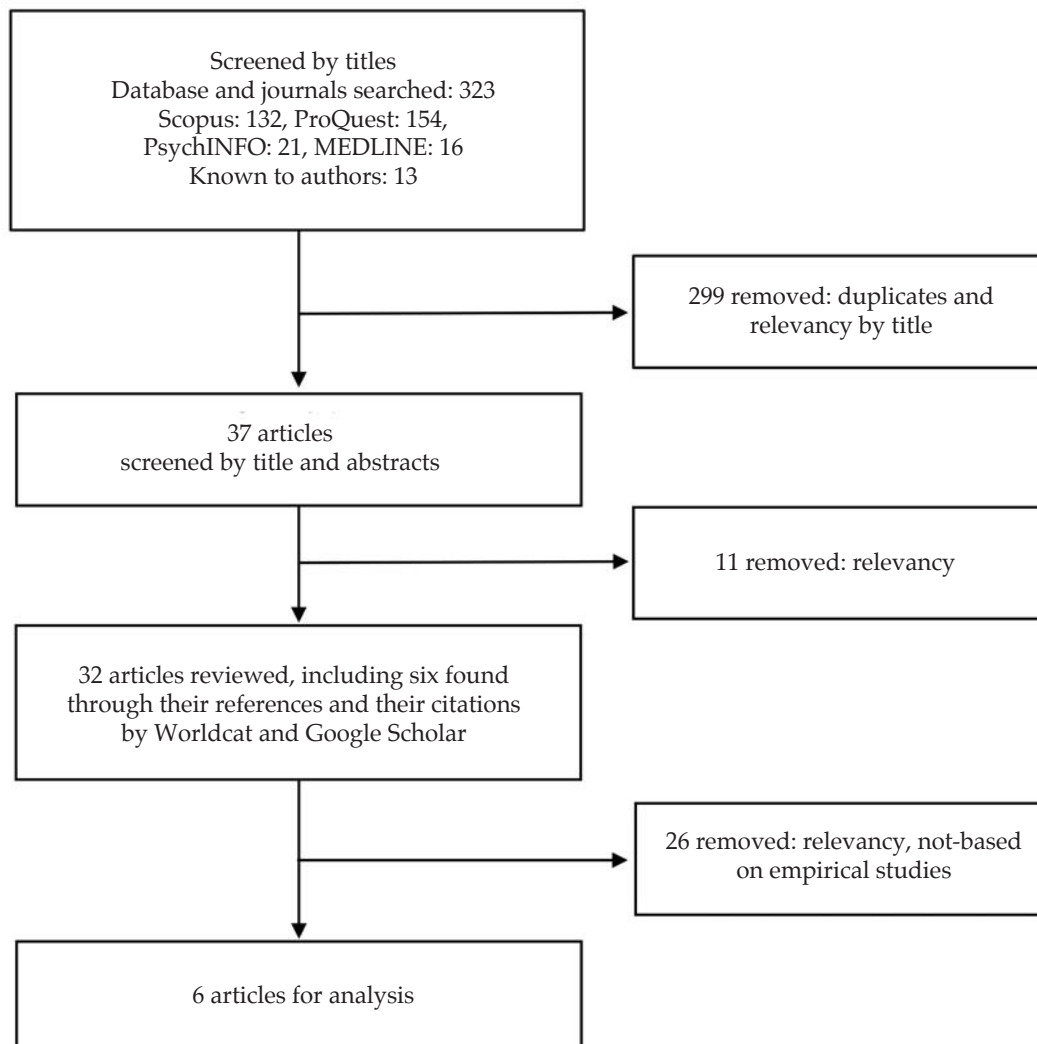


Figure 1: Scoping Review Flowchart.

method study were published in the 1980s and 1990s (Table 1).

The scope of the studies found

We identified three key characteristics of the scope of the articles on housing provision for older adults living with companion animals. The first characteristic is their focus on housing for low-income older adults. Second, they all examined attitudes and attachments to pets in various ways. As to methods, surveys, a comparative study method, case study, or multiple qualitative methods were used. For perspectives,

some were from those of older pet owners and non-pet owners, and others explored those of professionals, such as property managers and service providers of pets in the buildings. For example, one examined whether non-pet owners accept pets in their housing complex through comparative study of two cities in Aotearoa New Zealand: in one city, where older adults can have companion cats and, in another city, where they could not (Mahalski, Jones, & Maxwell, 1988). Earlier work examined both older pet owners, other residents, and property managers through surveys and interviews (Hart & Mader, 1986). A third characteristic

Table 1: Characteristics of Six Studies on Housing and Older Adults with Companion Animals

Study	Location	Purpose	Type of housing	Participants/Methods	Aging policy
Hart & Mader (1986)	US	To clarify any problems experienced since introducing pets to public housing.	Public housing	Housing managers and residents Descriptive qualitative study Phase 1: telephone interviews with 50 housing authorities, the administrators; Phase 2: on-site interviews with 12 managers and with 42 pet-owning tenants and 60 non-pet owners at 16 housing complexes located within 10 housing authorities.	None provided
Netting & Wilson (1987)	US	To examine attitudes and attachments toward companion animals of lower-income older adults in a southeastern metropolitan community.	Most lived in public housing	Descriptive qualitative study using in-person questionnaire with 51 low-income older adults.	None provided
Mahaiki, Jones, & Maxwell (1988)	New Zealand	Identify thoughts and experiences about keeping cats in pensioner-housing owned by the city.	Public housing (Pensioner housing owned by the city)	Comparative quantitative study using in-person questionnaire with 40 female low-income pensioners living alone (20 in one city where cats were prohibited from public housing and 20 in another city where cats were permitted).	None provided
Smith, Seibert, Jackson III, & Snell (1992)	US	To consider (1) whether the companion animal is a determinant of housing choice; and (2) whether plans exist for companion animals if older adults predecease them or become disabled.	Mixed (including public housing)	Mixed Methods Phase 1: Mailed questionnaires: 2371 people aged 60+, 333 of which were pet owners; Phase 2: 339 in-person interviews representing 559 individuals.	None specified
Toohy, Hewson, Adams, & Rock (2017)	Canada	To explore perspectives on the roles that companion animals play in relation to older adults' aging-in-place experiences and ways that pet-related considerations may shape efforts to assist older adults.	Subsidized rental housing (including public and private housing)	Qualitative in-person interviews with 6 local community agency-workers supporting vulnerable older adults; 5 workers from local animal welfare organizations.	Aging-in-place
Toohy & Rock (2019)	Canada	To explore the moral underpinnings of the situation of limited pet-friendly affordable housing for low-income older adults.	Subsidized rental housing (including public and private housing)	Mixed method case study with 3 low-income older adults whose affordable housing needs were challenged by a shortage of pet-friendly housing	Aging-in-place

was the effort to gain actual experiences of older adults with companion animals and rental housing situations or transition to them, from older adults or housing-related professionals. The most recent study captured older adults' experiences of needing pet-friendly housing through use of vignettes (Toohey & Rock, 2019).

What is known from the existing literature?

Existing work spans close to 40 years, from three different countries, and these studies report that pet-friendly affordable housing is limited for older adults due to restrictive leasing. Restrictive leasing in these studies refers to a leasing contract that includes a "no pet" clause. This is an extra barrier when affordable housing is limited. Although limited availability of affordable housing is not a concern for older adults only, this situation has not improved although positive effects on individuals are widely noted, especially when they face declining social support as they get older. Also, the situation has not improved despite the fact that in the US, federal laws in 1983 gave older adults the right to live with companion animals in federally funded housing.

We also learned that companion animals play a significant role in older adults' decisions on housing. Hart and Mader (1986), Mahalski et al. (1988), and Toohey, Hewson, Adams, and Rock (2017) reported that older adults without companion animals did not object to others having pets in housing complexes. Managers of US housing complexes found that having pets in their buildings did not cause more problems; rather, they found some positive outcomes.

All studies acknowledged that many older adults considered companion animals as family members and significant others. Nevertheless, most did not have plans about predeceasing their companion animals (Smith, Selbert, Jackson, & Snell, 1992).

Although earlier work linked to particular federal law in the US (Hart & Mader, 1986; Netting & Wilson, 1987; Smith et al., 1992) and municipal by-laws in Aotearoa New Zealand that concern older adults (Mahalski et al., 1988), it is only recently that studies linked general aging policies such as aging-in-place and age-friendly-cities with the limited access to affordable housing (Toohey et al., 2017; Toohey & Rock, 2019). Among these six publications, we found that the contributions made by social work scholars were relatively few.

Discussion

Our scoping review found that "restrictive leasing" with "no pets" clauses is a significant housing issue for older adults with companion animals in communities. However, these studies are scarce and contributions from social work are limited, in spite of the fact that the issues concern a large number of older adults and also are relevant and significant for social work practice and policy. We will explore how social work can contribute in the future based on the discussion.

We searched peer-reviewed work from 1980 to 2019. A disturbing fact emerged in this scoping study: the situation of restrictive leasing has not improved over 40 years. Studies continue to report that older adults with companion animals face difficulties in finding appropriate housing for both and that some relinquish companion animals, others stay put in less than ideal housing situations and some others face eviction. All studies looked at older adults with low income and highlight the fact that affordable housing is limited for them, especially when they wish to live with their companion animals and refuse to relinquish them. Many consider their relationships with companion animals to be extremely significant. For example, Toohey and Rock (2019) report that one of their older participants expressed that, if he had to, he would choose to be homeless with his companion animal rather than abandon him. This important

issue affecting both nonhuman animals and older adults appears to have been sidelined by burgeoning studies that focus on AAI, AAT and AAA with older adults; despite the fact that the significant benefits of long-term companion animals for older adults have been recognised beyond the context of these temporary therapeutic relationships between animals and older adults. Furthermore, although such positive benefits from relationships between older adults and companion animals have become common knowledge among social workers, according to several survey studies in the US and Canada in the last 10 years (Chalmers et al., 2020; Hanrahan, 2013; Matsuoka, Sorenson, Ferreira, Hanrahan, & Chalmers, 2019; Risley-Curtiss, 2010), such awareness and knowledge have not been translated into challenging restrictive leasing and advocating for older adults with companion animals.

Interestingly, while restrictive leasing has continued during this 40-year period, we have seen positive statutory changes in the US: for example, the introduction of 1982 California state policy and 1983 US federal policy gave rights to older adults with companion animals to live in state-funded and federally assisted housing respectively. One might think that these policy changes would influence the situation of restrictive leasing positively. However, Smith et al. (1992, p. 182) observed concerning the status of the federal law: “[t]his law ... has been little implemented.” They explained why: “The HUD [the Housing and Urban Development] rules provide that state and local laws and even safety and sanitary regulations imposed by the housing facilities themselves have precedence over the federal law.” They concluded that the law did not improve housing security for older pet owners. One may wonder why local laws or regulations become barriers for changing restrictive leasing for older adults while the benefits to them of having companion animals are widely known. Some studies from our scoping review mentioned that those opposed to having companion animals said that pets cause

sanitary problems, allergies, noise, personal injury, neighbourhood problems or property damage (Hart & Mader, 1986). Such negative views toward pets seem widespread. For example, a 2005 survey study in the US with renters of all ages and landlords in the private housing market found the majority of landlords cited property damage as a main reason for restrictive leasing, even among landlords who have never allowed pets (Carlisle-Frank, Frank, & Nielson, 2005). Similar findings were observed in Australia as well (Power, 2017).

Contrary to the bias toward companion animals, the study by Carlisle-Frank et al. (2005) found no statistically significant differences in damage between renters with companion animals and those without. Instead, it reported that companion animals caused less damage than children did. The studies in our scoping review reported that problems with pets may happen but they are rare and can be managed well (Hart & Mader, 1986; Mahalski et al., 1988; Smith et al., 1992; Toohey et al., 2017). Yet, landlords continue to assume that pets cause problems without basing this on any evidence or experience. In such a way, a discourse of pets as problems is upheld regardless of absence of evidence or recognition of the benefits they bring. Similarly, Power (2017) found that, in Australia, landlords who never allowed pets and never experienced problems still hold negative views toward renters with pets; she argued that their unfounded view stems from the discourse of risk in a neoliberal society. Two puzzling situations seem to persist in restrictive leasing: 1) lack of progress in availability of affordable housing for older adults for the last 40 years in spite of the widespread knowledge of positive impact of pets on older adults and, in the case of the US, in spite of the fact that the rights of older adults to public housing there were granted and 2) the prevalent acceptance of pets as problem or risk discourse. We would like to examine these by utilising a Critical Animal Studies perspective and trans-species social justice framework.

A couple of studies in particular among those in the scoping review reported findings that are helpful to begin. A study by Mahalski et al. (1988) in Aotearoa New Zealand compared the situation in a city where older adults were able to keep cats as their companions in subsidised housing, with housing in a different city where they could not keep one. The authors observed that people who are negative towards cats had never actually lived with one (Mahalski et al., 1988). Other useful findings are from Hart and Mader's (1986) study. They inquired if any issues arose after the introduction of 1982 California state's pet-friendly policy on public housing; they found that the majority of housing managers/administrators did not have problems with the legislative changes. The study found that clear and enforced pet policies and use of community resources to support pet ownership helped to keep complaints at a minimum. They also found that those housing managers/administrators who were negative toward the new legislation in California had limited experience and contact with pets in their buildings. Thus, the study observed that the positive outcome did not simply happen; rather, when the housing managers/administrators took the matter seriously, let older adults know about the policies and regulations, kept close contact with them, learned about older tenants and their companion animals and provided resources to them which helped prevent or address issues.

When these findings and the aforementioned findings from Carlisle-Frank et al. (2005) and Power (2017) are considered together, one may argue that negative views toward pets seem to be related to limited contact with pets. In contrast, studies we found in the scoping review acknowledged that many older adults recognised the intrinsic value of their companion animals, their agency and personhood rather than seeing them as commodities which can be discarded at an owners' convenience. They accepted who they are and that the lives of other animals matter to both older adults

and the animals themselves. When one does not have much contact with companion animals, it is easy to act based on unfounded notions about "other animals" and stigma against "other animals" which devalues them. That is speciesism.

If one does not have much contact with those who are devalued (in this case, companion animals), practice and ideology are accepted without question and one does not examine the consequences of taken-for-granted institutional oppression which is based on speciesist practice and ideology. Consequences are serious. Housing is important in aging policy such as aging-in-place; however, older adults with companion animals face a shortage of adequate and affordable housing. Another consequence is that, although companion animals are significant others for many older adults, because they are not human animals, they are not considered equally significant and older adults often need to make impossible decisions to choose housing or companion animals. Results for those animals may be lethal if they are sent to shelters and not rehomed.

Yet, in many cases, these animals have spent more time with those older adults than have any human animals and the relationships are profound. Brooks, Rushton, Lovell, McNaughton, and Rogers (2019) report that companion animals provided people with a diagnosis of severe mental illness secure, stable and intimate relationships which human therapeutic agents could not. Although that study is not about older adults, one may speculate that in a similar vein, companion animals provide such secure and stable significant relationships to older adults that humans cannot. Speciesism enables creation of a hierarchy and human exceptionalism, devaluing other animals and what they contribute, and makes it possible to sustain the discourse of pets as problems or risks. As a result, companion animals are excluded from housing and restrictive leasing continues for low-income older adults with companion animals.

Important proposed interventions to change restrictive leasing exist. Noting that the 1981 National White House Conference on Aging acknowledged that having companion animals is a “civil right” and recognising the important physical and mental benefits of having such companions, Huss (2005, 2014) calls for greater allowance for animals in rental housing, along with support in terms of education about available resources, design features, and efforts to ensure positive trans-species relationships. Toohey and Krahn (2017) advocate for more affordable housing for older adults with companion animals and protection of the right to live with these animals, including elimination of housing rules that exclude animals and improved animal-protection legislation. Considering significant relationships with companion animals, the changing meaning of companion animals in human–animal relations, and the European Convention of Human Rights, Rook (2018) argues that law reform must be implemented to ban restrictive leasing in the UK as has happened in Ontario, Canada. However, while restrictive leasing is illegal in Ontario, people with companion animals still find it difficult to secure rental housing there. Contrary to discourse that constitutes pets as problems or risks, Carlisle-Frank et al. (2005) found that renting to people with companion animals is more profitable and makes better economic sense; thus, educating landlords is crucial. These proposed measures are essential but may not be sufficient to change the situation.

In order to understand the situation further and perhaps expose assumptions which are taken as normality, we explore the social construction of space. An examination of taken-for-granted speciesism is core to Critical Animal Studies. Related to this, Critical Animal Studies considers that examination of space in relation to political and economic systems is vital to understanding human–animal relations and establishing trans-species social justice (Nibert, 2002, 2013; Sorenson & Matsuoka, 2019).

Recent studies on canine–human relations shed further light on the situation. Armbruster (2019) contends that, although many people regard companion animals (dogs) as family members, consider them as having agency and treat them as such in their homes, once they step outside of these private spaces, dogs represent filth, dirt and the uncivilised in need of control by civilised human animals in public space. Such convictions operate to justify the discourse of dogs (i.e., pets) as problems and risks to humans. Accordingly, they are excluded from public space such as restaurants, as they are viewed as dangers to public health and sanitation (even though problems of contamination due to the presence of dogs in restaurants are minimal) and public space is constructed as being for humans alone and not for other animals (Armbruster, 2019). Such demarcations and conceptualisations of public space are not universal, rather they seem to be a result of colonialism, imperialism and neoliberal globalisation (Sorenson & Matsuoka, 2019). For example, the situations of street dogs in Bali (McCreanor, McCreanor, & Utari, 2019) and in Turkey (Heart, 2019) demonstrate that dogs have shared public space with humans for centuries yet changing political and economic systems threaten dogs’ places in public. The situation in Taipei, Taiwan depicts this well. In 1996, a government policy of “garbage-does-not-touch-the-ground” was introduced to make the streets clean but this also eradicated street dogs who used to clean garbage from the street (Chang, 2019). The establishment of clean streets without roaming dogs (both of which are important signifiers in representations of a global city) and the commodification of dogs as pets changed the space which dogs can occupy from public spaces, such as streets, to private homes.

This is not an accident; political economic systems which depend on other animals (Noske, 1997; Sorenson, 2010; Wolch & Emel, 1998) call for certain demarcations and conceptualisations of space. For example, Wallen (2019) critically examines how power

relations were enacted through spatialisation of canine–human relations in 18th-century England. Parliament passed a Dog Tax and hierarchies of dog breeds were created while hunting was limited to the aristocracy (i.e., landlords) to protect their property (the spaces they owned and all within) from the working class (Wallen, 2019). To achieve this, all dogs belonging to working-class people were considered as hunting dogs. Subsequently, it was only the aristocracy/landlords who could claim their dogs as companions (Wallen, 2019). These rules and practices specified who could keep dogs and where, which helped demarcate not only space but the class system. In this sense, manipulated representations of dogs manufactured particular canine–human relations which enabled broader political and economic systems.

We can identify similar operations concerning species, space, control and power in our discussion of housing for older adults with companion animals. If companion animals do not belong to public space, they should have access to private spaces such as homes. In the current scoping review, studies examined situations related to public housing or other rental housing. Such housing constitutes homes for older adults, yet this space is not private enough to house companion animals. This also seems to be true for other rental situations for any age groups (Graham, Milaney, Adams, & Rock, 2018; Power, 2017). This indicates that the conceptualisation of private space for companion animals does not include rental housing but only privately owned housing belonging to their “owners.” In other words, property ownership regulates space and the possession of dogs. Today, unlike 18th-century England, it is considered discriminatory to deny the possession of companion animals to people because of class (i.e., a lack of property ownership), yet it continues. Even when older renters’ rights to possess pets in the public housing space are legally protected, speciesist discourse of pets as problems or risk trumps them. Taken-for-granted classism seems to persist as the

normality of speciesism goes unquestioned. Thus, among the consequences of speciesist institutional oppression on older adults with companion animals are a lack of affordable housing and a systematically maintained class hierarchy.

On the other hand, consequences of taken-for-granted speciesist institutional oppression on companion animals can be fatal. Studies on relinquishing companion animals consistently report that rental, moving or housing issues are among the most common reasons for surrendering animals (Carter & Taylor, 2017; Coe et al., 2014; DiGiacomo, Arluke, & Patronek, 1998; Dolan, Scotto, Slater, & Weiss., 2015; New et al., 1999; New et al., 2000; Salman et al., 1998; Shore, Petersen, & Douglas, 2003) and these are closely related to housing rules and landlord restrictions (Carter & Taylor, 2017; Coe et al., 2014; New et al., 1999; Shore et al., 2003). Studies on relinquishing companion animals grew since 2000 (Coe et al., 2014) as serious ethical concerns about euthanising healthy animals were recognised (Coe et al., 2014; Lambert, Coe, Niel, Dewey, & Sargeant, 2019). If one dismisses such fatal outcomes as insignificant, one is not only exercising speciesism against the sanctity of life but also ignoring intersectional oppression of speciesism and classism.

Implications

Restrictive leasing depends on unquestioned speciesism and classism. If we wish to make affordable housing available to low-income older adults with companion animals, legal changes and education efforts need to be accompanied by understanding of intersectional oppression of speciesism and classism. Contributions by social work on this topic should reflect the goal of the profession, i.e., achieving social justice. We seldom hear of speciesism in social work literature today despite the important critique by Wolf (2000) 20 years ago. Discussions of institutional oppression and social justice in social work focus on human animals alone (Matsuoka & Sorenson,

2013, 2014). This may reflect the dominant theoretical approach on human–animal relations which emphasises individualistic human–animal bonds. A Critical Animal Studies approach, as demonstrated here, will be useful to unveil intertwined systemic oppressions to explore social justice beyond species, trans-species social justice (Matsuoka & Sorenson, 2014). In order for social workers to understand complex intersectionality, we need to include trans-species social justice, speciesism and a Critical Animal Studies perspective in social work education.

Conclusion

This scoping review on housing, older adults and companion animals from 1980 to 2019 found that restrictive leasing (“no pets” for rental housing) among low-income older adults with companion animals in public housing persists and prevents them from accessing affordable housing. Adopting a Critical Animal Studies perspective and trans-species social justice framework, we utilised the concept of *speciesism* to analyse the persistence of restrictive leasing which was justified by a discourse of pets as problems or risk. Intersectional institutional oppression of speciesism and classism emerged as a root cause of restrictive leasing among these older adults. Justice for older adults cannot be achieved without due justice to their companion animals. Future studies on this topic, especially from social work, need to incorporate ideas of trans-species social justice and speciesism in the conceptualisation of human–animal relations. This requires an examination of speciesism in social work education as a “must”, not because other animals are useful to humans but because such an examination helps us to understand complex intersectional oppression and to achieve justice beyond humans.

Acknowledgment. The work reported here is supported by research grants from the Social Sciences and Humanities Research Council (816-98-0042).

Accepted: 17 September 20, 2020

Published: 15 December 2020

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“The thing about animals is they are not judgemental”: Stories and images from formerly incarcerated women about their relationships with companion animals

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ABSTRACT

INTRODUCTION: The data presented in this research brief are drawn from a project which asked 12 former prisoners what they thought outsiders should know about imprisonment and release. One of the themes arising from the data suggested that, rather than participating in a mandated programme or professionally delivered intervention, the reasons for successfully staying out of prison were based on relationships and connections. Sometimes these relationships were with family, community, a specific worker or group and, for six of the women, with companion animals. It was a combination of these relationships which helped the participants find their own pathways to staying in the community and, eventually, out of the criminal justice system.

APPROACH: Data were created using Photovoice, an arts-based, qualitative, participatory action research method where participants take photographs and then use those images to help tell their story. Participants were invited to talk about anything they saw as important for outsiders to know about their experiences of imprisonment and release. Unexpectedly, six of the women chose to speak about the importance of their relationship with companion animals.

FINDINGS: The data presented here show the value that women in this project placed on their relationships with companion animals. More broadly, their data point to the importance of having non-judgemental relationships and the benefits of being able to ‘give back’.

CONCLUSION: The unexpected findings presented in this research brief suggest that social workers must take into consideration all relationships criminalised women have, not just those with other humans.

KEYWORDS: Photovoice; companion animals; formerly incarcerated women

In 2018, I completed a research project which used the qualitative, participatory, arts-based research method Photovoice, to learn about the post-release experiences of 12 people who had all spent time in South Australian prisons (Jarldorn, 2018). Armed with a camera, participants were asked to

take photographs and create narratives supporting the images to respond to the following research question: “*If you had fifteen minutes with a policy maker or politician, what would you want to tell them about your experience?*” Given this freedom to speak candidly meant that I heard about families,

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communities, relationships, addiction, domestic violence, lack of housing and employment. The overarching theme, though, was the interpersonal and structural violence they saw and experienced created by the prison system (Jarldorn, 2019).

One of the key things I learned from the research was the long-term consequences of imprisonment, where “the pain inflicted by prisons is carried with former prisoners as they return to the community” (Jarldorn, 2019, p. 328). As I have explained elsewhere, this led me to contend that the arguments supporting the abolition of prisons fit within the purpose of social work, and to question the place and purpose of prisons in responding to social problems. Mansfield’s discussion of abolition clarifies this position:

By relying on prisons, we are effectively abandoning our most vulnerable and challenged people, people who we struggle to include, and people who struggle to belong. But we cannot solve problems of connection by placing people behind walls, away from our communities. By continuing to rely unthinkingly on prison and punishment as responses to social problems, we are missing vital opportunities and resources—time, energy, money and

attention—to build stronger communities of connection, to heal the harms caused by imprisonment, and to address the issues that led to it in the first place. (2018, para. 1)

My aim in this project was to respect each participant’s stories and texts on their own grounds rather than ranking them in some order or hierarchy. Hence, this research brief focusses on the data created by six of the women who chose to talk about the importance of companion animals in their lives. At the time of data collection (2014–2015), all but one participant had been out of prison for a year or more. To my knowledge, each participant discussed in this paper is still living in the community in 2020, making them a unique group of successful prison leavers, especially given the high proportion of people who return to prison within two years of their release (Baldry, 2010).

Their data suggest that—rather than participating in a mandated programme, professional intervention or through close surveillance—one of the core reasons for participants successfully staying out of prison was having positive and nurturing relationships and connections. This was usually a combination of relationships with family, community, a specific worker or group or, as shown here, with companion animals. These positive relationships helped participants find their own pathways to staying in the community and, for some, leaving the criminal justice system altogether.

The images and narratives in this paper were created by Gidget, Kate, Feeney, Georgia, Joy and Stella. All names used here—of the women and their companion animals—are pseudonyms chosen by the women. Ethics approval was granted in 2013 (#6255) by Flinders University Social and Behavioural Sciences Ethics Committee. Participants were interviewed individually, over the course of about eight months.

Gidget was the first participant who spoke about companion animals. At first,



Figure 1. My Darling (Gidget).

I thought maybe Gidget had run out of things to say, but over and over, women in the project chose to share with me the contributions companion animals had made to their success in remaining free. Gidget was released from prison into an isolating environment, describing here how getting a kitten gave her more than just company.

When I got out of prison I was on my own. I had no real friend support because my only friends and social networks were involved in areas that I weren't allowed to associate with anymore. I was really worried about my mental state being on my own for so long. It took me while to get a cat because I didn't know how I'd handle the responsibility. Then when I got her, she taught me commitment, loyalty and she taught me to love again because I hadn't had that for so long.

I had just spent years in a place where I couldn't even smile at the wrong person, it could come back at me. Now I've got this wonderful animal who is expressing love for nothing, you know, just for a meal. It doesn't matter what I do, she still loves me the next day.

Gidget's narrative shows the post-release impact of surviving prison. In prison, many women learn to desensitise as a coping method because showing emotions can make you a target for other prisoners and correctional officers (Kilroy, 2013, p. 287), putting them at risk of a stint in segregation or being medicated (Pinnuck, 1998). This in-prison survival strategy becomes problematic post-release, making it difficult to create, build and sustain new friendships and connections. Regaining the ability to trust through a companion animal is a relatively safe way of redeveloping sensitivity.

I next met Kate. Although she only wanted a dog (pictured), Kate also adopted a cat because the two were inseparable in the animal shelter where she volunteers. In another image and narrative, Kate explained

how hard it was for her to find paid employment because of her criminal record, despite being a model prisoner and a parolee who never breached her release conditions. Volunteering gave Kate the means to make amends or to "pay back," a theme most participants discussed. Empathic to their plight as being unwanted, institutionalised and being "locked away," Kate spoke about the unconditional love she gets from being with her dog.

I feel so close to my dog because he has come from a shelter. That makes me feel like he has been in an institution too, he was abandoned. It is nice to give him freedom, to live in a nice home. He is very affectionate; he welcomes you every time with a tail wagging and eyes bright. The thing about animals is they are not judgemental; they don't know what you've done. They live in the minute and are very entertaining because of that. I really enjoy taking him for a walk every day, because it is lovely to see him running free and enjoying every moment of it. He gets me out which is really good for me.

For Kate, her dog is her friend and her inspiration to get regular exercise. She revels in seeing him enjoy freedom; Billy embodies what it is to be free.



Figure 2. My best friend Billy (Kate).

Feeney, Georgia and Joy had companion animals before going to prison. Each of them spoke of feeling privileged that their dogs were properly taken care of while they were incarcerated. They were lucky as many people lose their companion animals when they go to prison—as was the case with another participant, Ruby, who submitted a drawing of the two cats she relinquished.

Georgia and Feeney spoke about the difficulty of being separated from their companion animals. Not only did they miss them deeply, but they also recognised the impact that their imprisonment had on them. Their grief at being separated from their companion animals was very real, despite it rarely being recognised or acknowledged (Thomas, 2014). Thinking about the impact of her imprisonment upon her dog, Feeney told me:

I just love my dog to bits; he went through it all with me. Before I went to prison, I was in a really depressed state, not knowing what was going to happen. I withdrew from the world and isolated myself. Costa was just always there for me. I would cry all the time and

he would come and put his head in my lap. He could sense how I was feeling. I don't know what I would have done without him. When I went to prison, I used to wonder what Costa was thinking, perhaps he thought I was dead. I got to come home for a few hours a month before I was released. He was so excited, but then I had to go again. It must have gotten so confusing for him. I mean I could see my partner when he came to visit, but not my dog. I missed him terribly.

For Georgia, having no children meant that her relationship with her dog plays a significant role in the construction of her sense of family and therefore her identity. Georgia acknowledged the importance of being loved “non-judgementally” recognising that many women miss their companion animals terribly while they are in prison. She said:

He's my everything. He just warms your heart and makes you think everything is OK, no judgement whatsoever. Seeing him for the first time after two years, he was just so excited, just as I was. I used to talk to him over the phone from prison. He didn't eat for months after I went away, he just laid by my bedroom door waiting for me.

I'd like to have women who are close to their animals to have an animal day, so they could come in and spend some time every few months, so you've got that bonding time, like they do for kids. I feel that animals are just as important as kids in my life.

As Fook (2014) points out, many women have important and significant relationships with their companion animals, considering them to be family members and friends—rarely does a woman report “owning” a pet (p. 25). The fact that, when a person is taken into custody, little consideration is given to their pets, is an important issue which needs to be addressed.



Figure 3. My dog Costa (Feeney).



Figure 4. My dog (Georgia).

When Joy was released from prison, she was isolated, living by herself in post-release housing. Joy believes that if it wasn't for her dog, and the associated caring responsibilities, she may not have been so successful in staying out of prison. Joy credits her dog with helping her manage her addiction, saying that when she experiences cravings, she puts her dog on a lead and they head out for a walk.

I was really lucky that I had someone to look after my dog while I was in prison, so when I got out, I still had her. Now that am out, I feel like she has got my back, she's looking out for me and protecting me. She is my best mate, especially when I was on Home Detention. I don't know what I would do without her. I had to spend a lot of time on my own and was totally isolated. I was allowed some time to walk her every day. If I didn't have her, I wouldn't have felt like doing anything. Life would have been crap without her. She makes me feel safe and has helped me survive.

This strategy used by Joy to manage triggers and cravings demonstrates an effective use of the behavioural aspect of coping with cravings, known in the alcohol and other drugs sector as the 3Ds—delay, distract and decide (see Australian Government Department of Health, 2003). Without her dog, Joy may not have been so successful in staying out of prison.

My final interview was with Stella. In her community work, Stella volunteers many hours per week supporting women who leave prison. At the time of the interview she had also been volunteering for an animal shelter which aims to rehouse "risky and at risk" dogs. Often, the dogs have been mistreated or have behavioural problems which prevent them from being adopted, placing them at risk of being euthanised. Stella takes these dogs into her home, "transforming" their behaviour, beginning by getting to know each one individually, seeing their strengths and working on their ability to socialise with other dogs and humans. Stella uses



Figure 5. *She's got my back (Joy).*

long distance, early morning running to help maintain her sobriety (for more see Jarldorn, 2019) and spoke of her “big picture dreams,” telling me:

I have my own dogs and I foster and rehabilitate dogs for SA Dog Rescue. I take the dogs with me when I run—you try and stop them from coming! I get the difficult ones that have been dumped, usually because of their behavioural issues. They are full of pent up energy. Running drains that very quickly. I love finding out the nature of each different dog, finding out who they really are without all that pent-up stuff and baggage—when you run 4 hours you get to that point very quickly.

Rehabilitating dogs has taught me so much about myself. It doesn't matter what you were 20 years ago to a dog, what matters is the energy that you are projecting to that dog at that very minute. I would have 50 dogs if I could. One day

I would love to open up a dog rescue centre and hire and teach other women ex-prisoners to rehabilitate dogs, because you can't rehabilitate a dog until you are balanced yourself.

As Stella suggests, a lot can be learned from caring for an animal—equally, a lot can be gained by being cared about by them. Stella devotes a great deal of her time and energy to these dogs in recognition of what dogs have done for her. As she explained, at a time when her physical health was in jeopardy, it was the unconditional love of dogs that helped her to begin to see the beauty in the simple things in life. Stella said:

After I had gotten sick my dogs taught me how to live again. They taught me how to appreciate the grass and the sun, the sky, a bit of mud on the ground, just the simple stuff. I thought I was going to die; I was so sick. My dogs were with me the whole time. Now when I take them out and feel the grass under my feet and feel the sun on my skin, I think, “Wow, I'm alive.” If I can save a dog's life, it means the world to me because they saved my life. I want to make the world a better place.

The idea that the world would be a better place if the relationships between humans and companion animals were respected is supported by Hanrahan (2011, p. 278), who writes:

No matter how many ways the pie is divided, human well-being will not achieve or approximate fullness until it is understood within the context of the quality of human-animal bonds, and linked to the welfare of other animals and to ecological sustainability within nature. No matter how many subject positions a person is understood to inhabit at the intersecting cross-roads of difference and sameness, we compromise our integrity by virtue of discriminating against other-than-human life as long as the human being remains at the conceptual center of the universe.

Discussion

There has been a growing interest in social work research and practice about the relationship between humans and companion animals (see, for example, Fook, 2014; Risley-Curtiss, 2010; Taylor, Fraser, Signal, & Prentice, 2016). Compared to people who do not have pets, people who live with companion animals tend to be more active, have better mental and physical health and usually feel a greater sense of security from having them around (Fitzgerald, 2007). For women who leave prison, and especially for those who have experienced violent and abusive relationships, not trusting others is a safety mechanism, a way to protect themselves from further abuse. Having a bond with a companion animal can facilitate women's ability to trust and love (Fook, 2014). Fook argues that social work researchers must "keep up with the challenge of researching what is important in people's everyday lives" (Fook, 2014, p. 29) and, as Fook and others (Fitzgerald, 2007; Taylor, 2013) argue, the human/companion animal relationship is important to many women.

Before rushing to devise animal-assisted interventions, it is timely to think about some of the challenges associated with intentionally connecting people with animals, especially with respect towards the professional adage of "do no harm." For example, a recent documentary, *Prisoners and Pups* (Almond, 2017), followed a small group of women involved in the Greyhound Adoption Program run inside the Adelaide Women's Prison. While a beautiful film showing the value of people in prison being given the opportunity to "give back," peppered throughout the film are layers of loss and grief as women are separated from the dogs they were assigned through either the dog being adopted or the woman being released.

Having ex-prisoners volunteer in animal shelters as Kate did, or rehabilitate relinquished animals as Stella described,

may be useful in providing ways to build social connections and to forge reciprocal supportive relationships, but this must be considered with a note of caution. Despite the potential for pleasure, reward and connection through volunteering at an animal shelter, it is also an environment that can be emotionally and physically demanding, where workers and volunteers experience high rates of compassion fatigue and burnout (Taylor, 2013). Further, the associated costs of keeping a companion animal are high and owning any pet can prevent entry into the rental housing market—a market already largely inaccessible to former prisoners (Baldry, 2010), effectively excluding a significant number of people from the benefits of sharing their lives with companion animals.

Challenging the cultural assumption of human superiority, relationships between women and their companion animals can be powerful and hold as much, if not more, meaning as their relationships with intimate partners (Risley-Curtiss, 2010). The relationship between humans and companion animals can enhance the quality of people's lives (Bould, Bigby, Bennett, & Howell, 2018) and as Stella and Kate's narratives showed, humans can enhance the lives of companion animals. These reciprocal "caring" relationships are rewarded with an unconditional alliance, which for some former prisoners may be the only positive, reciprocal relationship they have. As Faver (2009) suggests, these relationships can be thought of on a spiritual level:

It is important for social workers to understand the spiritual dimension of humans' relationships with animals for two reasons. First, many people are drawn to animals as sources of spiritual guidance, healing, and companionship. Thus, social workers should be prepared to support clients' spiritual journeys by affirming their spiritual bond with animals. Second, lessons learned through the relationships with animals can facilitate social workers' professional

development as well as their own and their clients' spiritual development. (pp. 364–365)

This research brief has shown the importance that criminalised women place on their relationships with companion animals. This knowledge suggests that time spent by social workers in helping keep these relationships intact is time well spent and may help support criminalised women remaining in the community post-release from prison.

Accepted 22 August 2020

Published 15 December 2020

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Learning with dogs: Human–animal bonds and understandings of relationships and reflexivity in practitioner-research

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ABSTRACT

INTRODUCTION: This article highlights the importance of ethnographic observations of human–animal bonds (HAB) to inform social work practice and applied social research. It explores the relationship between the author and Bruno, a rescue dog, through conventional ideas on attachment theory, connectedness and containment.

METHODS: These perspectives are applied to the author’s experiences of undertaking a PhD on the protective factors that promote LGBTI+ youth wellbeing. This emphasises reflexivity as an integral component of practitioner research, with the potential to explore the complexities and subjectivities of our emotional lives.

FINDINGS: Through recognition of the dynamics of attachment, our roles as companion-carers prompt help-seeking to ensure reflective practice and effective caregiving. Our relationships with companion-animals resonate with the process of undertaking a PhD, through prioritising self-care and seeking work–life balance. These ideas are also relevant for collaborative studies underpinned by an iterative research process, described by a Consulting, Conducting, Collaborating and Checking cycle.

CONCLUSION: The article concludes with an appeal to social work practitioners and practitioner-researchers to discover ways in which concepts of HAB, and our interconnectedness with all living beings, can be applied to policy, practice and research with those whom we work with, their families and within our broader communities.

KEYWORDS: Human–animal bonds; reflexivity; subjectivity; ethnographic observation; LGBTI+ youth

“A dog can never tell you what she knows from the smells of the world, but you know, watching her, that you know almost nothing.”
(Mary Oliver, **Dog Songs**)

Introduction

Bruno came into my life two months into my PhD, a mixed-methods, participatory

study on the protective factors that promote LGBTI+ youth wellbeing. Core to the project is the intention to engage in research that promotes “learning *with*” LGBTI+ communities (Baker & Beagan, 2014). This account explains the development of a human–animal bond with Bruno, a rescue dog. This has enabled me to hypothesise how my PhD studies, and my relationship with

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Bruno, can help develop understandings of practitioner and researcher subjectivity, enhance the use of self within relationships and recognise our interconnection with all living beings (Hanrahan, 2011; Siegel, 2020).

Meeting Bruno

Bruno, a terrier cross, arrived at Dog's Trust, aged 8+, after his carer died, losing everything familiar: his companion, home, routine, neighbourhood – raising the issue of grieving (Hayes, 2017). It further transpired he had untreated pain with spondylosis, a degenerative disease of the disks, and advanced arthritis. Once his pain was managed, the Dog's Trust attempted to rehome Bruno for 3½ years; he featured in their "Underdogs" campaign, with a television advertisement and book chapter (Hayes, 2017). With no knowledge of his background, on my first visit I looked deeply into Bruno's eyes and immediately felt connected. The suggestion that holding a dog's gaze prompts the release of oxytocin may explain this (Horowitz, 2010). So began the visits with an anxious Bruno pacing the perimeter of the room, only seeking contact for treats. On the 16th visit he finally sat down, licking his paws, a form of self-soothing, coming closer for a pat. Four home visits later, Bruno came on an overnight, and stayed, becoming an integral part of family and home life. The next sections suggest a range of theories which might explain these experiences.

Human-animal bonds and attachment theory

My experiences with Bruno prompted further exploration of the phenomenon of human-animal bonds (HAB) and their mutual benefits (Walsh, 2009). While there is no consensus on a definition, Russov (2002) highlighted that such bonds: 1. involve a relationship between a human and non-human animal; 2. are reciprocal; and 3. promote increased wellbeing for both (Walsh, 2009). Three primary theoretical frameworks have been used to develop

these ideas: biophilia; social mediation; and attachment theory (Phillips & Hazleby, 2018). Such ideas are not all new, for example, Bowlby's ground-breaking work on attachment was influenced by animal observations. He noted that, when frightened, some animals, including humans, seek protection from an adult (Sroufe & Siegel, 2011). While broader notions of wellbeing are more demonstrable in terms of human need, companion animals can be important attachment figures (Walsh, 2009).

Drawing on my prior experiential learning on the *Theory of Attachment Based Exploratory Interest Sharing* (Heard, Lake, & McClusky, 2012), my relationship with Bruno aligns with ideas from the animal welfare field. Such approaches critically analyse anthropocentric assumptions of ownership and humans as masters over 'their' animals (Walsh, 2009). Rather, a more balanced view is forwarded where humans and animals are regarded as companions (Hanrahan, 2011). My observation of Bruno's experience and development of our HAB through connection, a sense of compassion and containment are now discussed.

Connection and compassion

It has been suggested that human beings are "hardwired" for connection and the essential nature of relationships (Brown, 2015). The human predisposition to seek and give care extends to canines and other animals. Patterns of attachment can be observed through HAB, with social interactions particularly important to dogs (Topál, et al., 2005). The Dog's Trust had recommended a hands-off approach with Bruno (Hayes, 2017, p. 228), however, he quickly sought closeness and affection through tippy-tappy paws, wagging tail, brushes, pats and belly rubs. While this provided a sense of mutual contentment, it made it difficult to realise when Bruno was triggered, presumably from past experiences. I can only speculate that triggers were associated with the time when his carer died, leaving Bruno alone. From an attachment perspective, his apparent separation

anxiety was understandable (Hayes, 2017). I observed Bruno's fear of abandonment where he tended to lie in the hall, across the doorway, apparently to prevent anyone leaving. One way of addressing this was the use of cues, for example, by offering a high-value treat when leaving to create a sense of expectation, reinforcing his expertise. Bruno now anticipates my return, with reunions joyous and reassuring, tail wagging madly, as he investigates the smells of the world on my shoes (Horowitz, 2010). The careseeking-caregiving attachment dynamic is goal-corrected; when the need for effective care is met, the needs of both careseeker and caregiver are assuaged (Heard et al., 2012; Siegel & Bryson, 2020).

Walks with Bruno are all about sniffing as he explores his social world through his nose. Sniff-walks offer the potential to lower his pulse and have a calming effect (Horowitz, 2010). There were, however, reminders of the past that needed to be responded to compassionately. The vet confirmed that Bruno had experienced multiple painful, untreated ear infections, irreparably damaging his hearing, possibly explaining his tendency to remain on alert. Bruno had to decipher the meaning of coats and shoes: walk, with me? or leaving, without me? The Dog's Trust behavioural trainer provided support in providing clear visual cues, reinforcing his expertise.

Brown suggests "vulnerability is our greatest measure of courage" (2015, p. 3). "Learning *with*" Bruno necessitates a deep engagement with my own subjectivity, vulnerability and humanity. He has taught me that our vulnerabilities aren't limitations, can be strengths and provide creative possibilities. Sniff-walk adventures are unaffected by sirens, thunder or fireworks. A downpour is an opportunity for a blow-dry, without the high-pitched sound of the hairdryer.

Containment

Kvale and Brinkmann highlight the original Latin meaning of *conversation* as "wandering

together with"—a journey with locals in their cultural setting where they share insights into their lived experience (2009, p. 48). It is suggested that companion animals understand and communicate through behaviour, providing insights into their inner world (Horowitz, 2010; Walsh, 2009). The Dog's Trust explained Bruno's history of biting, possibly linked to issues of pain. I had also observed Bruno's reaction to sticks, startling at a sweeping brush, walking stick or flag pole. It appeared he had learned not to growl; removing his valuable self-defense system (Horowitz, 2010). It may be that Bruno expressed fear or pain through snapping, snarling or biting, particularly when triggered by objects.

Levine suggests that "trauma is not what happens to us, but what we hold inside in the absence of an empathetic witness" (2010, p. iv). Through observation and reflection with the behavioural trainer, I began "learning *with*" Bruno about attunement, mentalisation and how containment is an important mechanism in responding to trauma. On one occasion I tried to smooth the crumpled sheepskin beneath him, causing Bruno to snap. While I coaxed him back to bed, trying to soothe him, it was too soon. There was terror in his eyes, mirrored in mine, yet, to my surprise, and despite my nervousness, Bruno sought my proximity. On reflection, by acknowledging and containing my feelings, this supported Bruno to seek physical closeness and be soothed. All relationships experience ruptures; containment can facilitate repair (Levine, 2010).

Bruno, me and my PhD study

Ethnographic approaches, with their focus on observation of natural phenomena, are mainstream in applied social research (Brewer, 2000; Briggs, 2017; Cooper, 2017). However, Brewer (2000) cautions against the temptation to assume that observation somehow represents an objective reality. Rather, observation encourages awareness of subjective feelings and the ability to mentalise (Cooper, 2017), which may

provoke powerful feelings and uncertainty (Briggs, 2017). In some ways this reflects my developing ideas and thinking around research and my PhD study; observations of HAB offer the potential to develop and deepen our understandings of our positionality.

Recognition of my subjectivity is integral to collaborative research with LGBTI+ youth. “Learning *with*” Bruno has strengthened my approach to conducting my study. Undertaking a PhD can be stressful; potentially undermining one’s self-belief. My experience with Bruno offers mutual, reciprocal enrichment through our HAB. As such, by ensuring that he feels safe, seen and soothed (fundamental to secure attachment) our needs are assuaged (Horowitz, 2010; Siegel & Bryson, 2020). Our companion-carer relationship is regularly discussed in PhD supervision, particularly in understanding self-care and creating work–life balance. Clinical social work supervision is underpinned by reflective practice on the careseeking–caregiving dynamic (Heard et al., 2012). My role as Bruno’s carer-companion and as a novice-researcher, requires prioritisation of my own help-seeking. In attempting to meet Bruno’s needs, my self-efficacy has been enhanced, reinforcing a sense of my own competence.

Maxwell’s (2009) suggestion of memo writing is helpful as part of the process of reflexivity. This provides a template for a written record providing a brief description, analysis, and learning. Maintaining a reflexive journal and “learning *with*” Bruno has provided a parallel process informing my PhD and critical thinking on participation. It is only possible to connect with Bruno through an openness to my lack of expertise and recognition of his. This is mirrored in the PhD process with LGBTI+ youth conceptualised in Figure 1, below, as an iterative four-stage research cycle.

This cycle anticipates that LGBTI+ youth, when asked, will have many opinions on matters that affect them and have the ability to participate with interest, providing valuable insights (Ceatha, Bustillo, Tully, James, & Crowley, 2020). The design assumes that the views and identity of the researcher will impact on the study, even in the process of promoting participation. However, “learning *with*” LGBTI+ youth highlights the potential contribution of ethnographic approaches in problematising binary emic and etic divides.

“Learning *with*” LGBTI+ youth

Levine (2010) highlights that all of those exposed to trauma are equally involved in

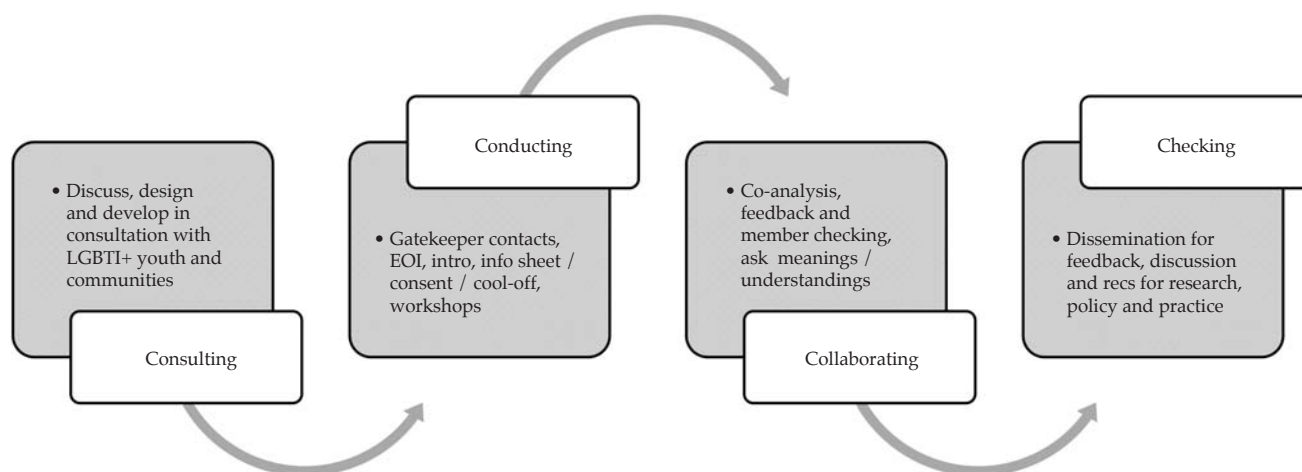


Figure 1. Promoting LGBTI+ youth involvement in research processes.

their own wellbeing, emphasising the ways in which trauma and healing are experienced collectively. While I know some of Bruno's history, such narratives can be both limited and limiting (Siegel, 2020). This has a parallel with my PhD study which seeks to problematise deficit-focused narratives, representing LGBTI+ communities solely in relation to vulnerability (Ceatha, 2016).

LaSala (2003) suggests that ethnographic methodologies are particularly beneficial in researching LGBTI+ communities, generating emic insights of cultural insiders' self-understandings, alongside etic research perspectives. The emic approach favours the research participants' words, views and experience—giving weight to insider perspectives from the bottom up. In contrast, the etic approach uses theories, concepts and ideas as a starting point—providing an outsider perspective from the top down. Through my PhD study, I am seeking to problematise the binary nature of emic and etic divisions. Rather, I wish to privilege LGBTI+ youth knowledge and knowing, underpinned by a fundamental belief in their emic and etic expertise by experience (Ceatha et al., 2020). Consistent with transformative mixed-methods paradigms, these approaches are motivated by child-centred and rights-based beliefs (Mertens & Ginsberg, 2008).

Baker and Beagan (2014) suggested that promoting participation demands culturally competent practice underpinned by values of social justice, equity and valuing diversity. While cultural competence is contested, they underscore the importance of "learning *with*" LGBTI+ communities. As a cultural insider, fully immersed within LGBTI+ communities, acknowledging my subjectivity is integral to this process, including my insider status (La Sala, 2003). This requires ongoing evaluation of the beliefs and assumptions underpinning the study and actively seeking feedback in order to continuously interrogate my frame of reference (Cooper, 2017; Maxwell, 2009). Seeking input from within LGBTI+ communities brings a reflexive approach to my own positionality; integral to researcher

accountability. This recognises the social and cultural capital embedded within LGBTI+ networks (Ceatha, Mayock, Campbell, Noone, & Browne, 2019). It is of particular importance in light of suggestions that social workers may struggle to engage around sexuality, limiting their engagement in reflexively informed practice (Schaub, Willis, & Dunk-West, 2017).

Implications for research, policy and practice

This paper has argued for need to problematise binary anthropocentric constructs which reinscribe the human–animal divide. By attending to our relations with all living beings and "learning *with*" companion animals, we can become better social workers, practitioner-researchers and human beings. A core aspect of this process of betterment is reflexivity about both research processes and our participants, vis-à-vis our positionality. Ethnographic observation can evoke powerful responses, including uncertainty (Briggs, 2017). This also applies to observation of HAB, requiring social work engagement in reflective practice and attunement, mentalisation and attending to our subjective feelings. The offer of care activates our own attachment dynamics as caregivers, prompting help-seeking (Heard et al., 2012). This parallel process provides insight through experiential learning of connection, compassion and containment alongside rupture and repair (Levine, 2010; Siegel & Bryson, 2020).

These principles can be translated to social work research, underscoring reflective practice and reflexive processes as a way of exploring the complexities of our emotional lives and their impact on thinking and research. It suggests that embracing imperfection, predicated on compassion for self and other, may enhance understandings of vulnerability (Brown, 2015). Relational responses to trauma and healing require strengths-based engagement (Levine, 2010). Shifts towards "learning *with*" LGBTI+ youth highlight holistic approaches which re-centre

the collective cultural context as integral to wellbeing (Ceatha et al., 2019). It is the use of self within our role and relationships Through HAB that acknowledges our shared experience; a recognition of the self in the other and the interconnectedness of all living beings (Siegel, 2020; Hanrahan, 2011). Theories of interpersonal neurobiology within a framework for cultivating integration provide future directions which incorporate biophilia, premised on recognition of all living beings; social mediation theory, emphasising the sense of connectedness and purpose; alongside attachment theories (Siegel, 2020). It is important, therefore, that social workers and practitioner-researchers engage in observations of HAB with the potential to problematise power relations, foster anti-oppressive practice and, through the use of self, challenge inequity and injustice (Hanrahan, 2011).

Acknowledgements

Many thanks to my clinical social work supervisor, Deirdre Foran, Director, Group Analytic Practice for creating a reflective space and experiential learning through connection, compassion and containment.

Thanks to Prof. Jim Campbell, Head of School of Social Policy, Social Work and Social Justice and Prof. Kath Brown, School of Geography PhD supervisors with University College Dublin (UCD) for welcoming my inclusion of Bruno as integral to PhD supervision. Thanks also to Jim for the review, feedback and suggestions which greatly improved this manuscript.

Thank you to Dog's Trust, Ireland. Particular thanks to Sabrina Phelan, Senior Training and Behaviour Advisor.

This article is dedicated to Bruno, who taught me about courage, being big-hearted and the risks worth taking.

Grant information: This work was conducted as part of the SPHeRE Programme under Grant No. SPHeRE/2013/1.

Accepted 10 September 2020

Published 15 December 2020

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Animal Assisted Intervention at The Nelson ARK: A social work placement reflection

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ABSTRACT

The involvement of animals in aspects of social work assessments and interventions has been touted as a positive development. Yet, little attention has been given to the potential for animal involvement in social work education and training. This practice reflection describes social work student placements at The Nelson ARK, where Animal Assisted Intervention (AAI) is employed in programmes for youth. Social work placement coordinator, Letitia, and The Nelson ARK manager, Karen, provide the background to this initiative, while students, Tessa and Brooke, share a snapshot of their placement experiences that highlight a fresh appreciation of human–animal relations. From our collective experiences, the authors propose that field education in services that provide AAI affords novel and valuable learning for social work students.

KEYWORDS: Animal Assisted Intervention; animal–human relations; social work; social work student education; social work placement

Letitia: As I write about the recent inclusion of animals as part of the social work student placement experience Tiger, a young black cat that I adopted from the SPCA, sits precariously between me and my computer keyboard. My main role for the Bachelor of Social Work Programme (BSW) at Nelson Marlborough Institute of Technology (NMIT) involves organising and overseeing social work student placements. In a small catchment area like the Nelson Tasman region, the quest to secure the needed quantity and quality of placements can be challenging. Rather than restricting opportunities for learning, this scarcity has given rise to less conventional and more innovative social work placement opportunities, such as those at The Nelson ARK. From this experience, we contend that there is valuable learning for field education in services offering Animal Assisted Intervention (AAI).

Over the past two years, NMIT social work students Tessa and Brooke completed their social work placements at The Nelson ARK. Before they share insights from this experience, Karen, the manager of The Nelson ARK and on-site fieldwork educator for the social work students, provides a context for the student learning experiences by describing the setting and this placement environment.

The Nelson ARK

Karen: The Nelson ARK is located at Stonehurst Farm, outside of Nelson, Aotearoa New Zealand and offers AAI group work and programmes. The Nelson ARK culture, founded on the Youth Development Strategy Aotearoa (Ministry of Youth Development, 2004) and Ara Taiohi (2020) Code of Ethics, is strengths-based with the premise that all those

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involved (young people, staff, trained volunteers and the dogs) bring skills with them. The key message of our work is compassion in action and by sharing the rescue dogs' story, a young person is able to relate the dog's experiences to their own. The value and impact of sharing the dogs' stories for young people feature in the learnings that Tessa and Brooke will share below.

The APART (Animals People and Rehabilitative Training) programme combines dog training with Healing Species, in which empathy is the primary focus. Each young person is matched with a rescue dog that, over eight weeks, they train under staff supervision. Like the young people who attend The Nelson ARK programmes, the welfare of the rescue dogs is paramount and they are assessed for suitability prior to the course by The Nelson ARK dog trainer and a representative from the Dog Advisory Welfare Group.

The young people who attend the programme have often experienced multiple challenges in their life, and dog training teaches the value of patience, discipline and hard work as well as providing the opportunity to learn co-operative and considerate ways of problem solving. Non Violent Communication (NVC) and emotional intelligence training are included in "chalk and talk sessions". The programme culminates in a demonstration of student and canine learning at a community graduation, after which the dog is put up for adoption. The students assist in building a profile to best find a forever home for their canine partner.

Follow-up sessions held over the subsequent 12 months aim to further develop a young person's sense of identity, resilience and connection. Furthermore, The Nelson ARK-Action and Social Group offer graduates of the APART programme a way to remain connected where they can contribute to aspects of service provision.

The social work programme context

The inclusion of animals as part of the social work curricula is an exception rather than a standard component of the student learning experience (Adamson & Darroch, 2016). Bretzlaff-Holstein (2018) indicates that attention to animals in social work practice and education is limited and has largely focused on the social and therapeutic benefits of the human–animal bond/partnerships (Risley-Curtiss, 2010), the relationship between animal cruelty and family violence (Adamson & Darroch, 2016; Walker, Aimers, & Perry, 2015), how animals feature in the context of disasters (see Adamson & Darroch, 2016) and attention to grief and loss (see Arkow, 2020). Chalmers, Dell, Dixon, Dowling, and Hanrahan (2020) argue that, while attention to human–animal relations is gaining traction for social work educators, researchers and practitioners, there is not yet the education and training in place to support this growing area of interest. Moreover, Hanrahan (2013) found that, while social workers have an awareness of the value of human–animal relations, either this is largely ignored in practice or practitioners are including animals in their practice but without specific training to do so. Arkow (2020) contends that including relevant material into coursework and field placements can open up research, education and practice opportunities and enrich personal and professional development. This will enable social workers to respond more effectively to human clients, the wider community and to the non-human members of these collectives (Arkow, 2020).

Like many other tertiary degrees, the NMIT BSW programme does not offer a course or specific lectures dedicated to equipping social work students to work with animals as part of their practicum or subsequent social work practice. Currently, at NMIT, attention to animals is incorporated into existing social work courses, which include topics such as the connection between animal cruelty and family violence; the impact of the loss of a companion animal; as well as

attention to animal–human partnerships and AAI through occasional guest speaker presentations by Karen, from The Nelson ARK and Koru, her huntaway cross.

Building on this nascent attention to animals and social work, Tessa and Brooke offer a snapshot of key learnings from their placements at The Nelson ARK. These include an appreciation of human–animal relations; the value of animals in violence education and a consideration of the contributions of the dogs as co-workers.

Social work student placement experiences

Similar to the student reflections that Adamson and Darroch (2016) include in their account of embedding animal-inclusive teaching in the social work curricula, the placement experience at The Nelson ARK allowed Tessa and Brooke to develop a new appreciation of human–animal relations:

Tessa: I've lived on a farm all my life and my background with animals sparked my interest in a placement with The Nelson ARK. But, before going to The ARK, I had no comprehension of just how greatly animals can help an individual get through a tough time in their life. From the very beginning of the programme, the young person is introduced to the rescue dog and is told the dog's background story and the challenges it has faced, physically and emotionally, in its life ... they feel like they can relate to the rescue dog and they share similar situations, which makes them want to come to the programme each week so they can see and be there for their dog. This makes them feel like they have a responsibility to help the dog, which in turn is helping themselves.

Tessa's account above is reminiscent of Evans and Gray (2012) who suggest that "an animal's experience or life stressor can be used as a form of normalising for a child or young person" (p. 605). Tessa explains

further that the forming of attachments and bonds between young people and animals happens quickly, but that students also need to learn about saying goodbye and letting go of this relationship:

This is a big thing for the young people – the young person and the dog come on this programme together, work together, both graduate and then they leave the programme and each other. They [the young people] can relate this to their own life and how relationships can come and go, but you can still remember and learn from these relationships and what they've taught you.

The appreciation of human–animal relations was also part of Brooke's learning, like Evans and Gray (2012), she found that client participation in the guided training of rescue dogs and the emphasis on NVC supported them to adapt and develop their social skills.

Brooke: Being on placement at The ARK was such a contrasting placement setting from my peers. A key learning experience was the value of animals in violence education. I encountered students who had experienced family harm. When these students were paired with a rescue animal, some of whom had similar experiences, to train and care for, these students learned communication skills based on positivity and encouragement. They could apply this to aspects of their lives where they may have been using violence and anger. I've learnt to really observe what's going on and I've taken that strengths-based approach to my practice.

One of the arguments in the literature (related to animal rights and welfare) is about the need to appreciate and acknowledge the reciprocity, skill and work that animals contribute to service provision alongside their human colleagues (Evans & Gray, 2012; Walker et al., 2015; Walker & Tumilty, 2019). Tessa draws attention to this as she reflects on the role of the dogs in the APART programme:

A significant learning experience from co-working with animals was that young people on the programme talk to their dogs about their situation and problems when they do not want to talk to anyone else. And, they were more willing to talk to you about their situation if their dog was next to them. The dogs always suspended judgment and based their relationships on how the young people treated them. They also provided the comfort of physical touch, an aspect that a social worker cannot provide.

The learning opportunity of co-working with animals provided Tessa with new knowledge, experiences, and different personal and professional perspectives. By being present and suspending judgement themselves, these students were open to learning opportunities that extended beyond facilitating AAIs. Reflecting on her own learning during the placement, Brooke adds:

The ARK animals have the ability to create a sense of calm. This seemed to aid student comfort, which was the catalyst for engagement.

Both Tessa and Brooke came to their placements at The Nelson ARK with an awareness of animal–human relations. However, it is through their placements that the significant role of animals in social service delivery became apparent.

This section concludes with some practical matters relevant to the coordination of the placements at The Nelson ARK. First, students received input from a registered social worker via external supervision—an embedded feature of the NMIT social work programme for all students on placement. Second, given the operational hours of The Nelson ARK are part-time, placements were necessarily comprised of practice-based and related project work. Finally, there was limited scaffolding of specific theory and practice knowledge to prepare students for a placement such as this. It is this final challenge that is less readily remedied when

pre-placement attention to human–animal relations remains relatively underdeveloped in the social work curriculum.

Discussion

Literature about animals and social work emphasises the need to adopt a more inclusive stance that embraces the contributions made by non-human animals to social work practice and the lives of our clients (Adamson & Darroch, 2016; Ryan, 2011; Walker et al., 2015). Walker and Tumilty (2019) argued that social service delivery is almost exclusively human-focused and considers humans as separate and distinct from non-human animals. Yet, this constructed divide does not adequately represent the importance of animals in the lives of people—nor does it acknowledge the contributions that animals make to our lives and our professional practices (Walker & Tumilty, 2019).

As Tessa and Brooke have shared, the inclusion of animals into the social work placement experience afforded an innovative opportunity for students to broaden their skills and knowledge of interspecies partnerships. However, a specific theoretical framework through which students might understand, and approach their practice experiences at The Nelson ARK was not predetermined. Walker et al. (2015) argue that there is a need to develop new social work theories that give consideration to animals as family members, companions and co-workers. Links to theory are signposted in relation to a strengths-based approach, NVC and, as Adamson and Darroch (2016) have discussed, a version of attachment theory. Other literature emphasises the presence of animals in the ecologies of the individuals and families who social workers work alongside (Adamson & Darroch, 2016; Arkow, 2020; Evans & Gray, 2012; Risley-Curtiss, 2010; Walker et al., 2015). Moreover, given that attention to recognising the sentience and protection of animals presents as part of the updated Aotearoa

New Zealand Association of Social Workers (ANZASW) *Code of Ethics* (2019), we may also be moved to acknowledge more fully the contributions of animals to social work practicum and their capacity to shape and strengthen social work practice.

Conclusion

Student placement at The Nelson ARK has provided both students and staff at NMIT with an innovative experience and a deeper appreciation of animals and how they can contribute to social work practice. This is a fertile starting point in the development of more intentional and critical animal-inclusive practices as part of the social work student pathway. Further research into placements involving animal-assisted interventions would be valuable and of interest to field education coordinators, field educators and researchers.

Acknowledgment

We wish to acknowledge that since the writing of this reflective piece, and due to covid-19 impact on funding, that The Nelson ARK has closed its doors after 12 years of service to the Nelson Tasman Region. Thank you Karen and The Nelson ARK team for your achievements and your valuable contributions to our community.

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“It’s about the most needy children”: A Foucauldian analysis of school social workers’ responses to need in post-earthquake Canterbury

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ABSTRACT

INTRODUCTION: After the 2011 Canterbury earthquake, the provision of school social work was extended into a larger number of schools in the greater Christchurch region to support discussions of their practice priorities and responses in post-earthquake schools.

FINDINGS: Two main interpretations of need are reflected in the school social workers’ accounts of their work with children and families. Firstly, hardship-focused need, which represented children as adversely influenced by their home circumstances; the interventions were primarily with parents. These families were mainly from schools in low socioeconomic areas. Secondly, anxiety-based need, a newer practice response, which emphasised children who were considered particularly susceptible to the impacts of the disaster event. This article considers how these practitioners conceptualised and responded to the needs of the children and their families in this context.

METHOD: A qualitative study examining recovery policy and school social work practice following the earthquakes including 12 semi-structured interviews with school social workers. This article provides a Foucauldian analysis of the social worker participants’ perspectives on emotional and psychological issues for children, particularly those from middle-class families; the main interventions were direct therapeutic work with children themselves. Embedded within these practice accounts are moments in which the social workers contested the predominant, individualising conceptualisations of need to enable more open-ended, negotiable, interconnected relationships in post-earthquake schools.

IMPLICATIONS: In the aftermath of disasters, school social workers can reflect on their preferred practice responses and institutional influences in schools to offer children and families opportunities to reject the prevalent norms of risk and vulnerability.

KEYWORDS: School social work; vulnerability; disaster recovery; Foucault; discourse analysis

Following the 2011 Canterbury earthquake, the New Zealand Red Cross (NZRC), a non-government organisation, drew on monies from donations to fund six social workers to work in earthquake-affected schools with

students and their families “considered high need, high risk and high priority” (New Zealand Red Cross, 2014, p. 14). This initiative opened new practice territory for school social work. Although there had been

AOTEAROA
NEW ZEALAND SOCIAL
WORK 32(4), 89–102.

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a government-funded Social Workers in Schools (SWiS) programme in place since 1995, these practitioners had been allocated to work with children and families in schools situated in low socioeconomic areas (Ministry of Social Development (MSD), 2015) with Māori and Pasifika families identified as a priority focus (Belgrave et al., 2002; Selby, English, & Bell, 2011). In contrast, the Red Cross Social Workers (RCSW) were allocated to a range of schools in the greater Christchurch region, including those in higher socioeconomic areas that did not have SWiS involvement. Given this unique practice context, it is worthwhile examining the prevalent practice responses that both SWiS and RCSW provided to address the diverse needs of earthquake-affected children and their families.

This article applies a critical approach informed by Foucault's theorising and methodological toolbox to school social work practice in post-earthquake Christchurch. Of particular interest is the over-arching concern for children as susceptible to not being able to cope with the effects of the earthquakes. These kinds of representations of vulnerability are prevalent in the disaster recovery field and are associated with a range of efforts to protect children which, at the same time, reinforces passive positions, excluding children from decisions that impact on their lives (Mutch & Gawith, 2014). Whilst the desire to safeguard children from trauma is understandable, objective, taken-for-granted constructions which present need as identifiable and measurable, can encourage social workers to take top-down, problem-solving approaches instead of focusing on subjective experiences or structural causes of the problems (Ife, 2009). Foucault's (1978, 2003a, 2003b) theorising assists in understanding that claims about human need are not objective truths; they are outcomes of contingent historical forces. He emphasises that even the most well-intentioned theories of personhood interface with narrowly defined parameters of normality, promoting specific forms of conduct. This article engages with the

complexities of school social work in post-disaster Christchurch, noting how older and newer forms of social differentiation were deployed as normative criteria for recognising and targeting need in this space.

The first part of this article discusses the current research literature on school social work. There is little existing literature specifically on school social work in the aftermath of a disaster so the focus is on general school social work practice in Aotearoa New Zealand and internationally. Some practice tendencies and tensions for practitioners working within the school system are noted. Next, Foucault's concepts of the norm, normalisation and the role of the expert within institutional settings are outlined. These concepts assist to analyse school social workers' alignment with eco-systems, developmental theories and knowledge of trauma, which support representations of children as in need of protection. Finally, in recognition that close analysis of normative knowledge and effects can enable new, innovative modes of thought and practice to emerge (Taylor, 2009), an account of school social workers' counter-conduct in their work with children and families in post-earthquake schools is provided.

Literature review

In reviewing the local and international literature on school social work, it is important to note the arrangements of both the SWiS and RCSW programmes have practitioners employed by social services rather than schools. Schools are mainly sites for school social workers to access and intervene with 'at risk' families (MSD, 2015). Whereas in the United States, where the majority of the research literature originates, school social workers are employees of the schools in which they are based. Therefore some dimensions of school social work in Aotearoa are unique (Beddoe, De Haan, & Joy, 2018; Selby et al., 2011), although the practice frameworks from both Aotearoa and the United States share a

similar commitment to ecosystems-focused interventions to address children's holistic needs.

The systems perspective features as a framework for school social work (Beddoe et al., 2018; Berzin et al., 2011). Practitioners are encouraged to assist students to adapt to the school environment and mediate the school processes to fit with the needs of students, which involves intervening at multiple levels. This practice model reflects Bronfenbrenner's (1979, as cited by Krishnan, 2010) ecological theory that delineates child development, not as an individualistic process, but one that occurs within family and other significant social relationships. These relationships are conceived as reciprocal in that, not only do the conditions of the environment influence the child, but the child influences their environment (Krishnan, 2010). The ecosystems' perspective has also been coupled with strengths, empowerment and resiliency theories (Early & Vonk, 2001; Leyba, 2010) with an emphasis on assisting children and families to utilise personal, cultural and contextual strengths and resources to overcome problems (Belgrave et al., 2002; Selby et al., 2011).

Both the local and international literature includes a focus on working with parents to support them to address their children's needs (Belgrave et al., 2002; McManama-O'Brien et al., 2011). However, in terms of actual practice, this is more prominent in Aotearoa with practitioners guiding parents to establish positive routines for their children, utilise non-violent disciplinary strategies, and manage their finances and living situations (Beddoe et al., 2018; Belgrave et al., 2002; Jiang, Maloney, Staneva, Wilson, & Vaithianathan, 2017). In contrast, despite its holistic framework, school social work in the United States is lamented for its over-use of individualistic interventions such as counselling and, to a lesser extent, group work with students (Kelly et al., 2010; Phillipppo & Stone, 2011). Likewise in Australia, school social workers

spend a lot of their time on counselling-type interventions with students (Lee, 2012). Nonetheless, despite the differences, school social work has a common focus on individual behaviour, either in relation to parents' responses to their children or therapeutic work with children.

Strong emphasis is placed on the school social worker working collaboratively with teachers (Beddoe, 2019; Berzin et al., 2011). School social workers consult and communicate with teachers mainly over home-school information (Berzin et al., 2011; Lee, 2012). Professional interactions with teachers are more likely to be limited to supporting the social worker's clinical work. Social workers are less involved in student-teacher sessions, school-wide collaboration or the provision of teacher training (Kelly et al., 2010; Lee, 2012), alluding to challenges for school-based social workers in influencing the school system and culture (Beddoe et al., 2018).

The peripheral positions of social workers within schools can constrain practice (Bronstein & Abramson, 2003; Corbin, 2005). In the Aotearoa context, this factor might be more challenging given they are not employees of schools and often in sole positions (Beddoe et al., 2018; Belgrave et al., 2002). Social workers are often isolated professionally, without direct support and modelling from other social workers and might have difficulties in conceptualising more systemic work (Corbin, 2005). Teachers are more numerous in schools and their perspectives, which tend towards cognitive understandings of student difficulties, are more prevalent (Belgrave et al., 2002; Bronstein & Abramson, 2003). Teachers can perceive the student as the source of difficulty, which conflicts with the aims and values of school social workers. School staff expect social workers to undertake caseworker roles rather than policy work or whole school interventions (Berzin et al., 2011; Lee, 2012). School social workers often need to defend their role and expertise in schools with other professionals

who do not always understand or value their input (Beddoe, 2019; Belgrave et al., 2002; Corbin, 2005).

This review of the literature highlights the role of school social workers in seeking to address the systems that influence children. School social workers are themselves embedded in the school system, which are not neutral sites. Schools are socio-political contexts, which are constituted by educational norms, professional power relations and institutional processes. As I discuss in the next section, Foucault's theorising on the norm, normalisation and the roles of experts is instructive in examining how these knowledge–power relations shaped the understanding of children's needs and the positions of school social workers as they sought to justify their expertise in post-earthquake schools.

Foucault on the norm, normalisation and the role of the expert

In this article, the focus is on the specific understandings of need that the school social workers employed to undertake their assessments of children's circumstances in post-earthquake schools in Canterbury. These representations of need are normative; they operate as a measure of what is a standard or a normal condition. Normative knowledge is essential in "ordering multiple elements, linking the whole with its parts, placing them in relationship with one another" (Ewald, 1992, p. 171). However, Foucault (2003a) warned that, within modernity, the norm becomes prescriptive and is often utilised by authorities to promote specific forms of conduct. In modern institutions such as schools, normalisation ensures subjects (persons) conduct themselves in accordance with an ideal or optimal model. Although, as Foucault emphasised, normalisation is a productive process that functions through "raising value, intensifying rather than constraining, forbidding, stopping" (Ewald, 1992, p. 171). Normalisation includes individuals,

groups and populations within the realms of normality through positive techniques of education, intervention and transformation, highlighting the embedded nature of social work interventions, including those premised as caring and therapeutic, within modern power relations (Tudor, 2020). Nonetheless, despite its affirmative connotations, normalisation is counter to positive freedom, a self-formation process through which subjects have the capacity to transform themselves in accordance with their own interests, motivations and objectives (Foucault, 1978). Subjects become very proficient at carrying out a narrowly prescribed set of practices (Taylor, 2009). Normalisation alerts to the governing effects of school social workers' predominant practice responses after the earthquakes and the influence on children's (and their parents') conduct.

Foucault's concept of normalisation is also useful in examining notions of expertise for social workers and their attempts to secure credibility and influence in schools. Foucault (as cited by Chambon, 1999) noted that the emergence of health experts in hospitals in the 19th century was inextricably connected to the advent of new systems for classifying diseases and interventions for treating "the ill" (pp. 67–68). He considered these expert positions to have proliferated throughout society as the "judges of normality," including the "social-worker-judge," commenting that "it is on them that the universal reign of the normative is based" (Foucault, 1975, p. 304). The normalising practices which enable individuals to improve and enhance themselves in specific and accepted ways are enacted by the experts and notions of expertise (Rose, 1996).

However, these governing practices are not fixed or totalising. Foucault (2003b) emphasised that, within the processes of normalisation, there is constant struggle against subjection, emphasising the ability of subjects to refuse the normative vision of selfhood that human science theories

and power relations prescribe. The aim of his critical approach is to enable subjects to evaluate the value of privileged normative knowledge relative to other perspectives, so they may appreciate the understanding they are captivated by is just one among many (Owen, 2002, p. 219). Resistance is positive freedom, the processes of self-formation through which subjects act upon themselves. Thus, this article also attends to the ways in which school social workers configured alternate practices not wholly anticipated within the child vulnerability lens taken up in post-earthquake schools.

Method

A qualitative study was conducted on the recovery policy and practices in post-earthquake Christchurch, Aotearoa, utilising policy documents and 12 semi-structured interviews with school-based social workers. These participants had been working in either SWiS or RCSW positions for at least six months following the 2011 Canterbury earthquake. Of the participants, eight were women and four were men, and 11 identified as Pākehā and one as Māori. The participant group worked across 30 schools in the Christchurch and Waimakariri areas of Canterbury.

Ethics approval for this research was gained through the Monash University Ethics Committee. School social workers were invited to participate following presentations of the research design by the researcher at all three social service agencies that employed SWiS and RCSW in late 2012/early 2013. Interested practitioners made contact with the researcher via email, following which a face-to-face interview was arranged. The interviews were conducted during 2013 and early 2014. At the beginning of each interview, the consent form was discussed and completed. Participants were informed that they could withdraw at any time during or after the interview. None of the participants chose to do this and each took part in one semi-structured interview of approximately one hour's duration.

A primary aim of the research was to understand how school social workers engaged in community building in Christchurch schools after the earthquakes. The interviews invited participants to discuss how they conceptualised and responded to their priorities in schools following the earthquakes. The participants described the school communities they worked in as more a practice context than as the primary focus of their interventions. The predominant practice responses were framed in relation to children's needs.

A Foucauldian discourse analysis (Arribas-Ayllon & Walkerdine, 2011) was used to analyse the notions of need within the interview texts. This involved tracing need as forms of knowledge, modes of action and subject positions made available for children, parents and school social workers themselves. I also paid attention to the power relations that made the production and circulation of the normative *truths* possible (Burr, 2006), focusing on the techniques school social workers utilised, including the referral processes, assessment procedures and modes of intervention. The main findings from this analysis are provided in the following section. The names of research participants, other people they spoke of and the schools at which they were based have been anonymised and pseudonyms are used.

Social workers' responses to need in post-earthquake schools

The research participants made distinctions between schools and clients with reference to decile ratings. The decile system is a New Zealand government statistical tool which allocates 'equity' funding to schools on the basis of aggregated measures of the income, educational qualifications, forms of housing and occupations for groups of individuals living within the geographical area (Thrupp & Alcorn, 2011, p. 55). The allocation of both SWiS and RCSW in schools relied on decile ratings. SWiS were allocated to a school or a cluster of schools with decile ratings of 1-3 or at least 60% of

their population in the low socioeconomic range (Jiang et al., 2017), whereas RCSWs were funded to work predominantly in higher-decile schools which did not have a SWiS. Low-decile and higher-decile schools were discussed as if they were two separate, yet comparable, contexts of need, which corresponded broadly to two practice responses: hardship-focussed interventions and anxiety interventions. As I discuss, both responses draw on objective conceptualisations of children's needs, positioning them in different ways as vulnerable. However, the school social workers also worked to open up space for children and their parents to negotiate different forms of need.

Hardship-focussed interventions

The research participants who were based in schools in low socioeconomic areas, predominantly SWiS, referenced the low-decile rating to objectively describe the families with whom they engaged:

... so there's that kind of flavour to the ... presentations ... lots of accommodation issues and people struggling financially ... (Peter, SWiS)

I see people being transient...people not having enough money or ... there's not enough housing or they'll struggle to access and sustain the housing, often within Housing New Zealand [government social housing organisation] situations, meaning they've got to kinda constantly change or are just simply over-crowded. (Darren, SWiS)

Low-decile families were understood as essentially the same. Their needs resulted from poverty including low income, welfare dependency, and unstable and poor housing. References to Māori and Pasifika were largely absent from the discussion of need despite the fact that these populations are significant in low-decile schools in Aotearoa (Belgrave et al., 2002; Jiang et al., 2017).

There was little sense from the accounts that the earthquake had qualitatively changed the needs for families in low-decile schools:

But I think in the earthquake time there's a lot of families in this school that were affected by [earthquake land effects] ... because there's a certain amount of people I think that may have been renting or were just moved quite quickly. And I think there was probably some other people, that lost their homes and were displaced. (Nicole, SWiS)

The view was that the disaster had intensified and extended hardship for a wider range of children and their families.

The predominant emphasis was on the effects of poverty on children, bringing the actions of parents into focus:

The kids' needs are often not being focused on or really consistently met (Darren, SWiS).

So they can take that from an angle of educating and supporting the parents, to educate and support the kids. ... But, ultimately it drips down to best supporting the kid depending on the resources you have. (William, SWiS)

Parents and caregivers were considered the primary focus for school social work practice in low-decile schools. This rationale is consistent with the holistic view of development found in ecological theory which proposes children have an inbuilt capacity for social, emotional and cognitive growth and with adults' support and nurturance they can reach developmental maturity (Baker, 2010; Kiersey, 2011). The school social workers sought to address important health, welfare and social issues adversely impacting on children's wellbeing. However, representing children as in need of protection meant they were afforded little agency. Further, the emphasis on

enhancing parenting reflects more of a focus on the personal, individual effects of poverty than structural conditions.

The hardship-focussed interventions also encouraged the research participants to see their roles as instrumental in supporting schools and teaching staff to focus on academics:

Because I know in these schools the teachers become social workers sometimes, the principals have parents in with social issues. They're dealing with health stuff, they're sometimes taking kids to the doctors, there's the education, all of that, so it's huge. (Nicole, SWiS)

... they have to deal with kids that are coming with ... no breakfast, not a lotta lunch, ... the night before, Dad's come home drunk or something like that ... if those fundamental needs aren't being met, you can't expect much learning to happen. (Scott, RCSW)

Relieving teaching staff from the burden of children's troubled home lives provided a clear, demarcated role for social workers. This also meant that the school context and the children's and parents' relationships with teaching staff were less of a focus. The primary focus in low-decile schools for school social workers was the children's immediate physical and social needs.

Anxiety-based need

A number of the NZRC worked in higher-decile schools, which had not previously had the involvement of a dedicated social worker. Whilst there was less call to focus on poverty-related concerns, the research participants continued to assess unmet need, but in relation to children's emotional concerns:

...there's a *lot* of emphasis from some parents on academic achievement and *sport* opportunities ... (Angela, RCSW)

... for some kids, because it's higher decile, parents are so busy and just don't have time. So that can ... create those anxieties or fears ... that sense of not feeling good enough [which] can lead into so many other things. So it's like that *social* kind of side of things can be lacking at a higher decile school ... (Sophie, RCSW)

There's a lot of anxiety from the children ... this *thrust* to do well ... it's a different level of anxiety [than] children that just might be anxious with earthquakes. But that's also on top of it. (Susan, RCSW)

High-decile children were considered anxious, a pre-existing condition resulting from the high expectations of their parents.

There were concerns that the earthquake-related stress would adversely affect the children's development, particularly in their future lives:

... if it's not fixed, well...that they haven't got strategies to deal with it when they're kids ... as they get to adults they're not gonna succeed in what they need to be succeeding in ... (Lynne, RCSW)

Children who were infants and pre-schoolers at the time of the earthquakes were also a concern:

... the ones that have maybe been in pre-school when the earthquakes happened and then they're coming to school and there's so many behaviour things and ... anxieties and just such ... high-strung kids that just don't know how to cope ... (Sophie, RCSW)

Anxiety is a big one ... especially now with the young five-year-olds that have come through and they were born ... around the earthquake time, and especially in the next year's gonna be a huge one with kids coming in that were in their mum's womb when the earthquake was [happened], and have

had to deal with all that stress ... So it's around those five and six-year-old levels, a lot of anxiety. (Scott, RCSW)

... there has been effect on the young, these pre-verbal kids that are just starting to start school now ... There's something like 20% [that] had ... your classic post traumatic symptoms of your avoidance, sleep issues, and hyperarousal. (Peter, SWiS)

The research participants discuss the earthquake as a cause of anxiety for these children such that they are now in a state of developmental crisis. They reference research conducted by Liberty, Macfarlane, Basu, Gage, & Allan (2013) in Christchurch after the earthquakes which purported that one in three children who were preschool age at the time of the earthquakes, were at risk of developing trauma and developmental delays. The research participants' accounts highlight their inclinations to not only understand the children's needs with a neuro-biological, anxiety lens, but also their interest in contributing to positive brain functioning. In contrast to the focus on social concerns for children in low-decile schools, high-decile children are constituted with psychological, but still developmental, concerns.

Anxiety needed to be addressed lest it disrupt children's ability to reach important educational and social milestones. This normative frame encouraged the research participants to work therapeutically with the children themselves:

And I think they don't ... feel safe or comfortable telling maybe mum or dad about what's going on. And quite often it just takes somebody out of the situation for them to just blah blah blah. (Sophie, RCSW)

... they had lots of kids with anxiety, so we put a group together with the school counsellor ... So we had about nine kids in that group. (Lynne, RCSW)

The focus of interventions was on enabling children to understand and manage their emotions. Social workers were less likely to involve parents in their work in high-decile schools.

The shift from external to internalised need was not necessarily straightforward for the research participants, especially when they compared high-decile children with those from low-decile schools:

... when you've got a higher decile school, if you pick out the highest need child from that school, potentially is probably one of the kids, if it was in a *lower* decile school, that would never even get picked up, you know? (Sophie, RCSW)

... probably the beauty of being in some of those schools I suppose [is that] in some [low decile] schools ... the children wouldn't stand out necessarily. But they do more in a high decile school. (Susan, RCSW)

The research participants offered a rationale for this work based on exclusion:

Cos how I see it is somebody who might have plenty of money and stuff, like their worries might look to us like nothing, but to them it's still a big deal. (Sophie, RCSW)

The high-decile child was described as a kind of 'lost soul,' whose needs only became visible when assessed from a psychological frame, although there was a degree of ambivalence in recognising these needs as worthy of intervention.

Understanding children through an anxiety lens also provided a basis for social workers to establish themselves in high-decile schools:

And I mean the majority of teachers will say, "Oh she just seems a bit teary" or "she's a bit withdrawn" ... report it to the DP [Deputy Principal] and she'll refer out to us. (Lynne, RCSW)

“Well, what, what is the first need that you’ve got?” And they said, “Oh, we’ve got these kids who are worried about the earthquake.” I said, “Well, look, Journey of Hope have done this training, would you like that to come in?” And, so that was all up and running ... (Susan, RCSW)

Educating children, individually and in groups to facilitate their development of emotional self-management skills, simultaneously established social workers’ utility in high-decile schools. However, an effect of this practice is that it perpetuated the norm of anxiety as a predominant lens for children to understand and respond to their emotional needs in response to a natural disaster.

Negotiating need

The research participants also described negotiated, relational determinants for practice with children and parents. These accounts do not represent an additional or alternate mode of school social work practice. Rather, they reflect spaces within the predominant approaches where the school social workers acknowledged or challenged the normalising effects of the prevalent interventions for addressing need. In one situation (as cited in Tudor, 2020), the children participating in a group focussed on friendship skills shifted the focus of the discussion to their own agenda. As Vivienne (SWiS) discussed, this focus was not anticipated and did not fit with the purpose of the group:

I thought we were meeting to eat lunch and learn how to make friendship bracelets, but they came to the table—talk about literally ... opened their lunchboxes and then spilled their stuff on the table. Not their lunchbox contents I don’t mean. Almost within minutes of entering the room.

The children were keen to talk about issues with their home lives:

Divided custody, conflict at home ... being removed from mum’s care and put into dad’s care, all those sorts of things. So we let them do that. We don’t directly respond to that stuff. We listen but we don’t try and tease that out with them. We just give them an opportunity to talk about that. And then we work on building them as a group to develop relationships with each other and with us so that’s a good place to be for them.

Vivienne did not seek out the girls’ disclosure of their difficult home-life experiences; she expresses some discomfort with the discussion:

I just don’t think that’s the focus—we’d lose that sense of safety.

Vivienne’s focus was on safeguarding that the content was not too distressing for the girls. Nonetheless, Vivienne did not stop the girls’ self-directed discussion. The mode of the group intervention as a relatively non-structured discussion and the relational focus on friendship skills seems to have precluded this. The social worker hesitantly let the conversation continue, although she was probably continuing to make judgments throughout the session about the girl’s safety. For the girls, bringing forth their experiences of loss enabled them to connect with each other. As discussed, this therapeutic focus on home-life related issues with children themselves was not usual practice.

There were also instances where children and parents in high-decile schools who were referred to see the social worker declined intervention. In one case (as cited in Tudor, 2020), a young girl was referred by her teacher due to concerns about her lack of friendships, as Erin, RCSW recounts:

A referral came through for her around isolation and her expecting friendships to be happening, but her not putting in the effort around that.

When Erin met with the girl there did not seem to be a clear indication of a problem; essentially Erin did not consider that the girl had an issue to be addressed:

So once I kind of got to know her, I didn't pick up anything about her being depressed and I didn't pick up anything about feeling isolated in any way. She had huge confidence in herself and in her abilities, she was really good at explaining her strengths to me and writing them down.

By presenting herself as a confident, independent thinker who could articulate her motivations for not associating with same-aged peers, the girl conceivably demonstrated socially prized normative, neoliberal behaviours. In her position of expertise, Erin was able to legitimise the girl's way of being and relating to others, informing the referring teacher that her involvement was not required.

Another example of refusal was led by parents and in negotiation with a deputy principal of a high-decile school. Amy, RCSW, describes how some parents refused consent for their children to be seen by her:

We have consent forms that we get the parents to sign and things like that, and it just has a bit about information sharing, and where we keep our records. And I had two parents complain to the DP saying, "I don't want my child's name being kept on records. What are they gonna do with my child's name?"

From Amy's point of view, the parents were worried that their children may be *marked* as a concern and this may have repercussions for their future lives. She adds "they feel like they can handle stuff themselves ... We don't need help—we're fine." The parents viewed themselves as capable in meeting their own children's needs and were supported by the Deputy Principal who legitimised their right to decline.

A feature of the acts of refusal is that they took place in high-decile schools. Amy, RCSW, was cognisant of this difference, stating "you never get that at any other school." She compares the response to parents from low-decile schools:

But I feel like the other people in maybe Tekau, like [low socioeconomic suburb] area are a lot more used to having people coming in and out of their lives and they are happier about having people support them and open to it, and not so suspicious.

The parents in low deciles demonstrate their responsibility for their children by being open to and trusting of professional support. In contrast, the parents from the high-decile school, who refused consent, exercised their child-focussed obligation through self-responsibility. The middle-class clients' abilities to present themselves in such self-assured ways can also be related to their skills of self-expression which, as Vandebroek and Bouverne-De Bie (2006) noted, are aligned with white, Westernised, middle class norms (p. 76). This implies that school social workers may not recognise the discursive effects of class and racial norms on their clients' abilities to understand, articulate and enact their needs.

Nonetheless, even in low-decile schools, school social workers guide and educate their clients to advocate for themselves. William (SWiS) (as cited in Tudor, 2020) discusses how he would assist children and parents to assert themselves with teachers:

Some clients I've had where they've expressed to me, "I don't like the way the teacher talks to me; they make me feel dumb." So as a result we'll have a meeting together and I'll sit there while they tell the teacher, "You actually make me feel dumb in the way that they're talking to me or the way that they're interacting with me."

William recognised the need for the children and parents to be treated with

respect and have a positive relationship with their teacher. He set up opportunities for his clients to meet with their teacher and articulate their views. William took on the roles of coach and mediator which he created by being clear and mindful of his professional boundaries:

I don't spend a lot of time in the staff rooms ... so collegially I'm not in there chatting and giving my personal life to people or sharing the stories that they share in the staffroom. I did initially but you've got to maintain some separation and some of it's black humour ... it's not even okay to be in its presence and not challenge it. So I choose to stay away from it.

He adds:

Because I also can't challenge that, because that's a personal space for the teachers and so you just can't have that. My presence is more in the playground and the times I talk to teachers will be when they're on duty, usually there. I also do quite a lot of stuff in classrooms.

William desired for children and parents to be respected in schools and the need for teaching staff to be comfortable in their personal spaces. However, he was clear he did not agree with aspects of the school culture. He directed interchanges with teachers where there was a clearer mandate for professional communication, taking the role of intermediary.

Discussion and conclusion

The professional contexts of school social work were pre-formed by norms that represented children at risk of not being able to cope with and recover from the earthquakes. In responding to these needs, existing and newer flexible, normative criteria were brought into play. The dominant discourse of need of school social work in low socioeconomic areas was hardship, which recognised poverty as a

personalised concern, focussing primarily on the care of children. Consistent with the Aotearoa New Zealand school social work literature (Beddoe et al., 2018; Belgrave, 2002), the school social workers drew on the holistic, eco-systems perspective to target the quality of children's home situations. In the aftermath of the earthquakes, this understanding of need was not dispelled, but rather intensified. However, for schools in higher socioeconomic areas, the hardship lens would not suffice. In these contexts, school social workers attended to another form of social difference—that of *anxiety*, recognised through a developmental lens as an internal barrier to the development of children. Drawing on child-focussed renditions of PTSD (Liberty et al. (2013) the practitioners were able to recognise the earthquakes as another stressor for children already emotionally vulnerable, constituting a new set of subjects previously unseen within school social work. In alignment with Foucault's view of normalisation in the aftermath of the Canterbury earthquakes, there was an intensification and proliferation of the meaning and criteria for recognising and understanding need in schools. At the centre of the categorical systems is the vulnerable child, who was differentiated, compared and ranked against other children on the basis of emotional, behavioural and psychological functioning, income bands and housing standards.

In the post-earthquake context, where there was an overall arching concern for wellbeing of children in schools (New Zealand Red Cross, 2014), recognising new subjects of vulnerability enabled school social workers to re-appraise their existing methods and develop new forms of intervention. Practices to enhance children's emotional processing reflect a shift to active subject positions for children in high-decile schools (Mutch & Gawith, 2014), showing consistency with the school social work literature from the United States (Bye, Shepard, Partridge, & Alvarez, 2009; Lee, 2012; Phillippo & Stone, 2011). In low-decile schools, there was a tendency for

school social workers to work with parents to guide, educate and support them to provide better care for their children, with little involvement of children themselves in the interventions. Nonetheless, despite the distinctiveness of the school social workers' class-based responses to need, both reflect a dominant problematic of the earthquake as developmental risk and a commitment to self-responsibility. As Foucault (2000b) emphasised, governance at the level of individual bodies recognises subjects as endowed with capacities, which can be indirectly shaped and moulded through normalising practices of the self. Without denigrating the child-focussed intention of these practices, school workers need to be alert to their embeddedness with disciplinary power as normalising experts and their roles in facilitating the active complicity of service users.

The analysis lends weight to Ife's (2009) claim that the predominant emphasis of need in social work places emphasis on the provision of what is needed, rather than the subjective experience or the cause of the problem (p. 40). Representing need in this way reduces complexity, as a range of factors must be simplified and left out (Baachi, 2009). In low-decile schools, families were represented as essentially the same with similar forms of hardship. Whilst the school social workers did identify culturally responsive practices, there was little attention to how culture affected and structured the needs of Māori and Pasifika in the aftermath of the earthquakes. This difference-neutrality (Croom & Kortegast, 2018) potentially reflects the practitioners' reluctance to present Māori and Pasifika as problematic or "the other" in low-decile schools (Ploesser & Mecheril, 2012). However, avoiding reference to cultural difference also meant that issues of privilege and power relations were left out of the analysis. These are important considerations for school social workers as they seek to embrace difference and practice with Māori and Pasifika in culturally inclusive ways (Selby et al., 2011).

It is imperative that school social workers attend to the diversity and complexity of the needs of children and families in disaster contexts where social policy and institutional techniques operate to standardise aspects of human life. In this article, examining the school social workers' practices from a Foucauldian perspective reveals the role they play in opening up small spaces for difference and alternate relations not readily visible within the prevalent configurations of child vulnerability. Through their positions of expertise, school social workers are able to influence the attitudes and actions of teaching staff and other professionals whilst still working collaboratively. These kinds of practices reinforce the relevance of the eco-system's principle of interconnectedness and provide guidance on how school social workers cultivate multiple forms of social relations and act as bridges within school systems (Beddoe et al., 2018). However, practice theories on their own cannot provide the definitive ground for transformational practice. Non-normalising practice emerges from a critical attitude rather than a process of replacing existing norms with more positive ones (Taylor, 2009). School social workers demonstrate this critical ethos when they disrupt or refuse to comply with individualistic, normative knowledge and institutional hierarchies associated with securing children's developmental safety.

Accepted 1 September 2020

Published 15 December 2020

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Clinical social work in Aotearoa New Zealand: Origins, practice, and future implications

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ABSTRACT

INTRODUCTION: Clinical social work is practised with individuals, groups and families in areas concerned with mental health and counselling for people's wellbeing. As a field of practice, it has been insufficiently researched and often not understood in Aotearoa New Zealand. This article provides an overview of clinical social work in Aotearoa New Zealand.

APPROACH: This is a theoretical article that discusses the development of social work, and clinical social work, in this country; attention is paid to professionalisation debates and registration. There is an overview of the social work training landscape and post-qualifying mental health specialisation options, with a brief discussion about the New Entry to Specialist Practice model for social workers. Theoretical underpinnings of clinical social work interventions are canvassed, including systemic models, recovery approaches, strengths-based models, indigenous models, narrative therapy, cognitive behavioural therapy and dialectical behaviour therapy. Four vignettes of clinical social work are presented, before a discussion about the future implications for clinical social work in Aotearoa New Zealand.

CONCLUSION: Clinical social workers have a range of knowledge and skills to work with people in mental distress. A challenge is issued to clinical social workers to continue to uphold social work values within multidisciplinary mental health services. The development of a clinical scope of practice in the context of recent mandatory registration for social workers is recommended.

KEYWORDS: Clinical social work; mental health; counselling; scope of practice

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Defining “what social work is” has often presented challenges to the profession. At the time of writing (2020), the Aotearoa New Zealand Social Worker Registration Board (SWRB) is working with various stakeholders to consider defining an initial broad scope of generalist social work practice (SWRB, 2020). Within social work there exist many fields of practice, and also specialty areas of practice. In this theoretical article, we will explore the specialty of clinical social work, and what

makes it particularly unique in Aotearoa New Zealand.

Our motivation in writing this article comes from each of our own experiences of practising clinical social work across a range of mental health service settings in Aotearoa New Zealand. We recognise that clinical social work is not always well understood within this country, and we have taken the opportunity to present and discuss this field of practice within the context of mandatory

AOTEAROA
NEW ZEALAND SOCIAL
WORK 32(4), 103–115.

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registration and developing scope(s) of practice.

We begin by discussing the historical development of social work, the influence of te ao Māori (Māori worldviews), and the tensions that have influenced the professionalisation project of social work in this country. These have all shaped the construction of perspectives and practice of clinical social work. We then consider the training context, major theories, models and perspectives utilised in clinical social work. We have each presented a vignette of clinical social work practice from our practice setting and conclude with the implications and future focus for clinical social work in Aotearoa New Zealand.

While many aspects of this article apply to all social work practice, the particular focus here will be on clinical social work. The authors are all, or have been, employed within clinical settings. While we acknowledge that there has been a strong critique levelled against clinical social work, over its individualistic focus, its maintenance of the status quo, the idea that it moves social work away from its social justice function and may support a neoliberal agenda (see for example, Dalal, 2018; Payne, 2014; Specht & Courtney, 1994), the focus of this article does not lie in a critique of clinical social work, but rather an initial exploration of the specialty in Aotearoa New Zealand.

What is clinical social work?

There is not a strong history of clinical social work in Aotearoa New Zealand, and at times the term has not been well understood. Clinical social workers often engage in more generalist tasks, while many social workers will engage in clinical skills. It is difficult to definitively ringfence clinical social work.

Briggs and Cromie (2009) have discussed clinical social work across both the Australian and Aotearoa New Zealand contexts, and note that it can also be difficult to distinguish clinical social work from

other clinical roles within mental health practice. However, they offer a definition that clinical social work is “concerned about the social context and social consequences of mental health” with the purpose to “restore individual, family and community well-being, to promote the development of the client’s power and control over their own lives, and to promote the principles of social justice” (Briggs & Cromie, 2009, p. 222).

Clinical social workers in Australia can become Accredited Mental Health Social Workers (AMHSWs), providing mental health assessment and treatment through Medicare Australia (Australian Association of Social Workers, 2014). AMHSWs are recognised by the Australian Federal Government as an assessing authority of specialist mental health expertise. They are trained in a range of psychological interventions, which are delivered in a holistic manner that recognises the broader implications of mental illness on a person in their environment.

The National Association of Social Workers (NASW, 2020) in the United States of America (USA) defines clinical social work as “a specialty practice area of social work which focuses on the assessment, diagnosis, treatment, and prevention of mental illness, emotional, and other behavioral disturbances”. Treatment modalities often include individual, group and family therapy and within the USA, clinical social workers must be certified or licensed to practice within a particular state.

The Council on Social Work Education (CSWE) in the USA provided a comprehensive definition of clinical social work in 2009:

The practice of clinical social work requires the application of advanced clinical knowledge and clinical skills in multidimensional assessment, diagnosis, and treatment of psychosocial dysfunction, disability, or impairment including emotional, mental, and

behavioral disorders, conditions, and addictions. Clinical practice interventions include case formulation based on differential diagnosis and assessment of risks and vulnerabilities and those factors that produce and constrain the strengths and resilience found in the transactions among people, their communities, and the larger social environment. (CSWE, 2009, p. 2)

Clinical social workers in the USA must usually hold a Master of Social Work degree and Licensed Clinical Social Workers (LCSW) must also undertake many hours of supervised practice and often a clinical-level board examination. Clinical social workers can work in a number of different settings such as in private practice, health settings, community mental health centres (CMHCs), primary care, and in drug and alcohol treatment centres (NASW, 2020).

The USA Social Work Licensure (2020) website distinguishes between clinical and direct practice social work: “[t]he main difference between clinical and direct social workers is what each is legally allowed to do. All social workers can connect clients with resources and offer guidance through difficult situations, but only clinical social workers can provide counseling treatments”. In Aotearoa New Zealand, the understanding of clinical social work and the associated legislation is less clear.

From previous definitions the authors propose that clinical social workers in Aotearoa New Zealand would be those involved in the assessment and treatment of mental distress, and/or involved in counselling or engaging in therapeutic work to enhance client wellbeing. Most clinical social workers would be situated within health settings, child and family counselling settings or within a small field of private practice. Much clinical social work practice occurs within the context of the district health board (DHB) public mental health system, but there are also social workers providing clinical roles in non-government

agencies, such as being engaged with Multi Systemic Therapy within Youth Horizons Trust, sexual offender treatment at SAFE Network and family therapy and counselling within agencies such as Family Works.

History and context

Social work and, in particular, clinical social work, has been forged within the tensions inherent within the history of Aotearoa New Zealand. Professional social work training in Aotearoa New Zealand did not begin until 1950 with a two-year post graduate diploma in social sciences offered through Victoria University (Nash, 2001). Staffing for this programme was, for the most part, made up of academics from the United Kingdom or those with American training. They brought with them some knowledge of casework, and early training at Victoria often focused on individual or family treatment (McCreary, 1971). With around 12 graduates per year coming from this initial programme, the growing social work workforce was composed mainly of people who had obtained their social work qualifications overseas, or those without formal social work qualifications.

A Māori renaissance in the 1970s and 1980s brought with it a strong protest against colonising forces, which included those present within social work training, particularly its ‘casework function’. British and American social work models were criticised for responding to individualistic western perspectives, for being racist and aligned with the State in maintaining the status quo (Ministerial Advisory Committee on a Māori Perspective for the Development of Social Welfare, 1986).

At the same time that this was occurring, social workers in health were leading the way in encouraging further professionalisation. An ongoing debate occurred within the then National Association of Social Work (NASW), now named Aotearoa New Zealand Association of Social Work (ANZASW), about the

benefits of formal social work registration. While the debate about professionalisation and regulation was complex (Hunt, 2017), the two sides aligned generally between the health social workers (most of whom who had increasingly obtained academic qualifications) and the rest of the social work workforce. In that camp sat people who saw professionalisation equated with elitism, those who viewed professionalisation being antithetical to Māori collectivist values, and those who had no professional social work qualifications (Staniforth, 2010a).

From 1978 until 1998, a number of motions recommending that social workers require formal social work training, and/or registration were put forward at the NZASW Annual General Meetings. All were defeated. Throughout this time, there was also a growing commitment to biculturalism for social work, with the Association eventually developing both Māori and Tauīwi (non-Māori) caucuses, changing its name to the Aotearoa New Zealand Association of Social Work and developing a bilingual and bicultural code of ethics (Beddoe & Randal, 1994; Fraser & Briggs, 2016; NZASW, 1993).

The availability of social work training grew rapidly from the 1980s onward, with a growing workforce of qualified social workers. In response to earlier criticisms about its colonial heritage, social work programmes increasingly began to teach indigenous perspectives, and Māori, many who had previously been traumatised within their earlier education (Wikaira, participant contribution in Staniforth, 2010c), increasingly completed formal training. While there were some factions still opposed to registration, the notion of registration of social work became more palatable to several stakeholders, and in 2003 the voluntary Social Workers Registration Act was passed (Hunt, 2017). Since that time, the ANZASW, the Tangata Whenua Social Work Association, the regulator (the SWRB), and the Council of Social Work Educators of Aotearoa New Zealand all lobbied to make mandatory registration a

requirement of social workers, and to have protection of the title 'social worker' (Hunt, Staniforth, & Beddoe, 2019). In early 2019, mandatory registration of social workers was enacted through the Social Workers Registration Legislation Act (2019). For the first time, scopes of practice for social work will be defined. The first scope of practice will define a generalist social work practice (SWRB, 2020), with more specialised scopes of practice likely to follow over time.

Clinical social work in Aotearoa New Zealand

This history is significant in understanding the notion of clinical social work in Aotearoa New Zealand. There are several factors which have contributed to clinical social work not developing widely as a field of practice. There appears to be confusion about what the term means, and the title "clinical social worker" is not widely used by social workers.

The professionalisation debate has taken up much of the energy of the profession to date (Daniels, participant contribution in Staniforth, 2010c). Without a mandatory, legislated requirement for social workers to have a formal qualification, it has been difficult to argue for increased specialisms such as clinical social work. Additionally, clinical social workers have been seen as elitist, status-seeking, and involved in maintaining people in positions of oppression (Holden & Barker, 2018; Specht & Courtney, 1994). With its focus on individual treatment, it has also been criticised as having a western focus and of minimal relevance to Māori (Ministerial Advisory Committee on a Māori Perspective for the Development of Social Welfare, 1986).

As stated, there has been very little written or researched about clinical social work as a specific field of practice in Aotearoa New Zealand. What has been written has been more closely aligned with counselling in social work, rather than clinical social work (Booyesen & Staniforth 2017; Staniforth,

2010a, 2010b, 2010c). The concepts of counselling and clinical social work are sometimes seen as being interchangeable.

Education and training

Over the past 60 years the education requirements for social work qualifications have gone from a two-year diploma, to a three-year degree, to a four-year degree, and degrees have mostly sat at an undergraduate level (Hunt et al., 2019). There is a two-year first professional qualifying master's degree offered by some institutions, but it is also required by the SWRB to have a generalist orientation (Ballantyne et al., 2019). Post-qualifying masters and doctoral level qualifications have been research focused, with the authors having no knowledge of any social-work-specific clinical programmes being offered within the country. The majority of social workers who do identify as clinical social workers have either come from other countries with a clinical tradition, such as the USA, Canada or South Africa, have engaged in further training in particular modalities, or obtained further counselling qualifications (Booyesen & Staniforth, 2017).

Te Pou o te Whakaaro Nui (2020), the national workforce development centre for the mental health, addiction and disability sectors in Aotearoa New Zealand, has developed the New Entry to Specialist Practice (NESP) programme for allied health staff, including social workers, who are entering the field of mental health. The programme involves postgraduate study in mental health, along with a capped caseload, dedicated release time for study, and mentoring from within the clinical team. The course content includes mental health assessment and diagnosis and clinical interviewing skills. These programmes have been developed in recognition of the knowledge gap that exists between generalist qualifications and the specialist skills expected of social workers in the field of mental health (Te Pou o te Whakaaro Nui, 2020).

The recent report into enhancing the readiness to practise (R2P) of newly qualified social workers (NQSWs) in Aotearoa New Zealand recommended more support for newly qualified social workers (NQSWs) (Ballantyne et al., 2019; Hunt, Tregurtha, Kuruvila, Lowe, & Smith, 2017). Recommendations around reduced caseload and opportunities for post-qualifying training fit well with the NESP model. Mental health knowledge was identified within the R2P project as a common knowledge gap for NQSWs, and the NESP programme was discussed by one respondent as an effective learning model. Some DHBs have NESP coordinators who facilitate group supervision and additional training (Staniforth & McNabb, 2004). This is aligned to the *R2P Report* about the importance of workplace induction, supervision and peer support for NQSWs (Ballantyne et al., 2019).

The NESP study programmes do not include in-depth training in therapeutic modalities, and are not social-work-specific. NESP participants must be employed in a setting where assessment, and therapeutic 'treatment' are undertaken, as the programmes require consideration of case studies and/or video feedback of real work with clients. Whether a social worker does complete the NESP programme is dependent on their employer, funding, and capacity within the service to support the NESP learning.

Theoretical underpinnings, approaches and models of practice

Clinical social workers bring a relational, contextual, holistic and strengths-based approach to mental health assessment and intervention. Like all social workers, they use a range of theories and models, including, but not limited to, anti-discriminatory theory, ecological theory, systemic models, recovery approaches, strengths-based, and indigenous models (NASW, 2020). In addition to these skills, they will likely have also undertaken training above their

basic social work qualification in order to provide ‘treatments’ such as narrative therapy, cognitive behavioural therapy and dialectical behaviour therapy (Booyesen & Staniforth, 2017).

Systemic approaches such as Gitterman and Germain’s (2008) ecological systems theory, provide a framework for understanding individuals within their environments. While systemic approaches are evident in much of generalist social work practices, Mendenhall and Frauenholtz (2013) argued that clinical social workers work at the micro, exo and macro levels in order to increase mental health literacy. From practice, we are aware of the Auckland Liaison Education Adolescent Programme (LEAP) programme, which was developed by a clinical social worker to provide a dedicated consultation, liaison and mental health training service to schools. Systemic approaches are also used by clinical social workers involved in wraparound services. In addition to the clinical functions of assessment and treatment, child and adolescent mental health services (CAMHS) have developed wraparound teams for work with families who have mental health needs and concurrent child protection agency involvement. Kirkwood (2014), a Māori clinical social worker from a CAMHS wraparound team, has discussed how the wraparound approach is complementary to the Treaty of Waitangi principles, with a focus on culturally competent and collaborative engagement with families. Other systemic approaches applied by clinical social workers include provision of family therapy, couples counselling, and multi-systemic therapy for families with children with behavioural challenges.

Clinical social workers also bring recovery and strengths-based approaches to clinical settings, and aim to reduce power inequality with clients, engaging in collaborative assessment and goal setting. They actively look for client strengths and natural resources (Booyesen, 2017). Within multidisciplinary health settings, clinical

social workers have the additional role of advocating recovery and strengths-based approaches within the dominant medical model. Consumer feedback has endorsed recovery approaches, and the Ministry of Health (2018) supports a recovery approach to mental illness. Recovery approaches are aligned with the social work values of empowerment, respect and protection of human rights.

There are a number of indigenous models of wellbeing that have been put forward in Aotearoa New Zealand. Māori models are generally characterised by a holistic approach and an understanding of the impact of spirituality and collective identity on wellbeing (Wratten-Stone, 2016). One of the most widely known models is Te Whare Tapa Whā, developed by Mason Durie (1994). Translating to ‘the four-sided house’, it is a holistic model that views wellbeing as the collective strength and balance of four sides of a house—taha tinana (physical health), taha whānau (family health), taha hinengaro (thoughts and feelings/mental health) and taha wairua (spiritual health).

Kaupapa Māori theory has evolved from a base of being Māori, of recognition and validation of Māori cultural world views, and challenging the dominance of western knowledge bases (Smith, 1999). There are some services in Aotearoa New Zealand that have developed kaupapa Māori services. These include a CAMHS team (Elder et al., 2009), Māori adaptation of a cognitive behavioural therapy intervention (Mathieson, Mihaere, Collings, Dowell, & Stanley, 2012), and a primary mental health service using the Whare Tapa Whā model (Abel, Marshall, Riki, & Luscombe, 2012). Social workers have been involved in each of these programmes.

International and Aotearoa New Zealand trained clinical social workers have also been influenced by narrative therapy (Burack-Weiss, Lawrence, & Mijangos, 2017). David Epston and Michael White, social workers from Aotearoa New Zealand

and Australia respectively, published the first text about narrative therapy (White & Epston, 1990). The approach is based on the assumption that people experience problems when the stories of their lives, as told by themselves or others, do not represent their lived experience. The therapeutic process is collaborative and seeks to re-story the lives and experiences of the person, thus co-creating a new narrative (White & Epston, 1990).

In Aotearoa New Zealand, one of the dominant psychological therapies offered in mental health services and private therapy is cognitive behavioural therapy (CBT). CBT is based on the premise that a person's thinking affects their emotional and behavioural responses (Beck, 2020). There are several criticisms of CBT, including its place within the positivist research paradigm, that it is deficit focused, that it has an individualistic approach that ignores social oppression (Payne, 2014) and that it has been a tool promoted by neoliberal forces (Dalal, 2018). CBT is practised by clinical social workers in Aotearoa New Zealand, although there is a lack of research into the way in which it is practised. Despite the multiple pressures exerted by neoliberal paradigms within agency settings, clinical social workers have the capacity to be strengths-based, culturally competent, and cognisant of the impact of the environment upon a person, and so it is hoped that CBT is practised in a way that aligns to those values (Gonzalez-Prendes & Brisebois, 2012; Padesky & Mooney, 2012).

Dialectical behaviour therapy (DBT) is a psychotherapy that includes individual therapy, skills group, and telephone coaching for people with emotional problems. Clinical social workers are involved in delivering this programme in mental health services and in a residential DBT programme in Aotearoa New Zealand (Cooper & Parsons, 2010). We are aware that clinical social workers have been involved in adaptations of the DBT programme, including development of DBT-informed skills groups for Māori young people in

secure youth justice facilities (Weenink, 2019), in secure care and protection residences, and in the delivery of school-based DBT in collaboration with school teaching staff. Cooper and Parsons (2010) have examined the social work values at play in DBT. They have drawn links between core social work skills and DBT strategies, such as the use of empathy and adapting a non-judgmental stance, and suggest that clinical social workers who are trained in DBT are highly skilled and provide effective services in Aotearoa New Zealand.

Vignettes

We have provided four vignettes, representative of our areas of clinical social work practice. The first three are derived from various cases to provide composite vignettes. The final is a real case with a pseudonym used. The woman provided her permission to present this work. These vignettes illustrate the use of different therapeutic modalities in clinical social work, including systemic, narrative and strengths-based approaches, as well as CBT and DBT-informed interventions.

Youth forensic service vignette

The first vignette is from Joanna Appleby, a Pākehā social worker who completed her BSW and MSW in Aotearoa New Zealand. Jo has postgraduate qualifications in child and adolescent mental health and CBT and completed training in DBT. Her example comes from a DHB-based youth forensic service context.

Damon was a 15-year old Cook Island boy who became involved in the youth justice system. Damon ended up being placed in a secure youth justice residence due to his offending. Jo met with Damon in the residence and formulated that his poor distress tolerance was perpetuated through difficulties with problem solving and coping skills, partly due to poor role modelling within his family and peer group. When Damon became emotionally

distressed, he became physically agitated, experienced urges to kill himself, to use methamphetamine, or to engage in thrill-seeking offending. Jo worked with Damon within the residence, using a combination of CBT and DBT-informed approaches. There was a focus on increasing Damon's awareness of his own triggers, particularly loneliness, and paying attention to the physical sensations that accompanied those feelings. Damon practised problem solving, seeking social support, and managing his urges to engage in unhelpful behaviour. This work was complemented with visual aids and tangible reminders, given his poor verbal skills. Prior to him returning home, Jo worked with Damon's mother to teach the skills that Damon had learned, and to make a plan to manage his suicide risk with those skills. Further whole-family support was provided once Damon had returned home, and a multi-agency risk management plan was developed, including Oranga Tamariki and Youth Horizons Trust.

Adult cognitive therapy centre vignette

The second vignette is from Barbara Staniforth, who completed her BSW and MSW in Canada, and then undertook both CBT and DBT training in Aotearoa New Zealand. Barbara was seconded from a CMHC team to a university-based specialist cognitive therapy centre.

Kale was a 36-year-old man referred to the CBT Centre by his CMHC for low mood and suicidal ideation. Barbara undertook an initial assessment with Kale including a number of structured tools such as the Beck Depression, Anxiety and Hopelessness inventories (see Beck, 2020). A careful consideration of possible environmental factors that may be contributing to Kale's difficulties was made, with no outstanding issues noted. A tentative diagnosis of Major Depressive

Disorder was made. A safety plan was developed to address the suicidal ideation (with ongoing liaison with the CMHC team) and psychoeducation about CBT and depression was given. Over the weeks, Barbara taught Kale a range of CBT interventions including behavioural skills such as breathing, relaxation, exercise and diet and engaging in meaningful activity. When Kale's mood had improved slightly, cognitive interventions were provided through a structured thought record process. This revealed certain unhelpful thinking patterns that Kale was engaging in, and also some situations that he wanted to change. A process of cognitive restructuring was used to change thinking patterns and structured problem solving was used to change situations. Kale reported an improvement in his mood, and his Beck Depression Inventory scores were significantly improved. A relapse prevention plan was developed and Kale was discharged back to the CMHC after 12 weeks of treatment.

Child and adolescent mental health service vignette

The third vignette is from Caroline Flanagan, who completed her MSW in Scotland. She has also completed postgraduate training in child and adolescent mental health and training in CBT in Aotearoa New Zealand. Caroline's example comes from a DHB-based child and adolescent mental health service.

Sophie was a 15-year-old Pākehā girl living with her parents. She was referred to the DHB CAMHS service by her general practitioner with concerns around self-harm by cutting, low mood, suicidal thoughts and complete school refusal. The clinical social work intervention was based on a formulation that Sophie's presentation was based on anxiety, both for her and her parents. Caroline provided individual CBT for anxiety with Sophie. The CBT included

graded exposure with a gradual return to school. Caroline also discussed practical distress tolerance and mindfulness skills with Sophie to minimise the self-harm. Sophie's suicidal thoughts resolved once her stress reduced. Caroline worked with Sophie's parents around managing their own anxiety and provided skills-based family sessions. Important parts of work with this family involved opening a narrative around their shared experience of anxiety, with a family systems informed understanding of Sophie's difficulties. Caroline also worked with the family to develop their understanding and use of emotional language to help them move from binary notions of 'bad behaviour'. The focus of the work was on the whole family system, helping the family to identify and utilise the skills required to manage anxiety and distress in helpful ways.

Maternal mental health service vignette

The final vignette is from Clarke Millar, who completed his Master of Applied Social Work and postgraduate study in Discursive Therapies in Aotearoa New Zealand. Clarke's example comes from a DHB-based maternal mental health service.

A midwife referred a 39-year-old Māori woman, Morgan, to the maternal mental health service in the days following the birth of her baby. This was Morgan's sixth baby; four of her older children were in the custody of child-protective services. Morgan was homeless, had an impending court date for assault charges, and her behaviour on the postnatal ward appeared to staff as 'psychotic'. Morgan was diagnosed by the team psychiatrist with a post-natal depressive disorder, a resolving mild psychosis with long-standing post-traumatic stress disorder. The clinical social work intervention involved individual counselling with Morgan and a group-based therapeutic intervention. This was

based on a trauma-informed formulation of Morgan and her situation. Clarke provided individual counselling to help Morgan to process her trauma within a strengths-based narrative framework. Morgan also participated in the *Circle of Security* parenting group, with an emphasis on validating the feelings of her children, as well as her own feelings. Clarke also worked alongside Morgan to reduce structural barriers. He engaged in social work interventions of addressing homelessness and advocating for culturally responsive approaches, including arranging for her Family Group Conference to be held on a marae. Clarke was also able to use his mental health knowledge to clinically justify a service response that was attuned to Morgan's relational needs in the context of her post-traumatic stress. This included advocating within the multidisciplinary team for service flexibility in order to provide continuity of care when Morgan was moving between service geographic boundaries.

These four vignettes demonstrate some of the theories, approaches and models used in working with individuals and their families to improve emotional, behavioural and mental wellbeing. While each of the vignettes shows the use of specialised clinical skills, the inherent holistic work with these people and their families is consistent with the overall ethos and aims of all social work practice.

Future directions and challenges

It is an exciting time for clinical social work in Aotearoa New Zealand, with an opportunity for the profession (including clinical social workers, health leaders, educators and the regulator) to define this area of practice. There are a number of possible future directions for consideration. These include continued commitment to the Treaty of Waitangi, the impact of mandatory registration and the opportunity to develop a clinical social work scope of practice.

These all have the possibility of impacting the clinical social work role within multi-disciplinary teams and other environments.

Clinical social work has been criticised in Aotearoa New Zealand, given its roots in western individualistic history. Its future, therefore, must include a revisioning of practice within a more collective framework and a commitment to the Treaty of Waitangi. The ANZASW bilingual and bicultural *Code of Ethics* asserts that social work practice is grounded in the articles of the Treaty (ANZASW, 2019). The Social Workers Registration Legislation Act (2019) requires that all applicants for registration are competent to practise social work with Māori as well as other cultural and ethnic groups. There is a challenge for all social workers to be culturally competent to work with Māori—within systems that may not support this. The public health system in Aotearoa New Zealand, where many clinical social workers are employed, is sector based, with siloed thinking and a medical model that focuses primarily on individuals (Government Inquiry into Mental Health and Addiction, 2018). However, Māori thinking can be characterised as *asectoral* and holistic regarding wellbeing (Ahuriri-Driscoll, 2016). Competence to work with Māori means that clinical social workers have a responsibility to shape services to be responsive to the needs of those they serve. This necessitates inclusion of whānau and Māori concepts of health within mental health services.

True commitment to the Treaty means that clinical social workers have a role in enhancing Māori access to mental health services that are culturally responsive. Alongside advocating for improved access, mental health services must be culturally welcoming and safe for Māori, with inclusion of Māori customs, explanatory models and having space to discuss incorporation of clinical and cultural interventions. All social workers also have a role in promoting Māori input into service delivery. The explicit commitment of social workers to the Treaty of Waitangi necessitates that these issues

should be forefront in the minds of social workers in Aotearoa New Zealand.

As social work registration has just recently become mandatory in Aotearoa New Zealand (with a two-year phase-in period), it is timely to attend to the issue of scopes of practice, including the development of a clinical scope of practice that reflects the bicultural nature of this country. Scopes of practice are not yet defined in Aotearoa New Zealand, nor are the pathways to eligibility. It is not yet clear if scopes will require postgraduate study, or if there will be a funding structure to enable mandatory training. Specialist scopes are unlikely to be developed until after the two-year transition period for mandatory registration. This is an opportunity for social work stakeholders to participate in the defining of the roles, actions and entry pathways for scopes of practice.

A clinical scope of practice could help address some current issues for mental health social workers in Aotearoa New Zealand. One particular issue is that there is rarely a specific social work lens on postgraduate mental health programmes or within therapeutic training. For example, while there are social workers who have completed postgraduate training in CBT, it is up to the individual social worker to critically reflect on how to connect social work values with the CBT model. A clinical scope could assist in making explicit the social work approaches to various therapeutic modalities.

The Health Practitioners Competence Assurance Act (2003) provides a mechanism to ensure competence of health practitioners in Aotearoa New Zealand. Professional authorities must specify scopes of practice, qualifications must be prescribed, and professional registration is mandatory. The Act provides generic terms to provide a framework that can apply to all health practitioners. However, the Act does not cover social workers, as social work roles are not limited to health social work, hence

social workers have specific legislation. With the advent of mandatory social work registration and scopes of practice, there may be regulatory parity with other disciplines under the Health Practitioners Competence Assurance Act (2003). It is hoped that this will enhance the credibility of clinical social work within the health field, which was one of the first drivers for social work registration.

In developing a clinical scope of practice, the Australian and USA definitions could be considered (Australian Association of Social Workers, 2014; CSWE, 2009). Work done by the National DHB Health Social Work Leaders Council (2017) in association with the ANZASW to develop a health scope of practice, may also be beneficial in developing a clinical social work scope of practice.

The authors propose that a clinical scope of practice includes some of the features from health social work colleagues, as well as overseas examples. An understanding and application of Māori models of wellbeing, as well as understanding of cultural explanatory models of mental health will also be important. While not being prescriptive about choice of therapeutic models, it would be necessary for a clinical social worker to have training and continuing professional development in a therapeutic modality, and be competent to deliver therapeutic interventions to individuals, families and groups. An understanding of human growth and development as well as an understanding of basic psychological principles and brain functioning would also be beneficial.

While some of these aspects are considered within qualifying programmes, many social workers have described feeling unprepared for their counselling roles (Staniforth, 2010c).

Within a context of commitment to the Treaty and increased professionalisation of social workers, a further challenge is the promotion of the clinical social work identity and voice within multi-disciplinary mental health teams. CMHCs in Aotearoa New Zealand

have a case management model with specific disciplines, namely social work, nursing and occupational therapy, undertaking generic case management as key workers for allocated service users (Briggs & Cromie, 2009). This model can result in loss of specific professional identity. The work done on developing a clinical scope of practice for social workers could assist in defining a social work role in mental health services.

There are challenges associated with multi-disciplinary teams, with competing frameworks and values (Frost, Robinson, & Anning, 2005; Keen, 2016). Clinical social workers have the opportunity to use these environments to provide a critical perspective, to challenge the medical paradigm, and to advocate for service reform. Clinical social workers bring a holistic perspective to these teams, offering a social justice perspective, and a social model of mental health, alongside the dominant medical model. Within this context, clinical social workers also have a role in challenging the rigidity of service exclusion criteria, particularly when policies serve the needs of the service over the needs of those who use the service (Appleby, 2020). As mental health and wellbeing service demand continues to increase, there can tend to be a focus on limiting service delivery and tightening inclusion criteria as a solution. For clinical social workers who are committed to social justice and anti-discriminatory practice, an alternative approach may include macro-level advocacy for service funding, in order to improve service flexibility and responsiveness.

Conclusion

We have attempted to provide an overview of clinical social work in Aotearoa New Zealand. A definition of clinical social work was provided, along with a presentation of the historical context of social work in this country. We have considered the evolution of education and theoretical underpinnings of clinical social work and provided four examples of clinical practice.

Clinical social work in Aotearoa New Zealand is an evolving field of practice. There is more work to be done in defining a clinical scope of practice and developing social work clinical training pathways. Clinical social workers have the opportunity to shape these developments over the next few years, and to continue to strengthen social work's influence within mental health and wellbeing services in Aotearoa New Zealand.

Accepted 9 October 2020

Published 15 December 2020

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Meeting the social support needs of older rural people in Central Otago: The impact of a pilot social work position

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ABSTRACT

INTRODUCTION: This project aimed to identify the support needs of older people living in rural Central Otago, Aotearoa New Zealand and to ascertain if a pilot social work position was meeting these needs.

METHODS: Data were collected during December 2019. Twelve semi-structured qualitative interviews were conducted with the social worker, referrers of the social worker's clients, key community stakeholders, and the older rural residents supported by the social worker.

FINDINGS: An interpretive analysis of the data identified two key thematic: 1) being older in Central Otago; and 2) providing aged social work services in this region.

CONCLUSION: Despite the positive impact that the Age Concern Otago social work position is having for clients of the service, the need for social support for older rural people in Central Otago continues to grow. In addition to increasing social worker resourcing, better coordination and linking between the government and non-government agencies operating in this space would improve the effectiveness of aged social work services, as would improved visibility of these services within the community.

KEYWORDS: Social work; rural health; older people; ageing in place

This article reports on a modest qualitative study exploring a pilot social work position in Central Otago that was established to support older people in the region. The rural context of providing social support to older people is unique both in the issues that older rural people commonly experience, and in the scope of social work practice (Smith, 2013). Our findings reflect those of a growing body of work identifying and investigating forms of precarity in ageing—both from the experience of older adults and those who support them (Grenier, Phillipson, & Settersten, 2020). Precarity has been defined

in the Aotearoa New Zealand context as a form of vulnerability that is characterised by powerlessness, insecurity, uncertainty and perilousness (Groot, van Ommen, Masters-Awatere, & Tassell-Matamua, 2017).

There is no one accepted definition of rurality in Aotearoa New Zealand which makes it difficult to provide accurate estimates of the rural population (Fearnley, Lawrenson, & Nixon, 2016). It has been estimated that the rural population of Aotearoa New Zealand numbers approximately 620,000 people (Pittaway, 2017). Pittaway (2017) noted that if

this population was clustered in one location, it would be equivalent to the second largest city in Aotearoa New Zealand (Pittaway, 2017). Data from the Aotearoa New Zealand 2018 Census indicates that around 16.2% of the rural population is over 65 years (compared to 15.5% of the total population) while 9.5% of the rural population is older than 80 years (compared to 3.5% of the total population) (Statistics New Zealand, 2020a). These figures mirror international data indicating that older people are over-represented in rural populations (Keating & Phillips, 2008; Malatsky & Bourke, 2016). Like other nations (Keating & Phillips, 2008), it is likely that the proportion of older people in the Aotearoa New Zealand rural population is increasing at a more rapid rate than in urban areas (Pomeroy & Newell, 2011).

Aotearoa New Zealand currently supports the principle of ageing in place for older people (Ministry of Health, 2001, 2011; Office for Seniors, 2019). An Aotearoa New Zealand review of what ageing in place meant to older rural residents revealed that ageing within their familiar rural community provided a sense of continuity and identity (Wiles, Leibing, Guberman, Reeve, & Allen, 2012). The success of ageing in place in a rural context is dependent on the availability of, and access to, health and social services (Keating & Phillips, 2008). Despite initiatives such as “Live Stronger for Longer” that aim to support older people (in this case combining a focus on fall reduction with a positive ageing message for older people and organisations), support is unevenly distributed and can be difficult to access for those living in rural areas (National Health Committee, 2010; Parr & Philo, 2003; Pittaway, 2017; Rural Expert Advisory Group, 2002).

Previous research indicated disparities between rural and urban access to health services within Aotearoa New Zealand (Lilburn, 2016) and in the Otago region specifically (Nixon et al., 2014; Smith, Humphreys, & Wilson, 2008). Longer travel times to primary health services have been

associated with lower service utilisation in rural areas (Hiscock, Pearce, Blakely, & Witten, 2008), and the geographical barriers associated with ruralism can exacerbate the inevitable difficulties that come with ageing. These include barriers of isolation, loneliness, transportation, and limited mobility (Chalmers & Joseph, 1998; Lilburn, 2016). Health and social services delivered directly to the homes of older people have been recently presented as the most effective approach for support for older rural residents (Ergler et al., 2017), as this eliminates the need for older individuals to travel and incur associated expenses.

Howard-Brown (2018) has suggested that Aotearoa New Zealand has a substantial disconnect between the stated government commitment to supporting those ageing in rural communities, and the support provided to the agencies engaged in meeting the needs of older rural people. One focus of the 2001 “Positive Ageing Strategy” was to ensure that older rural residents were not disadvantaged with regard to access to health care services (Ministry of Health, 2001). While the more recent “Healthy Ageing Strategy” (Associate Minister of Health, 2016) does not refer specifically to older people in rural contexts, its vision is that older people live well and age in place within aged-friendly communities. As Davey (2006) notes, ageing in place is favoured within policy on older people, and refers to the social and wellbeing benefits associated with older people remaining in their own homes and communities. Evaluations conducted in urban settings indicated that well co-ordinated, home-based packages can successfully support ageing in place (Parsons et al., 2012; Wiles et al., 2012).

Malatsky and Bourke (2016) suggested that, if these unique challenges are to be successfully met, rural health has to be understood within its own contexts. While rural communities are often characterised as being close-knit supportive environments, older adults who have decreased social capital (Keating & Phillips, 2008), chronic

health issues, and/or financial hardship are particularly vulnerable to the loss of social support and marginalisation (Wenger & Keating, 2008). Scharf and Bartlam (2008) noted that rural poverty can be dispersed and hidden, and just as in urban regions, rural older people can be subject to social exclusion. Additionally, social networks are not the same as support networks, and may not provide the tangible, emotional or functional support that older people require to age successfully in place (Wenger & Keating, 2008). Assumptions that community networks can compensate for the lack of rural services can disadvantage older rural people (Keating & Phillips, 2008).

The present research project was conducted by University of Otago researchers affiliated to the CARE Research Theme in collaboration with the Otago regional branch of a national non-government organisation (NGO) dedicated to the welfare of older adults in New Zealand, Age Concern Otago (ACO). In 2019, ACO established a 12-month, 0.5 full time equivalent (FTE), fixed-term social worker position in Central Otago to support older residents living independently (not in aged residential care) in the region. This position was established in response to evidence of a need in the region for a specialist social worker for older people over and above an existing Elder Abuse Response position. This NGO's need to understand the impact of this position provided the inspiration for this project. When this position was established, the role description for this position was deliberately written to be broad. ACO's intention was that the organisation would develop a role description for the permanent position based on the needs of the target population which would become apparent during the fixed term of the pilot position. In order to understand whether the ACO social work position was meeting the needs of older rural people in this area, we also needed to understand what those needs were. Therefore, the aims of this project were to: 1) identify the support needs of the older rural people living in rural Central Otago; and 2) evaluate

if these needs were being met by the ACO pilot social work position located in Central Otago. These findings were intended to inform ACO's decision regarding the continuation of its social worker position in this region.

The ACO social work position created in 2019 carries the official title of Central Service Co-ordinator (CSC) and is physically located in Alexandra, a small town of 3000 people and the hub for the Central Otago District Council and local business. The principal objective of the Central Service Co-ordinator role is to provide information and support to older people, their families and carers, and promote choice, independence, empowerment, safety, wellbeing and social participation. It also involves liaising with other services as appropriate. The majority of ACO clients in Central Otago are referred to the CSC by other agencies, particularly health professionals in the region but also by churches and the local ACO Elder Abuse Response social worker.

The region within the Central Otago jurisdiction lies in the lower South Island. It covers approximately 10,000 square kilometres and hosts a population of around 22,000 (Statistics New Zealand, 2020b). Rapid growth combined with inward migration by retirees and life-stylers has seen the population increase by around 40% in the previous 14 years. The percentage of the population over 65 years of age mirrors the national rural estimates for Aotearoa New Zealand. In Central Otago, 16% of the population is over 65, and 9.5% is over 80 years of age, while approximately 8% are Māori (Statistics New Zealand, 2020b). In addition to pharmacy, dental, optometry, audiology, physiotherapy and occupational services, Alexandra has two general practices and a small hospital with a 24-bed, in-patient acute ward that serves the Central Otago region.

Method

The first author conducted this project for a summer studentship over a 10-week period.

The study is situated within a pragmatic and interpretive theoretical approach (Kazi, 2000; Morgan, 2007; Schwandt, 1998) that reflected the real-world focus of the project (Anastas, 2004). As Anastas (2004) noted, qualitative research designs are particularly useful in understanding the needs of community members, client and stakeholders' perceptions of a service, outcomes, possible improvements and gaps in services and interventions.

The research design incorporated both interviews and observation (Braun & Clarke, 2013; Dobl, Beddoe, & Huggard, 2017; Dobl & Ross, 2013). The first author conducted interviews with community members who were clients of the CSC, with referrers to the ACO service, with the CSC, and with other key stakeholders in the community. She also spent a day observing the CSC at work while she visited her clients and met with other key support professionals in Central Otago. This approach provided a degree of methodological triangulation in several ways (Flick, 2018). It established that the CSC's assessment of client need in her jurisdiction, and of the issues faced by social workers were consistent with that of social workers based in other rural centres in the region. The observational data provided a context for the challenges facing older rural people who are struggling to remain independent. Client interviews supported key informant interview data with first-hand descriptions of what support they needed in order to remain independent.

Sampling and recruitment

The sample consisted of 12 participants (including the CSC): six older individuals (ranging from 70–95 years of age) living in Central Otago, and six key informants (comprising four other social workers in Central Otago referred to as social worker A, B, C, and D respectively, one senior member of the local district council, and one former social worker (E)). We do not provide further detail on the four key informant social workers in our sample in order to avoid

compromising their anonymity apart from noting that mental health and elder abuse are among their areas of expertise. We are unable to anonymise the CSC. While this sample size is modest, it was appropriate for the timeframe and the intensive work required for the study (Anderson, 2010). The client recruitment strategy was guided by the CSC who identified potential participants from her current caseload in the Central Otago region. Potential key informants were identified and recruited by the first author using government service websites and the professional networks of Age Concern Otago. In the 2–3 week period prior to fieldwork, project consent forms were distributed by the CSC. On the day of the interview, verbal consent for participation in the project was also obtained.

Although the sample was modest, client participants were purposively selected to illustrate the range of the CSC's caseload (see Table 1). This combination of purposive and convenience sampling illustrated, not only the varied cases which a CSC will support at any one time, but also provides a reliable indication of the different experiences of ageing in a rural community. The selection guidance by the CSC could be viewed as a conflict of interest. However, this recruitment strategy was pragmatic in light of the overarching aim and objectives of the project, and its dependence upon the CSC's clientele. Despite the potential for bias, it appeared to be the only avenue for identifying clients. Advantages of this approach were that the CSC could identify clients who were articulate and represented a wide range of support needs. Potential disadvantages were that we may have not gained access to clients who were dissatisfied with the service, or who were particularly challenging clients. Kazi (2000) noted that a limitation of both pragmatist and interpretivist approaches in social work research is too much emphasis being placed on the needs of stakeholders with the result that findings are neither broad nor holistic enough to capture the broader picture. We attempted to mitigate the risk of narrow

vision by recruiting a more diverse sample of referrers in the region and by recruiting a senior member of the local regional district council. The demographic profile of client participants is described in Table 1.

Data collection

Separate interview schedules were developed for client and informant groups. The former contained open-ended questions exploring clients' connection with the community, their needs, and the support available to them. The latter focused on the issues pertinent to referrers and the challenges referrers faced in their roles. Both interview schedules included questions on ageing in place in this particular rural community, the impact of the CSC position on older residents of Central Otago, and what gaps remained in the provision of aged support in rural areas.

All participants gave their informed consent prior to their inclusion in the study. Interviews with clients were conducted in the homes of the older rural residents, while the key informant interviews were conducted in the respective workplaces. The CSC introduced the first author to the client participant in their home and then left prior to the interview to ensure confidentiality. All client participants were offered the opportunity to have a support person present, and one participant's daughter chose to be present. *Koha* in the form of a store-bought cake was offered to client participants on the day of the interview to show thanks for participating in the project. All interviews were recorded and transcribed.

Data analysis

Our analytical framework was an adapted template organising style (Crabtree & Miller, 1999) that was oriented around the project objectives and the primary thematics from relevant literature on rural ageing in Aotearoa New Zealand and Australia. These included: issues facing older members of the Central

Table 1. Client Participant Demographics

1. Age Range	Number of Participants
70-75	2
75-80	1
80-85	1
85-90	1
90-95	1
2. Gender	
Male	4 (or 67%)
Female	2 (or 33%)
3. Self-reported ethnicity	
NZ/ European	5
NZ/ Māori	1
Other	0
4. Housing tenure	
Own their own home	4
Rental	2
Living independently	6
5. Marital status	
Single	3
Married	1
Widowed	2
6. Driving status	
Driving	1
Driving but limited to <80km	3
Recently not driving	1
Not driving	1
7. Health status*	
Good	2
Fair to limited	4
Poor	0
Awaiting or undergoing treatment	3
8. Additional support	
Family	3
Social group	2
Church	2
NGO/ DHB	6

Otago community (mobility, transport, service availability and access to services, affordability and poverty, accommodation, isolation (Lidgard, 2006)); the impact of the CSC position; and what gaps remain.

The analysis of the data followed a general inductive approach (Thomas, 2006).

This study was approved by the University of Otago Human Ethics Committee (Ref. D19-262). Additionally, the Ngāi Tahu Research Consultation Committee offered guidance on cultural competency and care of older people during the interviewing process.

Findings

Two major themes emerged from this research: (1) ageing in Central Otago; and (2) providing aged social support in Central Otago.

1. Ageing in Central Otago

Social identity and community. Being a resident of Central Otago was an important aspect of identity for all CSC client participants. Participants described a strong sense of community and inter-connectedness within their communities. A senior member of council said, “in these small towns people still care about you.” Participants all referred to the importance of membership in organisations such as churches, networks and clubs, friendship groups or familial support. One male client participant noted that, “once you have made a connection it is lifelong” in reference to participation in local social clubs. Similarly, the CSC commented that, “when the connection with the client and associated networks are strong then everything else works around that. The informal networks are extremely important.” Smith (2013, p. 17) identified this importance of belonging and participation as a strong value of rural communities. However, the closeness of these networks can create a barrier for outreach because of the potential for gossip and judgement. An Alexandra-based social worker noted:

The downside of living in small communities is the stigma associated with needing help. People tend to avoid seeking help because they don't want

assumptions to be made about them. (Social worker C)

Although most participants had family living locally, they also indicated that they could not necessarily rely upon them or were reluctant to request familial support. This might have been because they did not want to be judged as incompetent or become a burden to their families.

Isolation and loneliness. Declines in health and/or mobility issues can have an enormous impact on social participation, with social isolation being identified as a health issue facing many older people (Lilburn, 2016; Nicholson, 2012; Shankar, McMunn, Banks, & Steptoe, 2011; Wright-St Clair, Neville, Forsyth, White, & Napier, 2017). This was also identified by many participants as a major issue in Central Otago. One male client said, “then all of a sudden you can't walk. [...] You're old.”

One male client noted that “the biggest drawback is living alone.” Loneliness and isolation was an issue for many older community members according to key informants: “older folks feel as though they are doing it alone” (Social worker B). However, a senior member of the local council asked, “how are the services supposed to find people who isolate themselves?” This reflects that few older people self-refer to support services and speaks to a tension between respecting the privacy of community members, but also recognising the transition from independence and keeping to oneself into isolation and loneliness and reluctance to reach out or to let others in. It may also reflect that services are not connecting with potential service users: “I used to like going to work and buying things for myself. I do have my own independence but it's getting smaller [...] Because I'm getting old” (male client). One female client participant described struggling to care for her disabled husband:

Oh, it was awful. I was so exhausted, I went to sleep. Must have gone to sleep, and he

must have got out of bed, fell out of bed and had a turn, and he must have crawled into here, and he couldn't get up. He was calling me, "Help" [...] They just took him to the hospital and that was the end.

Housing and poverty. In this region, the costs of living can be high compared to large urban centres because of haulage costs for fuel and foodstuffs. While a winter electricity subsidy is available to those aged 65 and over, the severity of winters in Central Otago combined with high costs of electricity, gas, and firewood places additional pressure on limited incomes. A compounding factor is that older housing stock in Central Otago (as elsewhere in Aotearoa New Zealand) is damp and cold, and this also has a negative impact on the health of inhabitants (Howden-Chapman et al., 2012). The strong economic growth in Central Otago over the previous decade has created enormous pressure on local accommodation. Mirroring national trends, house prices in Central Otago have trebled over the previous 15 years with regional rates increasing apace, and housing affordability has become a major issue for all residents with limited incomes (Johnson, Howden-Chapman, & Equb, 2018; Southern District Health Board, 2019). The local council's attempts to interest developers in social housing programmes (Jones, 2017) have not yet been successful, and the council appeared ambivalent about its role in the provision of housing and which demographic (young or older adults) should be prioritised. Thus, the cost of accommodation was a key factor in the financial hardship described by all participants. For those renting, this was the cost of rents, while for homeowners, the escalating house prices in the region have been matched in increasing rates. Even if mortgage-free, homeowners have insurance and maintenance costs:

We're extremely expensive here for accommodation ... and there is a lot of people that are in the private rental area. [The CSC] had a situation a couple of weeks ago, where she became aware

of an elderly gentleman out in [another town] that was having to shift house. I don't know if he was being evicted or not. She, through the local real estate again, found him a house to rent, and it sounds like an old bach-type thing. Won't be insulated. (Social worker B)

One participant commented on the lack of suitable housing, criticising limited planning for the ageing population in his community:

I'd like to sell this [house] and go into a pensioner estate. I missed out this time [...] because there's heaps of people downsizing. I think they should build a lot more downsized houses for older people [...] It's not like the population who is ageing here has just turned up. They've always been here. They've [council] had time to plan for it but they just didn't and now it's a shortage. (Male client)

One major component of the CSC role was assisting clients in managing their finances. All client participants described having to be careful with their income. One male client participant told us: "I've finished up with no money due to one or two bad schemes. So basically my total income is a pension." While several client participants had state-funded home services such as cleaning and gardening, they described struggling to pay for health-related costs such as hearing aids. Participants often were unaware of what financial assistance was available. One female client described how the CSC arranged for her to receive several allowances that she was unaware of and did not know she was eligible for.

2. *Providing aged social support in Central Otago*

Service visibility. While local health professionals were aware of the ACO CSC service, it appeared to have a relatively low profile within the community:

Healthcare is the biggest referral agency for clients who require needs assessment

at home, or for someone who is not coping etc. but because she [CSC] has been in the community for a long time ... It's a lot of word of mouth. (Social worker B)

Despite the co-location of three agencies servicing the older population within a community centre, client participants had all been unaware of the availability of community social work services prior to their referral to the ACO CSC. One male client participant who had lived in the Central Otago community for nearly 20 years noted: "I think that it [social work services] probably needs more publicity that it's available. I'm not even sure with my connections that I would have found it." The relatively low profile of aged services was acknowledged by key informants. Support services (including social work services) were "silent agencies. There is still a limitation to our presence in the community and people not realising that we are here" (Social worker B). One reason for this might be the relative invisibility of older people in the community (Walker, Weare, & Tully, 2018). In addition, client participants' lack of mobility may result in not noticing the ACO services because they are not frequenting the community centre that hosts these services.

Meeting client need. As noted, the current CSC position is part time (0.5FTE). Being a highly mobile position means that the CSC can spend a significant amount of time (up to one hour) travelling to meet clients at the outer boundaries of her geographical jurisdiction. The CSC described struggling to meet the increasing demand for her services and the concomitant increase in caseload: "I visited 23 clients in November. Twelve of these were new referrals. Others were welfare or follow ups" (CSC). Ideally, the CSC would refer clients to other service and care providers once the acute issue or crisis has been managed, but this was not always possible because of broader service gaps in the region. ACO clients frequently have multiple and compounding problems and

cannot rely on other forms of community or familial support.

It is one thing to provide a good supportive service to the client in need and then hand over or leave the client to their current independence. But the reality is, you respond with a purpose for your visit but then you build rapport and ensure they feel safe and supported, through this, they open up and you begin to learn all of the other difficulties that they have. You feel obligated because no one else was aware (or told). It may be as simple as you just knowing the kind of help they need or who it is that they need to speak to, so they remain on your client list because they have no one else. (CSC)

The referrers and other social workers interviewed commented on the broad scopes of social work positions and the undefined boundaries of rural social work in general. In addition to time spent travelling and with clients, much of the CSC's work involved navigating the bureaucracies and administrations of government agencies and departments (particularly Social Development (MSD), Work and Income (WINZ), and Inland Revenue (IRD)) on behalf of clients. She also spent many hours searching local websites and newspapers for accommodation for clients.

[It's] the "one stop shop" nature of this position; the benefits are that you can see everything that is happening and needs which haven't been uncovered. However, it's very reactive; there is either not lot of work, and time would be spent doing prevention programmes or setting clients up with appropriate networks, or being swamped with no time to react or apply preventive procedures and instead the quality of care is reduced. (Social worker D)

Clients of the ACO service all spoke of the positive impact that the CSC had on their lives. The CSC was frequently described as

a problem-solving friend who filled social as well as service coordination needs:

It's really just all of the talking. Talking about money and issues and everything about me. If I need something, she goes around and talks to people and comes along with me. She drives me because I can't drive far. She just holds your hand all the way through. (Female client)

Another client participant said "it's good to know the support is there both as a friend and as a specialist person. She'd be the first person I rang if I had a problem. She picked up that I was getting depressed."

The social work participants commented that the high demand for support services meant that social workers in Central Otago tended to work in a reactive way attempting to address escalating problems for clients instead of setting up community programmes and interventions that would facilitate identification of and planning for looming crisis points ahead of an actual crisis.

The lack of long-term community care services to refer clients to resulted in the CSC working well beyond the usual scopes of social work roles (such as driving clients to church). This was viewed as an inevitable component of the rural scope of practice. Social work participants noted that one risk of such close support is that clients might become inappropriately dependent on their social worker:

Where your initial position is specific but within a few visits you become their most trustworthy contact and support and so, anything they need after that, you are organising, contributing, assessing, and evaluating. (Social worker D)

The danger then, as another key informant noted was that, "support outside of the social work role can become detrimental for the client if you then pull back on your support" (Social worker B).

Cohesion and integration among local service providers. The CSC had well-established professional networks, particularly with the social workers in adjacent jurisdictions and with other agencies in the region. Interestingly, just prior to our fieldwork, a new NGO had secured local funding and begun operating in the region providing networking and resources to older community members. Social worker participants acknowledged that there was room for other operators given the degree of unmet need, but also expressed concerns about the impact that another competitor for scant funding resources might have on existing services, and the degree to which the new operator would link in with them. This pointed toward the potential for fragmentation of services. Improved communication and linking between service providers was considered by social worker participants to be critical for improving client outcomes and improving workloads for social workers in Central Otago:

The effectiveness [of services] depends on the different agencies working together in sharing information, like an agency hub. We have to know who is in our areas. Other agencies need to help [...] For the community connectivity and social/ carer initiatives to work there needs to be more engagement from all of the agencies, there is still a sense of each agency working independently, resulting in [local] initiatives not reaching the wider Central Otago. (Social worker B)

Government departments and their local agencies were heavily criticised by social worker participants for poor integration and cohesion of services, and for not being user-friendly for an older cohort (by expecting them to conduct business by telephone or internet). This also encompassed poor communication and slow responses.

[The CSC] would help clients with various applications over the course of a week, then a week later the application

will be processed. The client can be waiting 2–3 weeks (after an event) for a response. (Social worker B)

Older people can find it very difficult to deal with centralised services because they frequently do not have internet connectivity (and quality of connectivity continues to be an issue in many rural areas), or the skills to access online services (Citizens Advice Bureaux, 2020) although numbers of older people using the internet are relatively high in Aotearoa New Zealand (Koopman-Boyden & Reid, 2009)), and can struggle with navigating helplines because of deafness. Of the six client participants, although some had a smart cellphone, none had access to a computer. One participant offered the solution of navigators within government departments to prioritise and assist older adults.

Within a service (e.g., MSD), it would be ideal to have a department or personal for clients over 65 yrs, or someone specifically for your district. (Social worker B)

Building a higher profile in the community was identified as another strategy that would improve the visibility of ACO social workers and their outreach:

There is still a limitation to our presence in the community and people not realising that we are here, and that we are amongst all of the other agencies—a community house. We could be working from home, it makes no difference. (Social worker B)

One suggestion was that a central hub or drop-in centre for older people (as the ACO hub in the regional urban centre has) would provide an opportunity for socialising, and for the agencies providing services to gain improved knowledge of the older people at risk in the community through the networking that such a hub would facilitate.

Ideally, community volunteers would be able to take over cases referred by CSC, and

work with government agencies on behalf of older people.

[There is a] lack of carers/volunteers and potentially still a large gap in healthcare entitlements; not knowing what you're entitled to or how to apply for more. (Social worker D)

With less acute work and a manageable caseload, the CSC would be able to work with volunteer programmes to assist with meeting the needs of older community members.

Discussion

Participants in this study indicated that, within Central Otago, increasing housing unaffordability, accommodation insecurity, mobility and transport issues, and financial precarity characterise life for many older people. This precarity drives a significant need for community support, and the current 0.5 FTE ACO CSC position is struggling to cope with the demand for aged social work services. While changing the infrastructural issues (health service accessibility, transport and accommodation) identified by participants is well beyond the scope of this project, suggestions for more effective support to older residents of the region include increased FTEs for specialised aged social work, and better coordination within and between government and NGO agencies in the community aged support spaces.

The Ministry of Social Development has recently updated the “Live Stronger, for Longer” policy with the 2019 “Better Later Life” policy (Office for Seniors, 2019). This document, like many other governmental policies, although age-specific, does not extend to rurality, nor does it specify the resources and specialised support professionals and social workers required for the implementation of such action points. We suggest that there remains a substantial disconnect between the government commitment to supporting older rural residents and aged-social-work in this rural

community and it is this space in which non-profit and non-government organisations such as ACO operate. Their ability to make a difference is dependent on short-term funding and this makes future planning very difficult.

Aldrich (2010) noted that NGO social work positions are generally not well-resourced compared to government positions; however, there are benefits (Smith, 2013). Government-funded social work positions have prescriptive scopes of practice that result in top-down social support which make it difficult to meet a rural community's needs. NGO social work positions can be more responsive to community needs because they have less rigidly defined role descriptions and their practice is bottom-up (Smith, 2013).

The rural context is what makes social work unique in rural communities (Smith, 2013). Because rural social workers are also members of the communities they serve, they are likely to encounter clients and potential clients at local social events and gatherings (Pugh, 2007). This community connectedness makes the boundaries between personal and professional lives less defined in rural social work than they might be in urban social work (Brand & Kesting, 1999; Green, 2003; Pugh, 2007). Taking a client to church is a good illustration of this. Pugh (2007) commented on the "urbanism" that infuses formal social work practice and policy on boundary setting, yet this is impractical in rural social work. The maintenance of formal professional boundaries (a neutral and detached stance towards the client) can impede relationship-building and the development of trust (O'Leary, Tsui, & Ruch, 2013; Pugh, 2007). O'Leary et al. (2013) suggest that a more authentic model of boundaries in social work should promote connection (within ethical parameters) rather than professional distance and separation. The social support relationships described by both the CSC and her clients provide examples of this model. These relationships were characterised by high degrees of

trust, respect, safety, dignity, kindness and compassion. Hirst (2019) argued that one potential risk of blurred boundaries is burnout. Managing burnout before it occurs is one benefit of professional supervision in social work and of peer support (Hirst, 2019). Ideally, social workers in rural areas would provide strong peer support to each other, beyond government and NGO boundaries of their jurisdictions.

Aldrich (2010) argued there is a growing need for dedicated specialist social workers to service older people within communities. The value of specialist social workers for older people lies partly in the practical scope of their practice. According to Foster and Beddoe (2012), this includes managing cases of elder abuse and assisting older people in dealing with issues of grief and loss. These specialist roles can coordinate healthcare and services for older people and assist with transitions between primary and secondary care. Another key value lies in the social worker's ability to challenge ageism through advocacy and education (Aldrich, 2010). This includes improving the visibility and value of older people within their communities, thus empowering older community members (Lloyd & Sullivan, 2018).

Effective social work for older people also requires a unique skillset that is underpinned by strength-based models of practice (Aldrich, 2010; Foster & Beddoe, 2012). This includes an eclectic knowledge base with an understanding of mental health and psychosocial issues in older adults, and family issues (Aldrich, 2010). Familiarity with healthcare and welfare systems and processes, as well as financial and legal structures and provision of public and private supports is also necessary (Aldrich, 2010). Core competencies include the ability to organise and mobilise community support and strengthen community networks. Foster and Beddoe (2012) identified communication and facilitation skills as requisite. A thorough knowledge of the community, its character and traditions are essential for those working in rural areas (Pugh, 2007). The scope and

competencies of the ACO CSC role in Central Otago appeared to be well aligned with these values and specialised skillsets. Pugh (2007) notes that another core competency in the Aotearoa New Zealand social work setting is cultural sensitivity. The social and health disadvantage that older Māori have experienced during their lifetime persists into old age (Teh et al., 2014). Aldrich (2010) noted that the “Positive Ageing Strategy” (2001) affirmed Māori values in future policy and committed to strengthening capability in older Māori and including whānau in decision making. The structural violence inherent within government institutions and organisations means that older Māori adults may be distrustful of government agencies (Aldrich, 2010). This is a strong rationale for the provision of Māori specialist social work services for older Māori.

The concept of *precarity* is relevant. It has traditionally been defined in terms of employment and income insecurity and is used recently to refer to the trajectory of growing old (Grenier et al., 2017; Grenier, Phillipson, & Settersten, 2020), which is characterised by risk, vulnerability, uncertainty and instability (Grenier et al., 2017; Groot et al., 2017; McCormack & Salmenniemi, 2016). Precarity is apparent at several levels in our research. At the micro level, many older people in Central Otago are living precariously because of financial and housing insecurity (Southern District Health Board, 2019). Health status for older individuals can be highly precarious because relatively minor losses in function can result in significant health deficits and loneliness (Settersten, 2020). The relative invisibility of older people has been well documented (Mordini & de Hurt, 2010; Office for Seniors, 2016; Williams, 2007), and the low social and economic value of aged care work has been attributed to the low social value of older people (NZ Labour Party, Green Party of Aotearoa NZ & Grey Power NZ, 2010). Fine (2020) described the public invisibility of care services for older people as another form of precarity. It is tempting to suggest that the public invisibility of the Central

Otago ACO services for older people reflects this phenomenon. At the meso level, the operation of NGOs is precarious because the delivery of services is dependent upon securing sustainable funding. This, in turn, results in precarious, insecure short-term and part-time support positions. Such employment conditions combined with the demands of escalating caseloads can lead to burnout in professionals (Hirst, 2019). While there is strong demand for additional front-line support in Central Otago, an increase in service providers may lead to increased competition for the limited available funding and fragmentation of service delivery. Macro level precarity is evident in the competing priorities of local regional district councils regarding decisions about where to place limited resources. This means that opportunities to grow business and rates revenue in rural communities may take precedence over providing services for older people.

Initiatives have been taken by some urban district councils to create age-friendly communities (SuperSeniors, 2020). Priorities for these initiatives include addressing the built environment and outdoor spaces, transportation, housing, social participation, respect and social inclusion, civic participation and employment, community support and health services. These priorities are all applicable to the small rural communities of Central Otago. Successful age-friendly community interventions have the potential to mitigate some sources of precarity for older rural people yet require long-term commitment of financial resource by both central and local governments. Without it, the ability for rural older people to not only age in place in their own communities, but for these communities to be a good place to grow old (Keating, 2008) may continue to be a precarious ambition.

Conclusion

Availability of, and access to, health and government services, combined with distance, mobility issues, accommodation

insecurity, and poverty provide challenges for those ageing in a rural community. As the population ages in Central Otago, the proportion of older people living precariously in this community is likely to escalate, along with demand for specialist aged social workers. Our research indicates that social workers such as the ACO CSC have a strong positive impact on older people's wellbeing in this region, yet such positions are themselves precarious. A strong case exists for establishing specialist aged social work services in rural areas. However, effective support to older rural people also requires coordination within and between government and NGO agencies in the community aged support space.

Acknowledgements

This research was supported by an Otago Medical Research Foundation–Aotearoa New Zealand Private Summer Scholarship, and by the Rural Aotearoa Research Network, established through the 2017 Research Development Investment Award from Health Research South, Otago Medical School, and University of Otago. We are particularly grateful to the support provided by Age Concern Otago and the University of Otago CARE Research Theme. We would like to thank all participants for their generosity in agreeing to take part.

Accepted 16 October 2020

Published 15 December 2020

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Accessing social service support: Barriers experienced by Chinese migrants living in Auckland, Aotearoa New Zealand

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ABSTRACT

INTRODUCTION: According to Census 2013, approximately 25% of Auckland's population is Asian, with the majority of these being Chinese. Given that Aotearoa New Zealand's population is ageing, it can be expected that there will be a significant demand for aged services for Chinese older adults in our local community in the future. Exploring the language barrier encountered by retired and aged (65+) Chinese migrants living in Auckland is needed.

METHOD: Two focus groups were interviewed with retired Chinese migrants (group 1) and local social service practitioners (group 2). The focus group topics included the living experience of Chinese migrants in Auckland in Aotearoa New Zealand, while local social service practitioners reported their daily work experience of serving Chinese older adults. A short, warm-up, oral questionnaire stimulated discussion in each group. Data analysis was used to identify themes and draw tentative conclusions about the needs of older migrants and suggest how local aged-services providers could better serve retired Chinese migrants.

FINDINGS: Language barriers and transportation problems were commonly agreed to be obstacles that hindered retired Chinese migrants accessing social support and health services. More input was needed to improve their general English language proficiency to facilitate their daily lives and participation in social life in Aotearoa New Zealand.

IMPLICATIONS: Findings from the research have the potential to be an important resource for local social service practitioners, giving them a better understanding of older Chinese people.

KEYWORDS: Retired Chinese migrants; quality of life; social support; barriers to accessing social support; immigration; aged service

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Since the 2000s, Aotearoa New Zealand has had a significant increase in population from Chinese migration. Auckland, as the biggest city in Aotearoa New Zealand, is the main place migrants choose to settle. As a result, Auckland has become a superdiverse city and is now home to speakers of 160 languages, with this population diversity likely to increase over the next decade (Statistics New Zealand, 2013). Statistics

New Zealand (2013) reports there are seven common languages spoken by multilingual people in Auckland region: English, Samoan, Hindi, Northern Chinese, Māori, Yue and Tongan. Some of these languages have different dialects that may hinder communication—for example, Yue is spoken differently between Hong Kong and Guangzhou, and Mandarin differently between Taiwan and Mainland China.

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WORK 32(4), 131–144.

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The increased number of Chinese migrants has resulted in “Asian” becoming the second largest ethnic group in Aotearoa New Zealand, after European (Stats NZ, 2017). Apart from the “European and Other” groups, the Asian ethnic group is forecast to surge the most between 2013 and 2038, with its population projected to grow from 540,000 in 2013 to about 1.4 million by 2038. By 2023, it is expected that there will be more Asian Aucklanders than Māori Aucklanders, and it is anticipated that Asians will make up 22% of the total number of people in Auckland by 2038, followed by Europeans and others. In other words, it is foreseeable that a larger number of immigrants from China will be concentrated in Auckland (Li, 2014).

At the same time, it should be noted that ageing populations are a critical issue throughout the world. In Aotearoa New Zealand, 14.3% of the population was aged over 65 years at the time of the 2013 Census, and this proportion is projected to rise to about 26.7% in 2063 (Statistics NZ, 2015). With the increasing number of Chinese migrants living in Auckland, social services for Chinese migrants aged 65+ will be one of the future challenges facing social workers and other social service practitioners in this country.

Communicating in English is one of the most common difficulties facing migrants from non-English-speaking countries; it is also a common indicator of how well a migrant is adapting to their new cultural environment (Wang, Schwartz, & Zamboanga, 2010). This study investigated the language barriers

retired Chinese migrants aged 65+ face accessing social support in Aotearoa New Zealand; exploring the perceptions of local social service practitioners concerning delivering services to retired Chinese migrants. Its findings highlight concerns about the current effectiveness of aged-care services in New Zealand and so help to increase the general well-being of aged people living in this country.

Background

Auckland is New Zealand’s largest city and has the largest proportion of migrants in the world. In 2009, about 40% of Auckland’s population were immigrants (Spoonley & Butcher, 2009). From 2000 to 2008, over 63,000 Chinese residents were granted permanent residence. Of these, some had moved to Aotearoa New Zealand via business investment migration categories. According to statistics from Immigration New Zealand, Chinese applicants made up nearly 75% (7286 out of 9672) of the business investment migrants approved. Many Chinese students who completed their three- to four-year study in New Zealand were granted permanent residency. At the same time, there was a gradual increase in the number of Chinese “Family Parent” migrants to New Zealand. According to Department of Labour figures, China had more permanent residence approvals under the “Family Parent” scheme between 2004 and 2017 than any other country (see Table 1). The ratio of approvals to Chinese migrants rose significantly from 21% in 2004/05 to 55% in 2011/12, and then to 60% in 2016/17. Although this pathway ceased in

Table 1. New Zealand Permanent Residence Approved Through Parent Category: 2004/05 to 2016/17

Year	2004/05	2005/06	2011/12	2012/13	2016/17
Total	2776	4400		4601	3840		1820
China	583	1232		2171	1684		1092
%	21%	28%		47%	43%		60%
Ranking	1	1		1	1		1

Source: Ministry of Business, Innovation and Employment, Migration Trends and Outlook 2004/05–2016/17.

2016, it has brought a great number of older Chinese people to New Zealand.

The coverage and effectiveness of related social support and aged services for this large number of retired Chinese migrants will become a critical issue, not just in Auckland, but the whole country, because it will directly affect the retired migrants' well-being. To enhance the level of social support for retired Chinese migrants, it is necessary to explore the difficulties they face accessing social support and also the barriers to local aged-services practitioners serving retired Chinese migrants.

Literature review

Acculturation strategies theory suggests that immigrants adapting to a new environment need to deal with the potential struggle between the person's own culture and that of the mainstream (Berry, Phinney, Sam, & Vedder, 2006). Some of the conflicts can be easily settled, like changing one's eating habits, clothing and certain behaviours, while some cannot, and will lead to different levels of *acculturative* stress (Berry et al., 2006).

Research conducted in Australia reported that that elderly Chinese migrants in Brisbane is relevant to the concerns that motivated this current Auckland study of older Chinese (Ip, Lui, & Chui, 2007). Ip et al. conducted a community survey and five focus groups, three with different groups of older people in the Chinese community of Brisbane, one with adult children of older Chinese, while the fifth group included service providers, community leaders and health-care practitioners. The older Chinese-Australians and adult-children groups explored perceived and relative needs, while the service providers were encouraged asked "to concentrate on normative and expressed needs" (p. 724). Ip et al. found that half of their survey informants lived with their adult children, while all the older Chinese focus group participants were living with their adult children and their social

networks were very restricted, especially the women's. More commonly, participants had little contact with their friends, with nearly one third reporting they seldom or never met their friends. Some older adults also reported that they felt uncomfortable using the phone for cost reasons or because they were worried about being seen as preventing incoming calls to others in the household (Ip et al., 2007).

Language and mobility problems are also behind retired Chinese migrants' social isolation. The Brisbane survey found that participants generally had a poor command of English even though 42% had completed secondary education or higher (Ip et al., 2007). A sizeable proportion of the female participants were not able to write and speak English and none considered herself capable of writing or speaking English effectively. Although many had enrolled in English language classes, they had usually quickly dropped out because they found it very hard to learn a new language. They explained their belief that their age made it difficult for them to learn new things (Ip et al., 2007). The language problem negatively impacted on their confidence to go out alone—for example, to visit friends or take part in social activities—which, in turn, lowered their self-esteem and worsened their social isolation. This had seriously restricted their communication with non-Chinese speakers and stopped the retired Chinese migrants from participating in special events and programmes for aged people organised by Brisbane City Council (Ip et al., 2007).

The experiences reported by Ip et al. can also be found in New Zealand. For example, professionals anecdotally note that older Chinese, when they are ill, prefer to consult Chinese-speaking doctors and can be severely disadvantaged when accessing health and other social services. They find it difficult to access information about free services and amenities for older people because most of these are advertised in English (K. Quan, personal communication, February 11, 2019). A medical practitioner

in the Brisbane survey mentioned that it is hard to find specialists who can speak both Chinese and English (Ip et al., 2007). And, although a qualified interpreter can interpret effectively and accurately to Chinese patients about their medical conditions, many retired Chinese insist on relying on their adult children to provide interpretation and their children have difficulties understanding medical jargon. This confusion can result in the need for additional visits, which cost both time and money (Ip et al., 2007).

The results from the Brisbane survey revealed that the language barrier experienced by retired Chinese migrants living in a foreign land leads to many different problems in their daily living, although the migrants do not all experience the same problems (Ip et al., 2007). For example, retired Chinese migrants find it difficult to get involved in local groups and are disengaged with social support services because such services are not commonly found in China. No local research in Auckland could be found that explored how different languages available in social services influences aged-care delivery to elderly Chinese migrants. Therefore, this study aimed to explore these concerns within the Auckland setting, and in doing so, the study's findings will provide a valuable reference for both policymakers and service providers in Aotearoa New Zealand.

From social support for older people to the quality of life

Cummins (2005) suggested that a range of elements, from general to specific, make up the concept of quality of life. They are common to all people regardless of their culture and socio-economic status; for example, individual health. Specific components, however, can vary between different people. Farquhar (1995) found that many older people agreed that connections with others or the community are significant to their quality of life, while Higgs et al. (2005) found that older people have a tendency to rate how healthy they

are as more important than how many assets they own. Other scholars have also discovered that support from family and the neighbourhood are more important to ethnic minorities than to majority populations (Bajekal, Blane, Grewal, Karlsen, & Nazroo, 2004; Chappell, 2007; Remennick, 2003). It is argued that the quality of life of older Chinese migrants should be explored within the migration context because they face significant changes to their living environment and are exposed to different cultures when they relocate, and these changes potentially have a critical impact on elderly migrants' perceptions of their quality of life. As social support is an important component of helping retired Chinese migrants manage the difficulties of living in an unfamiliar environment, it is necessary to investigate the relationship between language difficulties that complicate accessing social support and achieving a quality of life.

Method

The aim of this study was to explore the language barriers that may be encountered by retired and aged 65+ Chinese migrants, living in Auckland who wish to participate in their local community. In addition, the perceptions of aged-services practitioners serving retired Chinese migrants about their needs were sought. Qualitative methods were used to enable these research participants to voice their subjective perceptions of social support. This methodology allows the researcher to identify the most influential components in social support and evaluate the elderly Chinese migrants' overall "satisfactory" level of social support. Interviewing the practitioners' group also provides an opportunity to identify the most critical obstacles that reduce the overall effectiveness of their aged-services delivery. The use of interviews enables broader investigation of the experiences the participants have run into, recognition of their understandings of social support in their migrant context in a new country, and clarification of the

differences between service receivers (the elderly Chinese migrants) and service providers (the aged-services practitioners).

This article is based on a research study completed and submitted for a Master of Social Work degree at the University of Auckland. Ethical approval for the study was sought from the University of Auckland Human Participants Ethics Committee, and approval given for the study to proceed.

Five participants in the Chinese migrants' group were recruited with the assistance of Age Concern Auckland, while the five participants in the practitioners' group were staff members of Age Concern Auckland. The criteria employed to recruit the elderly Chinese migrants were: they had migrated from Mainland China at least one year ago; were aged 65 or above and retired. Those for the social workers or practitioners were: born in Aotearoa New Zealand; practising in aged service; and involved in serving or contacting Chinese clients.

The two groups were interviewed separately in suitable, comfortable community locations. The Participant Information Sheet was provided in Mandarin and Cantonese. The broad questions were indicated on the information sheets. Table 2 sets out the topics explored in the focus groups.

The focus groups took between 40 and 60 minutes. All focus groups were digitally recorded and transcribed. The data were then coded and simple thematic analysis were applied. Post-analysis translation was also done in order to help to avoid any distortion of meanings missed when data were translated from Chinese into English.

Four women and one man, all aged between 68 and 75, were invited to participate in the focus group of Chinese migrants. All of them had migrated to New Zealand from China (one from Hong Kong) more than a year prior to the focus groups.

Three women and two men from social service Age Concern Auckland participated in the focus group of practitioners. Four were European and one was a Pacific Islander. They had all been practising in aged service for more than a year. English is the main language of their daily work and none of them can speak a Chinese language.

Findings

Several main themes were developed from the transcribed interviews. English language proficiency mobility and transportation, financial concerns and related to barriers to social participation were identified in both the experiences of the retired Chinese migrants and the perceptions of needs identified by the local practitioners.

The retired Chinese migrants

Four of the five retired Chinese migrants reported that they had experienced serious communication problems in their everyday lives in Auckland. Adapting to an English-speaking country has been difficult for them, although they had arrived in Auckland between five and 20 years ago.

The study participants said they had unsuccessfully searched for English language classes, which implies that the support available is not effectively linked to the targeted people. Although some information

Table 2. Focus Group Topics

Group of Participants	Area explored
Chinese Migrants' Group, age 65+	Barriers of accessing social support including language, mobility, financial problems, resources and recreation needs.
Aged-services Practitioners' Group	The experience of providing services to Chinese migrants and the perceptions of the needs of aged services.

can be found at Citizens Advice Bureaus, retired Chinese migrants felt uncomfortable seeking help or information from outside of their Chinese community. Even if plenty of information can be found online, none of this information was available in a Chinese language. Thus, the retired Chinese migrants in this study reported a lack of support for them to learn the English language.

Chinese migrant participants reported that the language barrier also contributed significant or moderate difficulties in travelling around the city. Due to the challenge of driving in Auckland with unfamiliar road rules and navigation concerns, all the participants reported regular use of public transport. However, their responses indicated that they were unhappy with Auckland's public transport system as it was not meeting their needs and thus posed a very significant barrier to their well-being. Older migrant participants faced difficulty if they became lost in Auckland because they could not communicate with public transport staff in English.

As part of their group interview session, the elderly Chinese migrants discussed how the language barrier affects different areas in their daily lives; for example, when accessing health services:

Shopping in a grocery normally does not involve any language problems because you just need to pay money and no need to speak anymore. But seeing a doctor or living in a hospital will be a big problem. I cannot understand their questions and then I cannot answer them correctly, such as asking me if I have any food allergy. (Mary, 70)

While new technology offers many smartphone aids to improve daily life, it was apparent that not every retired Chinese migrant was able to use smart devices to assist their daily life. Some were still struggling with the language barrier even after residing in Auckland for up to 20 years. For example:

Communication with others in English language is nearly impossible, but just for everyday life is still fine and I will try to express the meaning by body language if necessary. (Susan, 72)

Participant 4 said there is very little difference in their English language ability now compared with when they first arrived in Auckland:

We [with male participant 5] are just learning it step by step slowly and word by word, and easy to forget what I have learnt easily. You know, for an old age person like me, learning a new language is not an easy thing. I think I have spent at least five years to make myself feel a very little difference ... hearing or understanding a little from others. But I still find hard to tell the others what I am thinking about. (Tracy, 68)

Nearly all the participants expressed that it would be impossible for them to live in any cities outside Auckland where there are not sizeable Chinese populations. For example:

It is nearly impossible for me to live in another city without a sized Chinese community. In Auckland, we can find Mandarin-speaking staff in bank, Chinese grocery. Without these staff, it would be much more difficult for us to live. (Tony, 74)

During the group discussion, the participants talked about what made their everyday life in Auckland difficult. Interestingly, they discussed their expectations for improvement in family and home support services:

Family support services should be improved because many old people are living alone. This is particularly high risk for people who do not speak English language. Nobody can acknowledge the accidents and ... older people cannot call 111 by themselves because of the language barrier. (Tracy, 68)

The participants' comments indicate that the mobility of retired Chinese migrants is limited by Auckland's disappointing public transport system. One of the study participants from East Auckland said she would not go to other parts of Auckland unless she needs to see her family doctor in the west. There was a feeling that English language training should be provided by the New Zealand Government to tackle the communication difficulties migrants from non-English-speaking backgrounds experience:

I think the New Zealand Government can offer more support to the non-English-speaking migrants like us to improve their English language. In China, many Western people working in Beijing and Shanghai can speak Mandarin very well and they live in China very well although Mandarin is hard to learn. Thus, I hope the local government can employ more English teachers, who can speak Mandarin also, to make us learn the English language easier. We only expect to pick up some basic level of English language for daily living. You can predict ... how much ... money the Government can save from offering the translation service to us if we can manage the communication problem by ourselves. (Tony, 74)

The practitioners

Although all five aged-services practitioners indicated that they find it difficult, or very difficult, to serve retired Chinese migrants, their responses indicated that only one of the participants works with retired Chinese migrants regularly. This practitioner felt it was very difficult to serve retired Chinese migrants because they generally have no idea about the service systems in Aotearoa New Zealand. One practitioner explained that she needed to take much more time to explain what is happening in each stage of the service.

Generally, the aged-services practitioners perceive the social connection of the retired

Chinese migrant to be moderate. Also, they thought that retired Chinese migrants would find it difficult to integrate into the local community even if they are actively involved in their Chinese community, because retired Chinese migrants who cannot speak English are much more likely to experience difficulty accessing social support in Auckland.

Some of the practitioners recognised that support for those working with retired Chinese migrants is insufficient because there are not enough Mandarin- or Cantonese-speaking social workers or support workers in their organisations. As a result, Chinese staff are burning out.

They're [social workers] burning up because of the demand for the service, whatever it may be—translation—whatever it may be ... the demand is just ever-increasing and unless we increase the amount of services, those people are just gonna, I think, burn out all the way and something else. It's just too much. (Christine)

In addition to Mandarin- and Cantonese-speaking staff having unfair expectations placed upon them, the lack of long-term funding was mentioned as another reason practitioners feel unsupported:

There's not enough support within the organisation to support them [staff in the Asian service team], and it could be a really, really difficult situation she finds herself in because she happens to be the only person that can support Chinese language people and so she will get everything thrown at her, and we are expecting it is a burnout. There is not sufficient funding, full stop. But also, there is not enough commitment to long-term funding ... supporting Chinese migrants is to build capacity ... and you can't build capacity if you are scrambling around for a bit of funding every few months. What you do is you basically just pay for person X, but you are not going [to] bother to train them ... because

you don't know when the next funding's gonna come through. (Peter)

Besides the challenging working situation experienced by the Chinese-language-speaking staff, overall support for Chinese community organisations was also seen as an issue. It is believed that these organisations can be an important resource for older Chinese migrants simply because there are no language or cultural barriers between the staff and the elderly migrants. Unfortunately, say the practitioners, current support for these Chinese agencies is insufficient:

They [Chinese community agencies] don't have funding. They struggle to get social workers and so we are expecting them to be able to support a community, but we are not supporting them to develop their own capability. And yet it is a vicious circle that continues that you need to do this, but we are not gonna help you in funding. (Peter)

Just as the retired Chinese migrants noted that the language barrier has a significant effect on their daily lives, the aged-services practitioners were also concerned about this issue. Language difficulties are not only limiting retired Chinese migrants' access to social support but also hindering the ability of aged-services practitioners to engage with older Chinese migrants. Furthermore, the perceptions of the service providers around this problem also play an important role in their delivery of social support services.

Due to language difficulties, social support from the Chinese community at large and from the migrant's own family were viewed as crucial resources that can enhance the general well-being of retired Chinese migrants living in Auckland:

I think for the retired Chinese migrants who [are] supported by their family and [who have] good connections within their community ... they are actually well supported, there's a lot of activities and community support to them. (Peter)

The aged-services practitioners all agreed that language difficulties play a key role in the problem of social isolation experienced by retired Chinese migrants in Auckland. If retired Chinese migrants are not connected to a social support service with Chinese-language-speaking staff, then most would be isolated at home.

Seeing a doctor is another issue when the language barrier creates difficulties:

For example, you get sick, they don't really know which doctor you can see. One had to travel from West to East and she had to wait for one month to see the doctor. (Betty)

One of the practitioners said that difficulties recruiting qualified Chinese-language-speaking social workers have limited the expansion of support services for retired Chinese migrants:

...because lots and lots of agencies or organisations in New Zealand are quite small, they can't afford to employ Chinese and so some always end up are missing out. (Peter)

While the aged-services practitioners pointed out many of the problems faced by retired Chinese migrants are related to difficulties with the English language, it does not mean that tackling this problem will necessarily and entirely improve the overall well-being of retired Chinese migrants living in Auckland. Their general awareness and understanding of the whole aged-services system in Aotearoa/New Zealand was also a concern. For example:

I had to explain to her [a retired Chinese migrant client] and everything the translation of things. It should be a very simple process but took us over two hours; still couldn't finish it. Although you speak the language for some people, it's more than just translating the information to them. (Peter)

Comparing findings from both groups

The findings from both groups, the retired Chinese migrants and the aged-services practitioners, can be compared to highlight any differences for further discussion, because both perspectives are important in understanding the identified needs.

Participants from both groups perceived the language difficulties experienced by retired Chinese migrants in Auckland quite differently. While the migrants saw the problem in terms of their carrying out activities of daily living beyond Chinese speaking environments, the practitioners saw the concerns in relation to professionals' engagement with Chinese migrants. Migrants do not see their difficulty in speaking, reading and listening to English as a problem provided they remain living in Auckland and stay close to the migrant community. This is because most are able to get to Chinese grocery stores and restaurants, choose to see a Chinese-language-speaking doctor, engage socially in the Chinese community and live in their own ways. The retired Chinese migrants explained that the language barrier becomes most problematic when they are engaging in the health care system in Auckland; for example, seeing a doctor or having treatment in hospital, a concern shared by practitioners in the study.

However, the language problem faced by the older Chinese migrants was perceived by the aged-services providers as a higher-ranking issue. They said, in their experience, that older migrants who are not able to communicate in English were most likely to be isolated at home and their neighbours might even find it hard to see them. Even if any agencies are willing to provide services to older Chinese migrants, the organisations cannot afford to expand their own current services because of insufficient funding and a shortage of Chinese-speaking practitioners. This clearly suggests that the Chinese community in Auckland is the most important support resource for those

Chinese migrants who face English language barriers. In addition, it may explain why most of the older Chinese migrants do not move out of Auckland. Although speaking Mandarin or Cantonese is fine for people living within the Chinese community in Auckland, moving beyond their bounded suburb or even community it is commonly agreed to be problematic. This led to a common view amongst practitioners that retired Chinese migrants need help to learn English in order to tackle many different problems in their daily lives, particularly when they need to access health care.

The most interesting finding is the different expectations of aged-support services for Chinese migrants. While the service providers focused more on the sustainability of the service, the service users paid more attention to the way the various services were delivered and who could get support. The retired Chinese migrants said in their focus group discussion that more attention should be paid to the criteria determining who gets support, as well as the quality of the service. As noted above, the migrant participants strongly link their lack of English proficiency to their dependence on family and would also like more funded English language classes where they can learn basic English, so they can cope with issues arising from daily living by themselves, rather than relying on their children.

Discussion

This study found the English proficiency of older Chinese migrants does not generally meet Immigration New Zealand's expectation of language competency as outlined in its policy. This mismatch is noticeable in the communication difficulties experienced by both the retired Chinese migrants and the practitioners serving them. In fact, all the retired migrants reported difficulties dealing with health-related services such as seeing a doctor, staying in hospital, and communicating with health practitioners. Comments

from the aged-services practitioners give insight into another possible reason for this situation. While the English language level of the retired Chinese migrants in Auckland is in doubt, their overall low education level (including the retired Chinese participants of this study) may also be an obstacle that limits their understanding of what the doctors or nurses are talking about. In other words, even if the retired Chinese migrants can handle basic communication in this country, they may not understand the actual meaning of conversations about diagnosis and treatment with others due to their lack of knowledge in a particular field. This is compounded further when the elderly person's basic English language skills are poor or non-existent. As a result, family or the adult child will be the most significant sources of support for the retired migrant's daily living in Auckland.

In fact, some older migrants were concerned with the eligibility criteria for applying for a place in a retirement village, saying that they do not want to bother their adult child too much. While they did not like the idea of living in a community of aged people and expected they would not find it easy living in a retirement home, the older Chinese migrants felt frustrated with their current situation and wanted an improvement in home-help service. The focus group participants' comments suggest that retired Chinese migrants are experiencing a critical loss of power and independence after moving to a new environment. Very few of them felt confident or able to master the English language, nor did they find it easy to integrate into the local culture. As a result, the retired Chinese migrants felt isolated in their lives with their adult children and reported little social participation in their local communities echoing the findings of Ip et al.'s Brisbane study (2007). Many retired Chinese migrants relied largely on their adult children to cope with tasks that must be performed outside the household and, as a result, feel they lack independence. This, in turn, leads to elderly Chinese migrants feeling burdened by family obligations.

Many of the adult children of these retired Chinese migrants were working full time to support the whole family and so the elderly parents in this study felt they had to, in turn, support their adult child's family through, for example, babysitting and housework. This obligation to their adult child's family constrained their own lives, and the needs of the older parents were sometimes overlooked. In other words, it is argued that the promised family support required by the immigration office is, over time, not an effective way to promote quality of life for retired Chinese migrants.

In addition, the retired Chinese migrant participants indicated during their focus groups that language problems are more problematic when they enter the health system, beyond their Chinese-speaking GPs, for example. Challenges in navigating the health system also takes up much of the aged-services practitioners' time, translating and explaining the situation to the service users who cannot understand or communicate adequately in English. Therefore, due to the current number of retired Chinese migrants in Auckland and the fact that this community is growing, resources are needed to enable the recruitment of on-site translators and Chinese-language-speaking general practitioners in clinics and hospitals. Personnel for both these roles could be recruited from overseas, with a qualification assessment procedure. Referencing Australia's skilled migrants' system, if a Chinese-language-speaking person is qualified to take up the position, under the point-test scale system, Auckland Council could nominate that person to get residency on the grounds they will be using their professional skills to benefit Auckland's Chinese population. Additional requirements could be added, such as the minimum period the applicant needs to stay in Auckland.

In addition to the above, comments from both the elderly Chinese migrants and the social service practitioners in their respective

focus group interviews suggest the current immigration policy indirectly limits the possibility of retired Chinese migrants living anywhere other than Auckland; for example, in Hamilton or the South Island. The social services practitioners all agreed that the strong Chinese community in Auckland provides significant resources of social support to the Chinese migrants living in that city. With the larger-in-scale community, the retired Chinese migrants can live in their own traditional Chinese way and communicate with Chinese-language-speaking people. They perceived that, even if retired Chinese migrants were to move to Hamilton, just two hours' drive from Auckland, it would be very difficult for them to adapt to living in Aotearoa New Zealand because there are fewer Chinese stores and restaurants in this Waikato city, the Chinese community is smaller, and there is insufficient support in health services for Chinese-speaking residents. For these reasons, and particularly because of the language barrier, both practitioners and retired Chinese migrants interviewed for this study all agreed that older Chinese migrants faced barriers to moving beyond Auckland city.

The large number of Chinese living in Auckland has already impacted on aged-services practitioners. This study has revealed that some of these practitioners find it stressful assisting retired Chinese migrants, not only because of the time it takes to translate from English to their native tongue, but also because the practitioners have to spend a lot of time explaining the health system to retired Chinese migrants, which the practitioners do not expect to have to do as part of their duties. Moreover, because the government does not fund specifically for the provision of Mandarin- and Cantonese-speaking social workers, when a person is employed who can speak a Chinese language, then they are expected to provide nearly all of the service needs of the retired Chinese migrants no matter whether they are qualified to do the task. This stressful situation is further compounded because

the team of the organisation the practitioner works for is generally unable to provide additional support to that staff member.

Auckland's transportation systems were also identified as posing a barrier to retired Chinese migrants' access to social support and other community facilities. Whether the elderly person takes public transport or drives on their own, they will face similar problems when travelling around Auckland, due to communication problems and the other barriers described earlier. It is now imperative that both the government and Auckland Council undertake comprehensive infrastructure planning for the region's fast-growing population, with its diverse communities. An easily navigated mass transport system with a reliable service will enable older people to reach social support from outside their families, particularly retired Chinese migrants.

Conclusions and recommendations

Support from the Government and community

More extensive promotion of the government-funded, non-tangible support available for retired Chinese migrants is needed. For example, current support includes free interpreting services, translation services for written words, and free English language classes—but retired Chinese migrants who are facing language barriers need to be made aware of these services.

Therefore, it is reasonable for both Chinese migrants and practitioners to look for more support from the Aotearoa New Zealand government. Much greater and more stable funding would enable service organisations to expand their support for older Chinese migrants by recruiting and training more Mandarin- and Cantonese-speaking social workers, as well as developing more collaborative partnerships between the Chinese agencies and other local organisations. These improvements to the

delivery of social services will benefit more and more retired Chinese migrants as they are supported in their adaptation to local society.

With the Chinese community being a very important and dominant resource for social support for retired Chinese migrants in Auckland, a good strategy would be to strengthen the Chinese community to become an even more powerful support source. As discussed above, most of the information about the support provided by the government fails to reach the Chinese community and so, even if the Chinese community were approached by a retired Chinese migrant seeking information about, for example, free English language classes, the community would be able to provide only limited help. Thus, more funding to the Chinese community or Chinese service agencies is crucial to enable them to provide social work services. A social worker is assumed to be well trained to provide assistance according to one's specific needs. Under this situation, the social worker can be a social support manager to help the retired Chinese migrants to connect with the different supports they need—for example, to an English language class in the local community.

The government's limited support to agencies that provide social support for retired Chinese migrants is not only a challenge for the Chinese community and small agencies, but also for the relatively larger organisations. Under this challenging situation, collaboration between the organisations would be a way to enhance the services that can be provided for retired Chinese migrants. Given that the Chinese community already has the knowledge of, and a comparatively large network with, retired Chinese migrants, the organisations with funding should engage with the Chinese community and extend their services based on the community's already established strong network. Potentially, there are several key gains from such a collaboration. Firstly, an immediate benefit

of collaboration between the funded organisations and the Chinese community would be a reduction in the time currently spent addressing cultural differences between the Chinese service users and the service providers, who are embedded with Western culture. Secondly, in the longer term, collaboration with government-funded agencies could empower the Chinese community, helping them to establish services within, and provided by, the local community. When the Chinese community becomes able to manage social support services and is capable of planning service development, they will be more likely to get funding by themselves.

Politicians and policymakers have other challenges in addition to enhancing the Chinese community. The social service providers in this study have identified a need for ongoing training and support for social workers working with non-English-speaking migrants. They reported that any social worker who can speak Mandarin or Cantonese soon becomes overloaded providing support services to the retired Chinese migrants. In the view of the practitioners, some of the needs of the migrants went beyond what the social workers saw their role to be and this, combined with a perceived lack of the support from managers, decreases their job satisfaction and willingness to stay in the position. This is a complex challenge because, even if Chinese-language social workers are recruited to work in Aotearoa New Zealand, they will find it difficult to practise here until they integrate with the local social support system. Placing Chinese-language-speaking social workers recruited from overseas into positions without supervision and training will not be an effective way to address the current problem. Therefore, it is not merely an issue of labour shortage, but also a result of past failure to comprehensively plan the social support system. Simply speaking, if there is not any planning to enhance and support the service providers, it is hard to move the service forward. Under the current environment, it

will be difficult to improve social support services for retired Chinese migrants.

Study limitations

The researcher acknowledges that firstly, this is a small study and it would be unwise to generalise these findings to other ethnic groups in the Auckland region. For pragmatic reasons of time and access in this study, focus groups were a good choice of method of data collection, however, in-depth interviews would be advised to augment groups in further research.

Secondly, this qualitative study is an investigation into retired Chinese migrants' experiences and those of aged-services practitioners in one city in Aotearoa New Zealand. Self-reporting is a reasonable way for study participants to recall their personal experiences, but it does have some disadvantages. Self-reporting means comments cannot be measured against objective standards of perceptions.

Language barriers and community isolation were common concerns of participants in both groups, which implies that future studies should put more effort on exploring the social, cultural and financial needs of older Chinese migrants. More in-depth investigation is needed to explore the needs of this population and to seek their ideas about solutions.

With these caveats in mind, it is recommended that future research should attempt to use a larger sample size of retired Chinese immigrants from different areas of Auckland; this would validate the current study's findings and also make the findings more generalisable. In addition, further research focusing on tackling language barriers experienced by retired Chinese migrants when accessing social support would also be beneficial.

Hence, the researchers strongly believe that it is a fruitful topic for further investigation.

Their connection to a social support network may change over time due to the possible deterioration of their physical ability or other mobility issues. If they become unable to keep in touch with the Chinese community, elderly migrants will be more likely to become isolated from their social support network, and then the elderly migrant will become further isolated or even "disappear" from their community.

Acknowledgements

The author would like to thank Age Concern Auckland for supporting this study, the participants who shared their experiences and to express thanks for the valuable guidance of my academic supervisors.

Accepted 24 August 2020

Published 15 December 2020

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Expression of Story: Ethical considerations for participatory, community- and arts-based research relationships

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ABSTRACT

INTRODUCTION: This meta-research article considers the ethics and efficacy of a nonviolent, “braided” methodology used by a research study called “The Recognition Project.” The methodology of The Recognition Project interweaved participatory, community-, and arts-based approaches in an effort to create a cooperative, relationally oriented environment where three distinct communities of interest could contribute respectively—and collaboratively—to the sharing, creation, and public dance performance of stories about self-harm. The three communities of interest were university-based researchers, community-based researchers who had engaged in self-harm, and an artist team of choreographers, a musician, and professional youth dancers. Our article explores some of the experiences, as shared by dancers of the artist team, from narrative interviews following the final dance performance.

METHOD: Data were collected through qualitative interviews conducted with six artist team members. A qualitative thematic analysis approach was used to identify the main themes.

FINDINGS: What emerged was an overriding theme about Story and the power issues that came forward due to the personal and the collective aspects of Story. The power issues were related to individual and collective exercise of power, the use of dialogue to build a positive community, and the transformative potential for the artist collaborators to participate in such a study.

CONCLUSION: While participatory, community- and arts-based projects are often taken up with the intention of facilitating research that will not harm, there are important and additional ethical considerations to be made in community-based collaborations that feature difference across perspective, experience, skill, and knowledge.

KEYWORDS: Participatory, community-based research; arts-based research; meta-research; power dynamics; research ethics

It is important for social workers to think critically about the research methodologies that are used to gain an understanding of the human stories and experiences that social workers engage with in their practice. This article, while staged upon a study about self-harm, is, in fact, a critical examination

of the research methodology that was used in this exploration. In this article, we intend to inspire readers, as social workers, to think more deeply about the ethics and ethical implications of research practices, as our professional principles and competencies are built upon the knowledge produced through

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WORK 32(4), 145–157.

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research. When we ask questions of research practice, we can deepen our non-oppressive work by privileging the knowledge that has been gained through non-oppressive research practices.

Many emerging approaches to research represent an effort to dismantle inequitable and oppressive research relationships (de Leeuw & Hunt, 2018; Ninomiya & Pollock, 2017; Penak, 2019), to disrupt the 'ivory tower' hold that academia can have on knowledge production (Tuck, 2018; Van Katwyk & Case, 2017), and to deepen understanding through access to, and privileging of, the significant experiences and knowledges that exist at the community level (Brunner, 2016; de Leeuw & Hunt, 2018; McTaggart, Nixon, & Kemmi, 2017; Penak, 2019; Simonds & Christopher, 2013). Participatory, community-, and/or arts-based research projects have been highlighted for their foundational critical principles of producing knowledge through humanising, equitable practice (Geia, Hayes, & Usher, 2013; Hill & Coleman, 2019; Thompson, Miller, & Cameron, 2016). While research has been described as a violent intervention by many communities and individuals, participatory, community-, and/or arts-based responses are acclaimed as a more ethical way of 'doing' knowledge (Eglinton, Gubrium, & Wexler, 2011; Penak, 2019). Such approaches to research extend the goals of knowledge production to include critical disruption and socially just societal change (de Leeuw & Hunt, 2018; Denzin, 2019; Guba & Lincoln, 1994; Gubrium & Turner, 2011).

As researchers and social workers, the authors are compelled by the need to disrupt ways of doing research that are experienced as a form of epistemic violence (Brunner, 2016; Held, 2019; Penak, 2019; Spivak, 1988). We wanted to learn about the impact of being a community-based, artist participant in a participatory, community- and arts-based research project. We also aimed to better understand the process, when collaboration across difference, art-making, and art-performing occurs as research.

The Recognition Project began by conducting one-on-one interviews with people who had engaged in self-harm. These interviewees were then invited to become a part of a research team that included university-based researchers. The research team worked intensively with an artist team, collaborating in a dance-based analysis of the interviews and the development of a dance that was performed publicly. The artist team was made up of youth dancers, choreographers, and a musician. After the dance was performed publicly, artist team members participated in one-on-one narrative interviews to share their reflections about participating in this collaborative, community- and arts-based research project. This article is based on the themes that emerged from these artist team member interviews. What the artists shared demonstrates some of the important ethical considerations that are relevant to this research, related to power dilemmas that arise with the telling, creating, and performance of a story that this project, and which many participatory, community-, and arts-based research projects, attempt to illuminate. We suggest that while these projects are often taken up with the intention of facilitating research that will not harm, there are important and additional ethical considerations to be aware of in community-based collaborations that feature difference across perspective, experience, skill, and knowledge.

Background

Norman Denzin (2018) calls upon researchers to use inquiry for social change. He writes:

There is a pressing need to show how the practices of qualitative research can help change the world in positive ways. It is necessary to continue to engage the pedagogical, theoretical, and practical promise of qualitative research as a form of radical democratic practice. (p. xi)

In promoting justice and emancipation in this radically democratic work, many

social researchers are wary of power imbalances that may emerge within research relationships. Simultaneously, researchers strive to express knowledge as *shared* rather than *owned* and are mindful of how this information is validated to create and support rapid social change. These measures promoting equitable, pro-social, anti-oppressive approaches exist within (or can be built into) various nonviolent research methodologies, but a question arises: How ethical are they? We suggest that lines of critical inquiry should interrogate the ethical dimensions/ contributions of the research methodologies themselves.

Our meta-research asks some probing questions about the ethical commitments and outcomes of the three nonviolent research methodologies used in the Recognition Project. Respectively, these methodologies were participatory action research (PAR), community-based research (CBR), and arts-based research (ABR). These three methodologies were “braided” into a concurrent (as opposed to staged) heterogeneous approach for the Recognition Project. The remainder of this background section will briefly describe the component methodologies of this braided approach, where they intersect, and how each contributes to the study’s figurative tensile strength.

Participatory action research

PAR is an approach to research that encourages the active collaborative involvement, growth and empowerment of research participants throughout the process (Gutberlet, de Oliverira, & Tremblay, 2017). Research participants and academic researchers engage as co-researchers throughout all research stages, from research idea inception, through data collection, to use and dissemination of findings. This collaborative approach relies on strong ongoing dialogue between co-researchers on the research’s ideas, aims, and usability. PAR disrupts the power dynamics within the research process through promoting

collaboration, growth and empowerment of co-researchers and community (McTaggart et al., 2017).

PAR can also be described as a social practice, guided by the idea of a more egalitarian, community-led research participation (McTaggart et al., 2017), which diverges from traditional research processes in which knowledge extraction is performed “on or to” participants (de Leeuw, Cameron, & Greenwood, 2012, p. 184). As such, PAR has gained significant traction in work that involves traditionally marginalized topics or groups (de Leeuw et al., 2012). By bringing forth the perspective of traditionally silenced groups, PAR challenges exclusions by providing an avenue for marginalized groups to engage in more democratic research.

Community-based research

CBR encourages multiple stakeholders who share collective goals, issues and/or identities within communities of interest (Banks et al., 2013) to collaboratively engage with academic researchers studying complex social problems. CBR defies the traditional research paradigm by cooperating with community stakeholders as full researchers throughout the CBR process, shifting the power of research through relational and multidisciplinary approaches and embracing multiple ways of knowing. This research process is community-driven, with issues and outcomes defined by the community. CBR investigates community-defined problems by researching *with* the community as opposed to researching *on* the community (Lonczak et al., 2013). As such, the community is empowered throughout the process and can shape the research to fit individual and community needs.

Additional time should be allocated for reflection during the research activities, particularly when engaging in power-sharing. CBR researchers must acknowledge, rectify and regularly reflect on the process to address the challenges inherent in such

power-sharing. The equitable involvement of stakeholders in all research stages also increases the likelihood that the proposed collaborative solutions will be meaningful and useful to the community.

Arts-based research

ABR is an emerging research process that utilises art-based methods and processes to facilitate or engage in answering research questions (van der Vaart, van Hoven, & Huigen, 2018). ABR can include various artistic genres, such as painting, photography, performing arts, writing, poetry and installation arts. ABR seeks to harness the expressive, immediate and evocative nature of art in individuals and groups in an approach that is widely regarded as mental and physical health promoting in terms of “personal growth, citizen participation, cultural awareness, and community development” (Stein & Faigin, 2015, pp. 70–71). Due to its creative nature, ABR gives voice to a different perspective by capturing emotions and experiences which may not be generated through traditional cognitively focused EuroWestern research methodologies as typically expressed in formal research publications and presentations (Hill & Coleman, 2019; Penak, 2019; Tuck, 2018). Additionally, creative methods can be integrated into knowledge translation, allowing for dissemination of the research into communities and spaces that may not have access to traditional research knowledge.

ABR opens up new spaces and discourses that uncover power structures that perpetuate the status quo (Gutberlet et al., 2017). The use of ABR has the potential to create social change through creativity, valued subjective expression, and can also be regarded as a challenge to the standard form of research and academic processes (van der Vaart et al., 2018). ABR’s ability to transform and empower communities, coupled with the flexibility and accessibility of engagement, allows for research processes to occur in tandem with CBR and/or PAR.

Braiding methods together

Researchers who braid together multiple methodologies in community- and arts-based collaborations disrupt the dominant research paradigm through the use of creative, participatory or community-led research (van der Vaart et al., 2018; Wang, Coesmans, Siegesmund, & Hannes, 2017). Braiding methodologies together in one project is particularly useful for the community and academic researchers interested in applying a creative, non-traditional, and more democratic method of conducting socially engaged research. Additionally, multiple methodologies can support and enrich community impact through a more fulsome understanding of the research (van der Vaart et al., 2018; Watson, 2019). For example, The Recognition Project used CBR to intertwine three diverse communities of interest: community members who had engaged in self-harm; academic researchers; and artists (dancers, choreographers, and a musician). The Recognition Project promoted egalitarian, relational connections between individuals of these communities using PAR methodology, which encouraged storytelling that had been developed and presented through ABR methodology in a public dance performance. Table 1 demonstrates the considerations made by each approach in the context of the research project. This meta-research explores the experience of some of the collaborating project team members to understand what their experience of participating in a research project that had carefully braided together approaches in order to meet ethical considerations about equity, inclusion, and social change.

Research design: The Recognition Project

The Recognition Project began with eight narrative interviews with people (aged 16–32) who had engaged in self-harm. The interviewees had been informed that the project would entail creating a dance performance based on the interviews. All of the interviewees were invited to become

Table 1. Considerations Made for Braiding Research Approaches Together

Research Approach	Where does it overlap with its co-methodologies?	Why and how was it used for The Recognition Project?	Where does it contribute to the overall 'tensile strength' of this braided methodology?
PAR	<ul style="list-style-type: none"> • PAR and CBR use a collaborative, relational approach • PAR and CBR have egalitarian aims, co-opting community participants and academics as co-researchers • PAR and CBR community-led/directed • PAR and CBR promote relational exchange/connection as opposed to transactions of knowledge • PAR and ABR are participatory • Social justice/emancipatory focus • Empowering to the community • Encourages alternative ways of knowing 	<ul style="list-style-type: none"> • To promote story sharing within a relational, egalitarian approach which provided the storytellers (of personal, unique, traumatic experiences) with some agency in how their story was expressed (i.e., through their feedback to the choreographer and dancers throughout the creation of the dance) 	<ul style="list-style-type: none"> • PAR's approach encourages individual agency to participate through ongoing dialogue between co-researchers on the ideas, aims and usability of the research • PAR bolsters egalitarian engagement at a micro level
CBR	<ul style="list-style-type: none"> • CBR and PAR use a collaborative, relational approach • CBR and PAR have egalitarian aims, co-opting community participants and academics as co-researchers • CBR and PAR are both community-led/directed • CBR and PAR promote relational exchange/connection as opposed to transactions of knowledge • CBR and ABR involve communities of interest • Social justice/emancipatory focus • Empowering to the community • Encourages alternative ways of knowing 	<ul style="list-style-type: none"> • Like a Venn diagram, CBR reveals an overlapping centre shared by three diverse communities of interest (i.e. academic researcher, lived-experience community member, artist team) 	<ul style="list-style-type: none"> • CBR provided a larger-scale approach which tied together three different communities of interest into a new and unique community of interest • CBR was used to build equity and collaboration between the three communities of interest at a mezzo level
ABR	<ul style="list-style-type: none"> • ABR and PAR are participatory • ABR and CBR involve communities of interest • Social justice/emancipatory focus • Empowering to the community • Encourages alternative ways of knowing 	<ul style="list-style-type: none"> • Used to express themes about self-harm in alternative ways to traditional research: the emotionally, physically and aesthetically enriched medium of dance 	<ul style="list-style-type: none"> • Diverging from traditional research, ABR was used to create space to share personal stories of trauma and vulnerability through an artistic (dance) performance which was choreographed to relate the respective stories/themes of self-harm shared by the participants with lived-experience • Dissemination of the stories to the general public was through dance performances (i.e., mezzo level)

involved in the project as co-researchers in the dance-based analysis and knowledge mobilisation of the research findings. Three interviewees were interested and available to participate. A research team was formed made up of three university-based researchers and the three interviewees. An artist team also was developed which was made up of two choreographers, five professionally trained youth dancers (aged 16–25), and a musician.

The eight narrative interviews were thematically analysed by the principal investigator for the first two stages of coding. The themes that existed at this stage were presented to the choreographers to reflect upon as they considered possibilities for the dance development. Dialogue occurred between the choreographers and the researcher who was facilitating the entire project so that the choreographers could process the learning they were encountering in the themes of the firsthand accounts of self-harm. These themes were then presented to the research artist team so that a dance-based analysis could occur collaboratively. They spent five full days together in a dance studio, developing a dance performance based on their interpretation of the themes which had emerged from the interviews. The days were scheduled to begin with a check-in, where members of both teams sat in a circle in the studio. Each person had the opportunity to talk about themselves and to talk about how they were experiencing the project. This was a time when questions could be put forward, plans for the day could be clarified, and mutual dialogue was facilitated. The research team would then leave the studio, where the dancers would begin their warm-up exercises and development of the dance. The research team engaged in training about PAR, CBR, ABR, research memo keeping, arts-based analysis, and knowledge mobilisation.

The research team would return to the dance studio, observing the work of the artists. There were several check-ins throughout each day, and the two teams

would talk to each other about the dance-based analysis of the interview themes, carefully considering the ways in which the meanings were being conveyed through the choreographed movements and live musical accompaniment. At the end of each day, the teams concluded with a final check-out where each person had the opportunity to share their experiences of the day and any wishes they had for the following day.

Using this method of analysis and dance development, a 13-minute dance piece was created for knowledge mobilisation. At the end of the week, an in-studio dance was performed and team members invited friends and family to the performance. During this final day, the artists were filmed and photographed. Two months later, two more performances occurred in the community, with a total of almost 120 audience members. The audiences were made up of friends, family, artists, educators, the initial narrative interviewees, researchers, community members, and social service providers. Each performance began with an introduction by the PI and one of the choreographers. Each performance ended with a dialogue that included the researchers, artists, and audience.

Research methods

In order to gain a deeper understanding of the collaborative process and impact of participatory, community-, and arts-based research, five members of the artist team were interviewed about their experience of this project. The questions for these one-on-one qualitative interviews were designed to elicit information about how the artists had been impacted by the collaboration process, including the final public performances. The interviews were analysed using Braun and Clarke's (2012) approach to qualitative thematic analysis, where data are considered for patterns of themes and subthemes. The analysis was based on an interpretation of the themes that emerged throughout the whole of the data set. We focused on the latent level of the themes (Maguire &

Delahunt, 2017), exploring the ideologies, conceptions, and assumptions that informed the themes identified by the interviewees. We also used Braun and Clarke's (2012) inductive approach to thematic analysis, where we relied less heavily on the research question, but instead, considered the data to see what was emerging from the interviews (Maguire & Delahunt, 2017). The authors began by familiarising themselves with the data. We then inductively coded the data individually. After the initial coding, we came together to consider the codes, in order to identify, organise, and define the emerging themes.

Findings

We asked the interviewed artists about their collaborative working experiences within the Recognition Project. The artists worked with a team of community- and university-based researchers engaged in a dance-based analysis of data about self-harm. Based on this analysis, the artists and researchers jointly developed a dance piece which the artists ultimately performed for several public audiences. What emerged from the interviews was an overriding theme of *story*, alongside considerations of the power of the individual and power of the community in relation to that story. Individual power was demonstrated through roles and an adherence to the hierarchy that organised those roles. Community power was demonstrated through a loosening up of the rules related to roles that led to a sense of shared responsibility which prompted opportunities for dialogue, acceptance of differences, role collaboration, the inclusion of all voices, and a positive experience of community. With both individual and collective power, the artists described the personal transformation that occurred for them due to unfamiliar experience, new learning, and the potential which comes with performance. Finally, the artists acknowledged the importance of active planning and: 1) how they saw that the planning determined the way in

which an organic process was unfolded; 2) further planning could have heightened the preparedness and awareness of all participants; 3) how beneficial the intense timeframe had been; and 4) how important the leadership of this collaboration was.

Story

Throughout the interviews with the dancers, there were reflections about storytelling. One artist described the dancers as "the people telling the story" (A3). Dance was portrayed as a unique way to share knowledge and stories, through the body and through movements. In this way, knowledge was encountered in an embodied format. As such, the artists also described the subjective expression that could be conveyed through dance: an expression of emotion that each body takes on. Some of the artists felt that, in this embodied form, they could gain a strong connection and even understanding about the story they were recounting: understanding and moving the aspects of self-harm that were being explored. Through learning and practising the choreography of the dance and finally performing it publicly, several artists expressed a growing state of empathy and familiarity around the theme of self harm. One dancer described the sense she gained that the story she was telling was "just a story of humanity" (A2).

There were also concerns shared by the artists about the responsibilities inherent in telling a story which is not entirely one's own. This tension was expressed as the risk of "not portraying the story strong enough" (A6). Another dancer described this sense of responsibility as:

... taking that information and saying it FOR them in a different way is always kind of ... we were the ones essentially being the face of the message, so we had to make sure that it wasn't gonna be cheapening or undermining anything. (A1)

Individualised power

Throughout the interviews, power was recognised in a number of ways. As we attempted to understand the enactments of power as they were described in the interviews, we began to identify two distinct but related ways in which power was being discussed: the power of the individual and the power of the community. The power of the individual was established through the roles that team members held in the collaboration, as one artist described:

So, I most appreciated working in a community, working with a musician in a collaborative stance, really listening to each other's stance. I really appreciated working with the choreographers and dancers, other dancers that came, and the researchers. So that's kind of what I most appreciated about the whole experience was that. Collaboration. (A3)

With its connection to roles, the artists' accounts about power portrayed it as being more static in nature. Depicted as being contained within the body of a person and their respective role, this static power was reportedly a thread which carried through the entirety of the project. At times, there was tension, as the roles and rules connected to those roles were questioned or unknowingly violated by someone who was not aware of the rules. "The two different worlds crashed. People don't necessarily know the rules of each other's world or the unspoken guidelines about how things work" (A1). "There was like a negotiation of 'whose project is it?' Who is, in the end, responsible for it?" (A3). For example, one experience that was discussed in a number of the interviews was related to costumes for the final performance. Some of the researchers proposed an idea about makeup and costume. The choreographers had a different idea. There was some tension about who was going to make the final decision. In the end, according to the rules and roles of the choreographers, the lead choreographer made the final decision. "So that was funny

too, just seeing how dancer / non-dancer approaches the visual side of the piece" (A3).

Community/collective power

As the collaborative work progressed, some of the artists noted a softening in the rigidity of the roles. This reportedly infused a greater sense of shared responsibility into the teams which led to more overlapping and intentional collaborations. "It's a larger undertaking, because there was more to be considered, when you have more perspectives and opinions in the room ... the line was blurred sometimes about what the role [of each participant] was" (A3). This was recognised as being connected to the different levels of dialogue that were happening. Each day began with a check-in, where both teams sat together in a circle and talked about how they were doing, what they carried with them from the day before, and what their hopes / anxieties for the current day were. A check-in happened again after the lunch break, and a check-out happened when the day ended.

I enjoyed having the kind of debrief discussions after each of the days, at the end of the days. So it was usually nice to create, it kinda created a little sense of community, but also managed to keep us on track, and keep all our personal intentions for the piece, for the project, keeping them kind of in line with each other. (A1)

The lunch break happened at the same time for both teams, and as the week went on, more team members were sharing the lunch hour together. As well, when there were mini breaks, members of both teams would go together for coffee, or for a walk, or would sit together and talk. On the second to last day of the project, there was an organised pairing off, where each researcher shared a conversation with an artist. The artists were invited to ask questions of their conversation partner about their knowledge of self-harm. In the interviews, the artists

referred to these different dialogues as being helpful for building connections.

Another aspect of the community that was discussed in the interviews was the diversity of experience and knowledge that enriched the collaboration. What was noted by the artists about these differences was that everyone's voice and contribution were valued and regarded as contributing to a shared accomplishment: "Everyone was interpreting it differently and ... all interpretations were valid. So it was really neat to see that as all the moving pieces coming together form one thing" (A3).

The impact of dialogue, difference, and equitable worth was the development of a community that felt very positive for the dancers. The experience was described as respectful by many of the artists, with one artist elaborating: "... everybody was coming from a place of curiosity, everyone was curious and open" (A6). Two of the artists referred to the experience as one of solidarity. One artist, in describing what participants gave to this project, said "I would go so far as to say they brought their love" (A4).

Transformation

The artists also described the ways in which they were changed by their engagement in the project. One of the shifts came by virtue of participating in an experience that was new and unfamiliar. Some of the artists described the discomfort that came with being observed by the researchers: "and being watched ... that's never happened to me ... that was a nightmare [laugh], but again learning to understand the value of the project and the necessities surrounding it and participate as part of it" (A5). Another artist recounted similar initial anxieties:

I was walking into unfamiliar territory, 100%, I didn't know anything about the theme initially and I didn't know the people involved except [name removed] and [name removed] so, you know it was

a blank page, you know starting with um, the empty studio, the white canvas, the blank page, the empty lot, silence. All the things that make a fresh beginning, so I have to say that I was in a position to learn. (A4)

As the artists became aware of the unfamiliar stories and experiences shaping their choreography, some conveyed sensing an internal shift as what they were learning settled and even resonated within them. In reference to the final performances, an artist said, "It had been digested somehow and came into being" (A4). A different artist related how "the project really brought up the community idea of finding ways of fighting alienation and isolation" (A2), thus linking connection, isolation, and self-harm in a way that was new and relatable.

Finally, the potential for transformation was noted in the performance aspect of the project. Some of the artists reflected on the potential positive impact similar projects could have in larger communities. One artist described how, with performance, "you have something to say that has never been said" (A1) and another stated that "the artist must leave no stone unturned and then tell us what we see is beautiful" (A4), which can have an important de-stigmatising effect.

Planning for participatory, community-based, arts-based research collaborations

The artists' descriptions of the project were significantly focused on the process of community building. The days were represented as being "distinctly different" (A2) from one another, with one artist stating that "day by day it's different, person to person, it's different" (A1). Team members worked together responsively, using a flexible and dynamic approach stimulating "organic movement and freedom" (A2) in which the artists "bounced back and forth between fun loving, easy-going, happy vibe and dealing with a heavier subject matter" (A2). Pleasure was expressed: "The ongoing

process of becoming more of a team, I found that part was really beautiful" (A6). The emergent and organic process signifies an approach to planning that is also process-oriented, bringing confidence and trust to a dynamic collaboration shaped in large part by the members of that specific collaboration.

There were a number of observations made that would suggest acknowledgement of the planning that went into this project. The intensive design of the collaboration was appreciated, as it was "intense work and really rewarding. It was nice setting a specific amount of time aside for one thing" (A6). Another artist said, "the week was so fast paced, which created a project where you were totally fine just contributing and doing and moving" (A2). Other interviewees described how helpful it was, with the intensive, five-day schedule. They recounted that each day could move the project forward, picking up from the progress that had been made the day before, without a need to re-visit and recall (i.e., as when dance projects are scheduled week to week). In fact, some of the artists expressed having wanted more time to get things just right. One artist stated, "You need time for something, the subject is very demanding. You need more time to develop it" (A3) while another said, "Extending it another day may be good, if the intention is to have a strong work of art in the end" (A6). Here is where the aesthetic goals of art-making can contribute to a research/art collaboration, with a desire to take the time to create something that is meaningful and beautiful.

Many of the artists also expressed a desire to have had more preparation before the project began in the studio. Further preparation would have allowed for a clarified sense of direction for the artists: "I feel like I wasn't there for certain discussion beforehand when the choreographer and lead researcher talked about their actual goals for the project" (A3). Another artist shared that, while "the researchers researched the topic and understood the complexities of it, I don't

know as dancers whether all of us were totally knowledgeable" (A6).

Another level of necessary preparedness was mentioned by almost all of the artists. This had to do with a discourse about self-harm that was brought into the project that created discomfort. One artist described the language, sharing that one of the artists "was talking about people who self-injure as victims and I'm not sure that was the right dialogue to use" (A6). Another artist, in reference to the language of *victim* noted that "tension was definitely present throughout the workshop" (A3). Another artist, referring to similar discourse that came into the project, stated that it "would've been good to talk about vocabulary" (A1).

What emerged from these discussions was how important careful planning is for the participatory, community-, and arts-based research collaborations. Leadership emerged as a theme, with statements such as "the leader is necessary" (A3). While leadership can be organised according to one's role (e.g., the direction of the choreographer, the mood and tempo created by the musical composer/performer, and the knowledge of the researcher), it was important that overall collaboration was also being coordinated in an organised and sensitive manner. One artist described the leadership approach as one that she found "manageable" (A2). When asked what was meant by this, she responded, "I meant that it was taken in a very delicate way and we very delicately approached the topic and I explored it in a way that, to me ... ended up being safe and comfortable" (A2).

Discussion

This project, through braiding approaches to collaborative research together, created a place where story occurred in the context of multiple relationships across individual differences. Foucault (1980) asserts that there will always be issues of power where there are relationships. He also describes the ways in which power can work to subjugate

knowledges (Foucault, 1977). Subjugated knowledges are those knowings and experiences that are discounted as invalid. This project worked to create a relational environment where power was exchanged and exercised in ways that strengthened—rather than harmed—community.

This project facilitated space for a different discourse on self-harm to be expressed in an embodied form through dance. The connections that the artist team created, through multiple dialogues with the research team, enriched the way they understood and expressed aspects of self-harm within the dance and in themselves. This resulting change described by the artists highlights the impact of participatory, community-, and arts-based research projects on dialogue, sense of community, and understanding of stigmatised topics.

The researcher has ethical responsibilities regarding the ways in which power, both individual and collective, is distributed. Inequitable distribution of power between researcher and community partnerships can limit participation (Wilson, Kenny, & Dickson-Swift, 2018). Inequitable and unfair exercise of power can lead to the decay of positive safe spaces within a research project. Consequently, researchers may unwittingly disempower participants when researching stigmatised topics and experiences such as self-harm. This disempowerment has the potential to harm participants and can affect how a story is understood, processed, and expressed, potentially creating spaces that are experienced as negative or unsafe to those involved (de Leeuw & Hunt, 2018; Geia et al., 2013; Wilson et al., 2018).

Additionally, researchers must be aware of the limitations of ethics review processes through the research ethics board (REB) in participatory, community-, and arts-based research. Many of the concerns surrounding the ethical responsibility of power echo those noted under CBR and PAR research. Ethics review processes can provide a layer of safety to protect research participants from

undue harm, however, they may disregard the collective and relational nature (Wilson et al., 2018; Wood, 2017) of participatory, community-, and arts-based research processes. The procedures called upon by REBs are often insufficient to ensure that community participation and distribution of power during all stages in the research process are participatory and equitable (Wood, 2017). Researchers interested in facilitating a participatory, community-, and arts-based project have obligations to understand how power, within the group and for each member, is experienced and manifested. Researchers should be prepared to provide leadership and actively facilitate action to address any misalignment of power throughout the research process.

Providing active leadership and avenues for participants to voice and address power differentials (e.g., fostering dialogue between participants) can help create positive space while strengthening and empowering participants. In our interviews with the artist team, some artists commented on the ways different dialogues occurred and how these dialogues facilitated the equalisation of power dynamics. The artists, who expressed initial discomfort in speaking or voicing ideas during discussions early in the project for fear of saying the “wrong” thing, stated that the daily check-ins after communal lunches and breaks with the researchers put them more at ease to engage in candid conversation. Although it was not necessary for our artist and researcher groups to formally discuss power dynamics, researchers should facilitate space and time for participants to engage in ongoing dialogical collaborations in participatory, community-, and arts-based projects.

This project and all of its participants worked to valorise community through the collective analysis and performance of a story. The findings present valuable information about the possibilities of participatory, community-, and arts-based research, as well as the responsibilities of the researcher. Due to the diversities that constitute many community-

based collaborations and the subjective expression that is inspired in much arts-based research, there are inherent inequitable power dynamics within these projects. The power enactments can come from individual as well as collective sites. We do not suggest that power dynamics only create difficulties and obstacles. Rather, we propose that individual and collective power enactments invite unique ethical considerations in these kinds of projects. Dilemmas about power enactments in collaborative, community-based research relationships are inevitable, and must be confronted with respect and reflexivity (Ninomiya & Pollock, 2017). An empowering, engaged leadership is called upon (Flicker et al., 2015; Malott, 2010; Tucker, Williams, Roncoroni, & Heesacker, 2017). Even as participatory, community-, and arts-based projects are largely process-focused, we contend that it would be unethical for the facilitating researchers to passively observe the process as it unfolds. The inherent power differentials and accompanying dilemmas must be addressed, and the facilitating researchers have the responsibility to steward this process by utilising tools and strategies to care for the project and its participants. As researchers, we need to ensure that we are leading in a way that will strengthen and empower both the research process and the collaborating participants.

Conclusion and implications

Braiding together participatory, community-, and arts-based approaches to research prioritises equitable, action-oriented explorations that can have immediate benefits for those involved in the research. The collaborative nature of such a braided approach to research, particularly as it incorporates the expression and performance of a story, calls upon ethical considerations of power and accompanying responsibilities for the researcher who is facilitating the project. In the findings of our meta-research exploration, there emerged a consideration of story, and how both the power of the individual and the power of the community

were accountable to the transformative possibilities of collaborative, arts-based, knowledge production that needed careful planning for an ethical process to occur. An important implication is in reference to the considerations that need to be made beyond those existing in many institutional research protocols (i.e., those used by many REBs). Our findings suggest that researchers should conduct a close interrogation of the power dynamic, as well as the discourses that can shape the way in which stories are represented, reproduced, and performed. Furthermore, our research suggests that such projects need to be carefully planned and facilitated, using dialogue that can strengthen relationships and create opportunities for an exercise of power that can, at both individual and collective levels, create an artistic and validating expression of story.

Acknowledgements This project was made possible with a grant from the Astley Family Foundation.

Accepted 7 October 2020

Published 15 December 2020

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Mental health and the news media in Aotearoa New Zealand: Key informant perspectives

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ABSTRACT

INTRODUCTION: Without personal experience or specific background knowledge of an issue, individuals exposed to news media are limited in their ability to gauge the accuracy of media content. The perception of people with mental illness as dangerous or incompetent allows for discrimination to occur, often resulting from inaccurate portrayals in the media.

METHOD: A small, qualitative study was undertaken to explore key informant perspectives on the representation of mental health issues in the current Aotearoa New Zealand media context. Eight semi-structured interviews were carried out with key informants; each participant provided at least one of the following perspectives: mental health professional, mental health advocate, mental health consumer and/or media personnel.

FINDINGS: The participants in this research found that news media strongly influence how the public views mental health, but believe media representation has improved in recent years. However, participants described an absence of stories illustrating successful interventions and felt that the portrayal of mental illnesses are still misrepresented and stigmatised by the media. Mental health services and mental health professionals were seen as poorly represented by the news media, which was thought to deter help-seeking and hinder trust.

CONCLUSION: Public attitudes towards mental health have a significant impact on the lives of those experiencing mental distress. The news media have the ability to change public perceptions; however, this influence can be either harmful or helpful. Mental health stories need to be consistently contextualised and use inclusive language in order to make a positive large-scale change in public attitudes.

KEYWORDS: Mental health; mental illness; news media; service-user perspective

Mental health is a significant concern in Aotearoa New Zealand, with approximately one in six New Zealanders being diagnosed with a mental health condition at some point in their lives (Mental Health Foundation of New Zealand (MHF), 2014). A perception of people with mental illness as dangerous and unpredictable has allowed for discrimination and the social distancing of those living with a mental illness. Charles and Bentley (2016)

argued that this discrimination is a result of exaggerated, distorted, and often incorrect news media portrayals of people with mental illnesses. For people without experience of mental illness, either in their personal or professional lives, the news media provide the major source of knowledge and can have a significant impact on an individual's understanding and response to mental illness.

AOTEAROA
NEW ZEALAND SOCIAL
WORK 32(4), 158–171.

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Misunderstanding and fear of mental illness have led to people being excluded from their community and often make it difficult for people to find housing or employment and be involved in social activities (Drake & Whitley, 2014). This can have a significant impact on self-esteem and quality of life for many New Zealanders. Alternatively, people experiencing mental distress may try to hide their experience due to fear or shame, which can cause additional stress and often inhibits help-seeking behaviours. Research by Niederkrotenthaler et al. (2010) suggests that shame about mental distress may be related to high rates of suicide and it is therefore important to understand how mental illness is currently portrayed in the Aotearoa New Zealand news media to ensure accurate information and inclusive messages are being conveyed to the public. Guidelines to support journalists are available and the Mental Health Foundation of New Zealand media guidelines provide an example of how they can be resourced (MHF, 2018).

The research project reported in this article involved participant interviews and a content analysis of news media in printed or online formats. The content analysis is reported elsewhere (Oliver, 2019). The following literature review addresses the concept of stigma and news media influence on public perceptions of mental illness, including self-perception for those living with a mental illness, while understanding that the general public will have available to them a far wider portrayal of mental health.

Literature

Public attitudes towards mental illness are influenced by, and themselves influence, news media coverage (Rhydderch et al., 2016). Mental health topics appear in various forms of media, including children's programmes, adult fiction, social media and news content. The focus of this article is representation in news media, although other forms together help to inform and influence the general public's ideas on mental health. International research suggests, for example,

that it is the interplay between entertainment media and the reporting of news which allows for stigmatising images of mental illness to be maintained and amplified (Hall, 2001; Stuart, 2006). It was beyond the scope of this study to explore the influence of other media in detail.

Stigma is a significant dimension of wellbeing and identity for people with mental illness and it therefore is of concern how they are represented in the media. Stigma can be perceived as part of personal identity and Scambler notes that when stigma is "internalised by putative possessors of stigma the consequence is 'self-stigma'" (Scambler, 2009, pp. 446). Steward et al. (2008) suggested that people's internalised self-concept becomes aligned with the stigmatising responses of, and use of labels by, others. Participants in Peterson, Barnes, and Duncan's (2008) Aotearoa New Zealand research on self-stigma highlighted the news media's role in perpetuating sensationalised stereotypes of mental illness. Service-user-led movements such as Mad Pride (Schrader, Jones, & Shattell, 2013), the Nutters' Club in Aotearoa New Zealand (<https://thenuttersclub.co.nz/>) and the development of academic Mad Studies (Beresford, 2019), have reclaimed pejorative labels as an act of resistance and an assertion of positive identity. Nevertheless, a primary focus of many mental health advocacy campaigns and organisations such as the Mental Health Foundation's *Like Minds* campaign (Ministry of Health and Health Promotion Agency, 2014) is the reduction of stigma (including self-stigma) through reducing othering in processes such as labelling in popular language. Here, we make a distinction between reclamation of pejorative words by insider/service-user groups (e.g., the Nutters' Club) and the persistence in othering by the use of labels. Aragonès, López-Muntaner, Ceruelo, and Basora (2014) noted that, like other groups subject to stigma and discrimination (e.g., because of race, disability or sexuality), changing the use of language in the media is an important step towards changing

attitudes. Wahl, Wood, and Richards (2002) make the distinction between language which speaks of people with disorders and language which equates people with their diagnostic label, such as labelling people as “schizophrenics,” or “borderlines.” Aragonès et al. (2014) argued that this language perpetrates stigma as it suggests that people are defined by their illness and this detracts from their other roles and identities. The results of Wahl et al.’s (2002) research showed an equal likelihood of both types of language occurring in the media when talking about mental illness, with no significant reduction in references to people *as* their disorders during their 10-year study period. More recent studies suggest a shift towards more positive representation of mental health in media language (Kenez, O’Halloran, & Liamputtong, 2015; Thornicroft et al., 2013), with research suggesting that mass media and social media campaigns have made significant contributions to changing public discourses (Sampogna et al., 2017).

Mental health campaigns have increased the public’s awareness and understanding of certain disorders, improving public attitudes, which is subsequently reflected in the media (Aragonès et al., 2014; Clement et al., 2013; Sampogna et al., 2017; Vaughan & Hansen, 2004). The only Aotearoa New Zealand studies looking into the media representation of mental health were published more than 10 years ago (e.g., Nairn, Coverdale, & Claasen, 2001; Nairn, 2007; Wilson, Nairn, Coverdale, & Panapa, 1999). While the findings of these studies do provide some indication of Aotearoa New Zealand’s attitudes towards mental illness, they do not take into account the impact of recent campaigns seeking to destigmatise mental illness, such as “Like Minds Like Mine” (Ministry of Health and Health Promotion Agency, 2014). Arguably, this campaign (established in 1997 with the aim of reducing stigma and discrimination and increasing social inclusion for those with experience of mental illness) has had a significant impact. The majority of participants in Thornicroft,

Wyllie, Thornicroft, and Mehta’s (2014) study reported an improvement in public attitudes over the last five years, which they attributed to the Like Minds campaign. However, much of the improvement in attitudes is related to more common experiences of mental distress, such as depression and anxiety, with specific diagnoses, such as schizophrenia, still being misrepresented in media reports (Kenez et al., 2015; Neto, Figueiras, Campos, & Tavares, 2017; Rhydderch et al., 2016). The research reported in this article took a snapshot of key informant perspectives on current news media presentations of mental illness.

Method

Data for this article were obtained as part of a Master of Social Work research project (Oliver, 2019). The study was approved by The University of Auckland Human Participants Ethics Committee number 021531. A content analysis of news media articles on depression and suicide during the period January 24, 2017–January 23, 2018 and findings of that part of the study will be reported separately.

The research question “How is mental health portrayed in Aotearoa New Zealand mass media?” was used to guide this project. There were two research objectives:

1. To gain an understanding of key informant perspectives on the current media representation of mental health;
2. To gain an understanding of key informant perspectives on how the media portrayal of mental health might impact on different stakeholders.

Participants

The first author carried out eight semi-structured interviews with key informants who were invited to participate based on their knowledge and experience of mental

health. Participants were categorised into one of four categories: media personnel, consumer perspective, mental health advocate or mental health professional. This research used purposive sampling to allow the taking of research questions into consideration when making sampling decisions (Bryman, 2012). All participants were living and working in Aotearoa New Zealand. Auckland participants were interviewed face to face and interviews with those based outside Auckland were conducted using Skype or over the phone.

Semi-structured interviews procedure

Semi-structured interviews were used to collect data. This form of interview was chosen in order to ensure thorough exploration of the topic with all participants while allowing for flexibility in the phrasing and order of questions. Open questions were used to encourage participants to provide detailed answers and to describe their own understanding of the current media representation of mental health. Additionally, the semi-structured interview format allowed for responses to develop organically and enabled the asking of questions not included in the question guide when an interesting or unanticipated theme emerged. Interviews took between 30 and 90 minutes as participants varied significantly in how much they wanted to say. Each of the interviews, although of different lengths, were appropriate for the individual participant and the time taken allowed for sufficient exploration of the topic (Gill, Stewart, Treasure, & Chadwick, 2008).

The researcher paid careful attention to keeping questions neutral and to encouraging participants to consider all facets of the media's representation of mental health, rather than presume a negative impact. This avoided limiting participant's answers or causing prejudice towards a particular position. A final open question ensured that all participants had the opportunity to voice their thoughts and were not limited by the questions asked.

Qualitative analysis

Transcription began alongside interviewing which allowed reflection on the interview process and the identification of themes to help inform subsequent interviews in line with the principles of grounded theory (Gubrium, Holstein, Marvasti, & McKin, 2012). During analysis, the first author listened to the interview recordings again to help contextualise statements and deepen understanding of the participant perspectives. Open coding was used during the initial analysis to identify, name, and describe the concepts within the text. This process involves reading and dissecting every part of the text in order to understand the meaning (Borgatti, 2014).

The next stage of coding involved combining related nodes and making connections between codes. This axial coding aims to find causal explanations for events and interactions (Marshall & Rossman, 2014). One of the main criticisms of coding in qualitative data analysis is the risk of losing the context of what has been said (Bryman, 2012). This risk was reduced by returning to recordings while undertaking axial coding allowing interpretation of meaning in the context of comments and the tone and intonation in my interpretation of their intended meaning.

Finally, the selective coding procedure involved revisiting the data and the codes and narrowing the focus to the most significant categories. In this process data were chosen which best illustrated the prominent themes.

Ethics

A written, informed consent form, requesting participants' signature prior to being interviewed, was provided. Participants were given printed information about the purpose of the research, and measures taken for confidentiality; however, they were made aware that while confidentiality was observed, complete anonymity could not be

guaranteed due to the small and connected communities from which they were drawn. Participants were offered relevant contacts for support if they experienced any distress arising from topics discussed during the interview.

Findings

This research project explored the perspectives of media personnel, mental health advocates, mental health professionals and mental health consumers on the media's representation of mental health. All participants had had some involvement in an area of mental health during their working lives and both of those in the media personnel category have been publicly recognised for their contribution to mental health journalism. Six key themes were developed in the analysis: *news reporting, language, context, mental health services, negative messages and positive messages*. Participants' quotes in the text have been used to illustrate the findings.

News reporting

Opportunities for service-users and members of the public to positively influence the news media were identified by participants. In particular, participants felt that the quality and sensitivity of mental health stories could be improved by mental health service providers and service-users providing feedback and liaising with the media. In addition, increased training for journalists was frequently requested by participants in order for mental health stories to be hopeful and reflective of real-life struggles with mental illness.

I think there ha[ve] been rapid improvements in the news media, just in terms of things like providing helplines and other resources for readers at the bottom of stories and consulting a bit more with kind of people in the sector and people who have experienced mental distress, just giving them a bit more of an input so that [journalists] understand

the repercussion[s], or the potential repercussions of what they're writing. (Media Personnel 2)

Participants acknowledged the difficulties for journalists in accurately reporting on mental health issues. In particular, two barriers were discussed. The first of these, acknowledged by mental health advocates and professionals was liaison, which is, in part, driven by service-users' fear of being misrepresented or discriminated against, as well policies or restrictions for service providers in speaking to the media. The second involved the newsroom pressures, including time restraints and expectations for stories to be succinct, lucrative and attention grabbing.

Language

The second identified theme concerned the language used in mental health stories. Participants spoke about the importance of using inclusive language when reporting on mental health and highlighted the negative connotations attached to some commonly used words and terms. While there was an agreement that the language used has improved over recent years, participants acknowledged the tendency for the media to use mental illness or a diagnostic label to reduce a person to a single component of their life. It was argued that a fundamental change in the language used by media is necessary in order for the public to recognise people as more than "a mental health patient."

Another issue that was brought up in the language area was discussion around suicide. Several participants described the careful wording of the media in the reporting of suicide to say as much as they can within legal restrictions.

Sometimes it almost feels a bit gratuitous when they might talk about a suicide story, and they know they can't mention the method, but they mention enough about the case for you to know the method. (Mental Health Advocate 1)

Mental health advocates and consumers felt this practice was harmful as it was seen to encourage a hopeless orientation for individuals struggling with suicidal ideation.

Context

The context of people's lives was identified as significant in both the development of mental distress and in one's ability to recover.

If you think about mental health in the broader sense, people's mental health is affected by things like poverty, homelessness, expensive homes in Auckland, cultural disconnection, social isolation ... those kinds of macro level things. (Mental Health Professional 1)

Several participants acknowledged the importance of including context in balanced reporting of mental health stories and speculated that the lack of context fosters social distance and makes it easy to for the public to place blame on individuals. Vague news stories of violence also play into this by encouraging the public to make assumptions about a person's mental health and motives for aggressive behaviours. Participants felt that mental illness was recognised as correlated with stressful life events and is particularly common among individuals with experiences of trauma. Many participants argued that, with context, experiences of mental distress become more understandable and relatable, and this decreases news value as stories lose the ability to elicit shock and fear in the audience.

Mental health services

Another recurring theme in the interviews concerned the difficulties experienced within the mental health system arising out of staff and resource shortages. The increased demand for mental health services has led to long waiting lists, high thresholds, an acute intervention focus, and many services are at full capacity. There was recognition that

negative media coverage of services may further discourage people from working in the mental health sector due to the current challenges. Furthermore, a number of participants linked the negative media representation of mental health services to increasingly risk-averse work environments. Participants described mental health professionals as fearful of being "named and shamed" by the media and, as a result, treatment is more likely to become overly medicalised and coercive, and services become more private and less likely to innovate.

Interestingly, participants described two paradoxical media representations of mental health professionals. The first being these professionals as people who frequently lose patients from mental health facilities, lock people up and force them to take medication. The other, insinuating that mental health professionals have all the answers and can offer quick-fix solutions to cure mental illness. Both of these media representations were seen as harmful as they can deter help-seeking or create unrealistic expectations.

The purely medicalised representation of mental health services was another issue raised in the interviews. Participants felt that, based on media representations, the public would lack an awareness of what mental health support services are available and would have a distorted understanding of how services operate. The other difficulty here is that the media focuses predominately on the failings of the mental health services and does not give enough attention to the successes occurring. One of the consequences of this is that it discourages help-seeking, as people are dubious about the help mental health services can provide. Several participants explained that, when someone approaches the media about mental health services, it is usually because they are angry or upset and therefore these are the loudest voices heard. Participants explained that stories showing mental health services in a positive light would provide balance to the

narrative and open up discussions about effective interventions.

Negative messages

In looking at the negative messages in the media's dialogue on mental illness, an association with violence and an othering discourse were two of the strongest themes. Mental health professionals and advocates spoke of news media highlighting mental illness as a characteristic of difference and using it to separate and discriminate. For example, stories linked exaggerated, inaccurate or decontextualised accounts of violent events to mental illness, reflecting similar research (Murphy, Fatoye, & Wibberley, 2013; Nairn, 2007). Some participants claimed that, when a violent incident occurs, the media tend to speculate that the person responsible acted as a result of a pre-existing mental illness. This may cause the public to link mental illness to violence and learn to think of the two as intrinsically connected; however, research evidence such as that of Simpson, Mckenna, Moskowitz, Skipworth, and Barry-Walsh (2004) suggests that people living with mental illness are more likely to be victims of violence rather than its perpetrators.

These links enable othering, and examples were provided where people have avoided someone with a mental illness, staying away from where they live, or crossing the street to avoid walking past them. In addition to the othering discourse, fear of mental illness can prevent social inclusion and acceptance of those experiencing mental distress.

Self-stigma was another theme raised by both mental health professionals and advocates, echoing Scambler (2009). This was described as including feelings of shame associated with mental illness, guilt for burdening others and feeling weak and embarrassed about having difficulty coping independently. These participants felt that self-stigma was a barrier to recovery and can drive suicidal thoughts. Negative media coverage was linked to self-stigma as it feeds

self-doubt and discourages participation in normal activities.

And that has enormous knock-on effects with our suicide statistics. Enormous knock-on effects with our economy. So, people are unable to get jobs that they want, need, value. They're unable to enter further education and training. Either through their own self-stigma or being rejected from some of those training courses. (Mental Health Advocate 1)

Positive messages

The final theme which came out of the interviews concerned positive messages in the media. Participants were united in their belief that positive media representations have a normalising effect and agreed that anti-stigma campaigns are having a positive impact on the way the public views distress. Several participants commended the work of public figures for speaking out and engaging with the media to share their personal stories, asserting that these are the most valuable as they humanise mental distress.

So, more people see stories of people like them in the media, they're more likely to go, "oh, what I'm going through happens to other people as well, it's kind of normal, I can get help for this, I can reach out, I don't need to be so embarrassed or shameful about experiencing these things." I think that's the greatest positive. (Mental Health Advocate 1)

Depression and anxiety were discussed by several participants as being recognised in the media as normal experiences. However, participants felt that the same had not occurred for some episodes of mental distress such as psychosis. This is consistent with existing literature, for example, the research done by Neto et al. (2017) and Rhydderch et al. (2016), and suggests the perpetuation of stigma against those experiencing mental illnesses that are associated with risk, predominantly psychoses, and especially those associated

with violence towards others (Berry & Whitley, 2016; Simpson et al., 2004). The importance of talking about mental health issues, including suicide, was emphasised during interviews. Participants felt that respectful media discourse helps to demystify mental illness and can educate the public, so illness becomes less of the “unknown other.” Participants highlighted other benefits of a normalising discourse, including reducing feelings of shame and isolation, increasing feelings of acceptance, preventing suicide and supporting recovery.

In line with recent research (Rhydderch et al., 2016; Whitley & Wang, 2017), many participants described an improvement in the media over the past 10 years, with several participants explicitly stating they now see more positive mental health content than negative. However, some participants felt that the negative content has a significantly stronger impact on the public and all participants expressed the view that there are not enough recovery stories in the media, including examples of successful interventions. Many stressed the importance of recovery stories being told in mainstream news media to balance the negative narrative and provide hope to the audience. Several participants claimed that the media never show recovery from severe episodes of mental illness and give the impression that these cannot be recovered from. It was agreed that the media have a narrow view of recovery, describing it as a state of being recovered, rather than presenting someone as actively in recovery. Participants characterised recovery as nuanced, holistic and personal, and contrary to the media, felt that people can live flourishing lives in the presence of symptoms.

Discussion

This research set out to explore the views of key informants regarding the representation of mental health by the New Zealand media. From the perspectives of these key informants, the media have a significant role to play in influencing public opinion

on mental health. This is congruent with similar research that has found that the media have significant influence over public attitudes towards mental illness (e.g., Anderson, 2003; Klin & Lemish, 2008; Wilson, Nairn, Coverdale, & Panapa, 2000) and fictional and non-fictional depictions are mutually reinforcing and cumulative (Nairn, 2007; Stuart, 2006). While there was optimism about the increase in recovery and anti-stigma messages in the media, this was tempered by an understanding of the power of negative media representations. Participants were unanimous in their belief that the media can change public perceptions of mental health and create a more inclusive society. However, participants varied in how optimistic they were concerning media intentions and some made it clear they did not think the current media climate would prioritise de-stigmatisation over sensationalism.

Regarding journalism

There is ample academic literature analysing the evolution of language in mental health with recent research noting the phasing out of derogatory terms in both the media and in public discourses (Kenez et al., 2015; Romm, 2015). In line with this, interview participants expressed the belief that these terms are becoming less prevalent in media material. The reduction of derogatory language has been accompanied by the introduction of recovery-focused language and an emphasis on health and wellness.

As Beresford (2002) argues, a focus on mental health rather than mental illness helps to reduce the divide between the *sick* and the *healthy*, recognising that mental health exists on a continuum and can fluctuate over a lifespan. This was highlighted in the results of the interviews, which found an agreement among participants that language has indeed improved and the media is making more of an effort to emphasise the importance of mental health and holistic wellbeing, as opposed solely to the experience of mental illness. This indicates

that it is possible to teach journalists how to report on stories detailing an experience of mental distress without re-traumatising others or reproducing stigma. Similar studies suggest that, even in the context of crime and violence, skilled journalists are able to provide an informative and balanced account of an event (Berry & Whitley, 2016).

As emphasised by interview participants, service-users are the most affected by media representations of mental health, particularly when representations are negative and inaccurate. Negative media has the ability to impact on every facet of a service-user's life; from their identity and self-worth to the places they can live and the supports available. In the interview findings, discussion around identity occurred, with participants commenting on the media's use of diagnostic labels to define an individual by their mental illness. The use of nominalisation in the media creates a dominant identity which undermines the existence of other identities (Aragonès et al., 2014; Murphy et al., 2013). Key informants felt journalists require further education around the impact of language as participants believed that most journalists are not malicious, but naïve, and the language they use which is stigmatising or triggering is unintentional.

Regarding a balanced media

For media coverage to be balanced, the context in which an event occurs must be given consideration. In the interviews, the broader social and environmental factors that determine mental health were commonly discussed. Participants expressed the belief that mental health is interlinked with other social issues and personal traumas, and emphasised that mental illness does not exist in isolation. However, when the media reports on an incident involving someone with a mental illness, explanation of their past trauma or personal struggles leading up to the incident are typically not given. Moreover, previous research has found the media

will often insinuate motives for violent behaviours by being vague in their reports and relying on the public's assumptions about mental illness (Kenez et al., 2015; Ohlsson, 2018).

A desire for the media to consult and liaise with informed sources before publishing a story was stressed by the majority of interview participants. Previous research studies have found promise in interventions which improve reporters' access to information as this provides journalists with a more complete and balanced understanding (Aragonès et al., 2014; Pirkis, Blood, Francis, & McCallum, 2006; Stuart, 2003; Wahl, 2003). Liaison between the media and mental health professionals, advocates, service-users and their families provides journalists with a range of perspectives, including personal accounts. This allows for accurate and more empathetic mental health stories. As a number of research participants suggested, many service-users who had approached the media in the past felt they were misrepresented. Consequently, service-users are somewhat reluctant to speak to the media for fear of negative coverage. The need to prepare individuals to liaise with the media is suggested by Morris (2006) and was also suggested by several participants in this research.

Regarding representation

De-stigmatisation campaigns are beginning to take effect in Aotearoa New Zealand and are changing the way people view mental distress. It is increasingly recognised that people will experience varying states of mental health throughout their lives, often in response to changing circumstances and environments (Petrillo, Capone, Caso, & Keyes, 2015; Romm, 2015; Westerhof & Keyes, 2010). Participants felt that these campaigns are responsible for the reduction in negative attitudes from others and for removing some of the weight of self-stigma (Scambler, 2009) for those experiencing depression.

Some mental health conditions such as psychoses occur less frequently than depression or anxiety in media stories and are described with a reduced amount of empathy and understanding, as shown by previous research (e.g., Nordt, Rössler, & Lauber, 2006; Wood, Birtel, Alsawy, Pyle, & Morrison, 2014). Currently, it seems that the media mention psychosis or schizophrenia only in the event of a tragedy. This gives the impression that these major mental illnesses are a determinant or prerequisite to violence, when the actual perpetration of violence by someone with any major mental illness is relatively rare (Simpson et al., 2004).

Indications that the media can be a powerful vehicle for combatting stigma and dispelling myths has been a recurring theme in comparable research studies (Angermeyer & Schulze, 2001; Aragonès et al., 2014; Clement et al., 2013; Dietrich, Heider, Matschinger, & Angermeyer, 2006; Morgan & Jorm, 2009; Stuart, 2006). Of particular significance are media campaigns involving famous people with lived experience of mental illness, as these have been shown to increase public interest and awareness of mental health issues and reduce beliefs that mental illness is a sign of weakness (Morgan & Jorm, 2009; Vaughan & Hansen, 2004; Whitley & Wang, 2017).

The findings suggest that personal accounts of mental illness humanise the issues and encourage the public to respond with acceptance and understanding rather than fear. It was suggested by interview participants that depression is better represented in the media and efforts have been made to destigmatise and normalise experiences of depression in a way that has not been done for other presentations of mental distress. Other recent research, by Neto et al. (2017) and Rhydderch et al. (2016), supports this assertion, which provides evidence to suggest that further intervention is required to remove the stigma associated with major mental illness, especially where there may be a perception of risk or violence.

Regarding hope

The recovery model promotes the idea that people with mental illness can improve, manage symptoms, and live meaningful lives (Charles & Bentley, 2016; Lloyd, King, & Moore, 2010), and thus contradicts the belief that mental illness is something that needs to be “cured” or something that cannot be recovered from. Recovery stories provide hope and guidance for people experiencing mental distress and help to disprove stigmatising myths and educate the public (Wisdom, Bruce, Auzeen Saedi, Weis, & Green, 2008). The narratives of interview participants reflected this view, suggesting that personal accounts of recovery have powerful effects on the general public and on those currently experiencing distress. Furthermore, the negative impact of suicide stories can be ameliorated when stories model healthy ways of managing distress and show people who have survived mental illness rather than those who have attempted or completed suicide (Morgan & Jorm, 2009). By doing this, the media are able to foster hope and motivate vulnerable people to seek new ways of coping, instead of presenting suicide as a solution (Niederkrotenthaler et al., 2010; Sisask & Värnik, 2012).

Despite systemic barriers, mental health professionals have many successes in their day-to-day practice that are seldom mentioned in the media. Indeed, the participants in this research described a number of privacy restrictions that prevent mental health professionals from disclosing information about the work they do, including successful interventions with clients. The idea that mental health professionals are unable to voice their experiences was frequently expressed by participants in this study, resulting in the media portraying an incomplete picture of how mental health services are operating.

The findings indicate that current media portrayals create challenges for mental health professionals in acquiring the trust of service-users. This leads to a situation where

mental health professionals are having to spend longer building relationships with their clients before they are able to aid in recovery (Klin & Lemish, 2008). Although media coverage of failing services may raise awareness of the issues and encourage government intervention, portraying a system in crisis discourages help-seeking and leads people to adopt a hopeless orientation. Positive representations of services may potentially have the opposite effect (Stuart, 2003) but were scarcely present in these findings. This suggests a situation where people in distress lack confidence in the capability of the mental health services to get them well. These findings are in line with similar research that has found that distrust of services can prevent help-seeking and lead to the avoidance of certain treatments (Ohlsson, 2018; Stuart, 2006).

Recommendations

The results of this research suggest that the representation of mental health in the media has changed, and predominately for the better. However, areas remain where improvements can still be made, and intervention is warranted. This section presents some of the recommendations arising out of this research.

- 1. Adequately train journalists:** A central recommendation which came out of this research is to train journalists to report on mental health stories in a way that captures the essence of the story while remaining sensitive. We acknowledge the existence of guidelines for media reporting, such as the Mental Health Foundation guidelines (MHF, 2008) and the media Roundtable resource developed for the Ministerial Committee on Suicide Prevention (Ministry of Health, 2011): it is in the adherence to these guidelines where we feel there is room for improvement. While information is available it may not always be effectively utilised (MHF online).
- 2. Media liaison training for mental health professionals and service-users:** In line with the research of Wahl (2003), media training for mental health professionals and service-users was also recommended in this study. Media liaison enables professionals to use their platform to educate the public and promote positive messages. For service-users, training provides them with the confidence to work with the media and allows them to share their journey in a way that can induce hope in others.
- 3. Include recovery stories from a broader range of mental illnesses:** Unlike experiences of mental illness such as anxiety and depression, disorders such as schizophrenia are rarely represented positively in the media. For mental illnesses to be understood and accepted rather than feared, people with lived experience of these conditions need to have their experiences shared in the media. By exposing the realities of living with these conditions, particularly by sharing stories of recovery, the media can normalise experiences of extreme

Participants suggested implementing policies to ensure the media is consistent and accountable for the messages they convey. Policy changes could include consideration of mandatory consultation with service-users before releasing a story and a requirement to provide background information. We believe providing resources on the language to use and the impacts of negative reporting will encourage journalists to change the way they report on mental health stories. This would provide necessary guidance for journalists and would enable an authentic representation of mental health without re-traumatising the audience or reproducing stigma.

distress and disprove harmful myths about mental illness.

- 4. Publish successful intervention stories:** The results of this research suggest that recovery stories are becoming more prominent in the media; however, what participants felt was missing were illustrations of successful interventions. Successful interventions are not often discussed in the media and, instead, the failings of mental health services are emphasised. Services are being poorly represented by the media and at the same time people are being urged to reach out to these services. Without examples of successful interventions to provide balance to the negative stories, people are understandably dubious about the capabilities of mental health services and are unlikely to reach out. Stories of successful interventions have the potential to not only encourage help-seeking but can change the public's perception of services users and gain the public's support for increasing the funding of effective services.

Conclusion

This study found indications of a shift in the media's portrayal of certain diagnoses and suggests that the media are now attempting to change public attitudes by engaging in responsible reporting and opening conversations. Another article addressing the content analysis aspect of this research will explore this finding further, by examining a sample of news media articles on depression and suicide.

Unfortunately, the representation of other areas of mental health has not yet undergone a similar change. For this to occur, the barriers for journalists identified by participants will each need to be addressed. Many of these will call for service-user input, for example accurately representing a successful intervention or the reality

of living with a major mental illness will require liaison with individuals with these experiences (Rhydderch et al., 2016). Further training is needed for the media and service-users to build collaborative relationships and equip them with the skills to retell mental health stories in ways that induce hope and cultivate acceptance.

This research has examined how mental health in New Zealand is currently being represented by the news media, exploring the perspectives of key informants on what the potential impacts of this representation might be. One of the limitations of the research is its small and predetermined sample size. Due to the recruitment method and the different roles of participants, the findings cannot be said to be representative of any wider population. This method was intentional and in line with the aims of the study, as it allowed for different voices on the topic, and potentially contrasting perspectives, to emerge within the scope of this study.

Overall, this research points to a progressive and responsive news media that is beginning to use its influence to create awareness and engage the public in an informative dialogue on mental health issues. While there are still flaws in media representation, positive steps have been taken and we are now seeing a resulting change in society on the value given to individuals with lived experience of mental illness.

Accepted 19 August 2020

Published 15 December 2020

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Free to be children: Preventing child sexual abuse in Aotearoa, New Zealand

Robyn Salisbury (Ed.).

Massey University Press, Auckland, New Zealand, 2020

ISBN: 9780995123007, pp.312, paperback, NZD39.99

Given Aotearoa's grim statistics around child sexual abuse, this book is both timely and significant.

Robyn Salisbury, a Clinical Psychologist specialising in sex therapy, brings together a range of experts to contribute to *Free to be Children*. The book highlights the importance and urgency in responding to child sexual abuse and poses the poignant question: how have we let it go on for so long?

This edited book is filled with robust information, from its Foreword by Children's Commissioner Judge Andrew Becroft to the following 18 chapters.

Each chapter focuses on a different area or perspective on sexual abuse and is written by 16 contributors in total. The book incorporates writing from well-known researchers and practitioners, from a wide range of expertise, specialising in child sexual abuse. They give views and insights from the coalface (sometimes personal as well as professional).

It is very much a book about protection and not so much about healing. Key areas addressed in the book are: survivors' stories, understanding the nature of sexual abuse, children's needs, sexually harmful behaviours, underage sex work and sex trafficking, working therapeutically with those who have been abused, sexuality education and technology and the media. The second half of the book, written by people researching and working in prisons and in community treatment agencies, focuses on intervention and

prevention. *Free to be Children* comprises new and relevant research, data on prevalence and background information on individual psyches, all of which are crucial to understand before we can look at preventing child sexual abuse.

The chapters are written by a range of experts who share their experience and give advice on how we can do better. Contributors to the book include a clinical psychologist, a police detective, a forensic paediatrician, an advocate, a chief censor, a sexual educator, experts on child sex-trafficking, researchers, service managers, psychotherapists, survivors and whānau members. The knowledge shared by these specialists gives the book legitimacy, depth and informs up-to-date best practice.

The book draws together some relatively new areas (and different perspectives) for consideration in the field of child sexual abuse in this country, such as true restorative justice, child sex trafficking, and keeping children safe in this technological age.

The preface acknowledges a limitation in gaining a Pasifika perspective and, as to be expected with a book of 311 pages (and comprising the work of many authors with multiple perspectives), some chapters are easier to digest than others. Each chapter is laid out differently, some filled with stories, experiences and research, and others broken down into more manageable sections with clearly indicated recommendations. While there is no coherent thematic structure to the book, each chapter significantly adds something

new to the reader's knowledge and understanding of child sexual abuse.

This book aims to combat taboos on talking about child sexual abuse—which it most certainly does. It encourages reflection and conversation and strongly inspires people to become informed and dare to take actions (at any level) against child sexual abuse, whether that be in a professional capacity or as a community response.

The title indicates that this book also sets out to provide guidelines or a blueprint on preventing child sexual abuse in Aotearoa and, in the final chapter, Salisbury discusses “a pathway forward”. This should not be read as a stand-alone chapter and cannot be seen as a summary of previous chapters. It gives a wide range of broad and often non-specific recommendations which are important for New Zealand as a nation in preventing and

responding to child sexual abuse. However, personally, I see the main focus of this book being about sharing up-to-date, holistic and relevant information about the unique Aotearoa experience and context around child sexual abuse.

I would recommend this book to a wide audience; in fact, to anyone involved with child sexual abuse, from all professionals working with children who have been sexually abused, to policy makers, students, to survivors and support people. With such breadth of information and experiences it is a *must read* to increase your knowledge of this complex area of abuse.

The topic is a heavy and confronting one, but each contributor writes from their heart. It is essential knowledge for all who care about our tamariki, and even those with vast experience in the field will learn something new from this book.

Reviewed by [Sarah Elliott](#), Social Work Lecturer, Eastern Institute of Technology

Interviewing children and young people for research

Michelle O'Reilly and Nisha Dogra

Sage Publications, London, 2017

ISBN 9781473914520; 9781473914537, pp.226, Paperback, NZD74.50

In a climate promoting “children’s voices,” social workers need to be even more critically conscious of contested and nuanced discourses associated with children’s rights, child protection, children’s voices and child-centred practices. The ethics of what we do and why we do it remain central to our practice. We need to deeply understand the politics of evidence to make sure we are not hood-winked into implementing fashionable and powerful ideas instead of critically appraising them first (Featherstone, White, & Morris, 2014). With a decade of experience as a specialist child interviewer (also known as a forensic or specialist child witness interviewer), reviewing this book offered an opportunity to reflect on my social work practice in general, research, and of course the interviewing of children and young people. In addition, this book helped uncomfortably illuminate how organisational narratives have insidiously influenced my thinking about children and young people at various stages of my 20+ years of social work. In hindsight it was this sneakily invisible and uncomfortable “rub” that caused me much angst and was the topic of many external (not internal!) supervision discussions.

So am I deemed an expert in the interviewing of children? This very question has been debated in courts of law, with judges and lawyers applying my experience against a legalese benchmark of what constitutes an expert. On some occasions I was deemed an expert, on others my practical experience and social worker status did not meet the professional threshold of, say, a psychologist. While I don’t like referring to myself as an

expert of any type, what I am is someone with a lot of applied experience talking with children and young people about complex experiences. My experience tells me that children and young people can and do provide accurate and valuable information. This is of course dependent on how, what and why they are being asked. After all, no research is neutral.

O’Reilly and Dogra incorporate both academic knowledge and applied experiences into the guide. They acknowledge that much of what is known practically about interviewing children and young people comes from other contexts such as clinical and forensic settings and many of the skills from these contexts are transferable to the research setting. The book provides a very general overview of the core skills of a child interviewer. Interestingly, suggestions about specialist training relate to data analysis methods with one brief comment towards the end of the book (p. 196) suggesting researchers may like to undertake specific training in interviewing children.

This book is a guide to help develop a broad perspective on interviewing children and young people for research purposes. The 11 chapters take the reader through the entire process of undertaking a qualitative research project with interviewing as the primary method of data collection. Areas for further training for researchers are also identified. Australian practitioner, Katherine Thompson (2020), has recently reviewed this book. Interested readers are encouraged to read her review for an additional perspective.

Overall, the book was easy to read. It highlighted that interviewing children and young people requires considerable skill and self-awareness and that researchers must carefully attend to the ethical framework of their research question, methodology and methods. There is also a comprehensive references section. The chapter layout is clear and logical, starting with learning outcomes, providing examples, activities and vignettes with author comments to help deepen the reader's learning. Specific references at the end of each chapter easily direct the reader to additional information. Chapter 4 focuses on different ways of conducting interviews. This chapter is useful stand-alone reading for social workers as the 2020 worldwide pandemic sees many practitioners having to communicate with children and young people in different ways. In addition, Chapter 8, on ethical issues, while focusing on the research setting might also help social workers consider wider notions of ethical practice. Throughout the book, complex ideas were simplified to help guide the reader through the research process rather than to engage in academic debate. Helpfully, the authors comment on the "simplification" process so the reader is again reminded of the purpose of the book—to keep it accessible and practical. Possibly because O'Reilly and Dogra attempted to cover lots of information a very general way, I found chapters 7 and 9 to be less cohesive than other chapters, and felt that issues relating to culture and diversity were given only a cursory glimpse. The book might have been made more visually appealing with coloured text boxes to provide some visual stimulation for the reader. Question examples provided throughout the book using the words "I wonder if ..." felt slightly leading and I would recommend caution using such a phrase when interviewing children and young people within a research setting—and more generally.

This book would support social workers and academics to better understand

the many issues related to including children and young people in research. In addition, the text provides some useful opportunities, at quite a general level, to integrate knowledge across a number of domains, for example child development and ethical practice. Social workers may find reading this text helps their overall understanding of a qualitative research process more than some standard social science research methods textbooks. Pages 197–199 provide social work academics with a good framework to incorporate reflective and integrated learning into a research paper. As with any overseas texts, readers within Aotearoa will need to apply professional discretion as to how particular ideas and/or methods are useful for our context here. I wondered whether there are opportunities for social workers with experience talking to children and young people to be co-opted by researchers to help design interview schedules and/or conduct the research interviews. This is one way that social workers can contribute to research and demonstrate that the so-called "soft skills" of our profession are, in fact, highly sought after in the midst of the swirling rhetoric.

My hope is that more social workers will carry out, or be involved in, research involving children and young people and, in doing so, further challenge their own assumptions and biases that a research process helps develop. This book, while a guide for carrying out qualitative research with children and young people, also provides some moments for critical reflection. As mentioned above, this book invoked a deeper response in me than I had imagined. Featherstone et al. encapsulate this for me well by stating "... the politics of evidence has reached a high-water mark, only what 'works' gets funded and the adjudications on the efficacy of various approaches are affected by hierarchies of evidence and easily colonised by moral and ideological projects" (Featherstone et al., 2014, p. 15).

References

Featherstone, B., White, S., & Morris, K. (2014). *Re-imagining child protection: Towards humane social work with families*. Bristol, UK: Policy Press.

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Reflective practice in social work (5th ed.).

Andy Mantell and Terry Scragg (Eds.)

Sage Publications, London, 2019

ISBN: 9781526445674, pp.256, paperback, AUD29

This is a book from the *Transforming Social Work Practice* series, a series of texts for social work students, which is designed to disseminate knowledge and activities to assist students to develop a solid critical thinking and reflective practice regime. It focuses on reflective practice, providing valuable insight for those new to the concepts and practice of reflecting in a professional context. While being well suited to students new to reflective practice, it also has a place in reinforcing knowledge of more advanced students and practising social workers. Reflective practice is a universal concept in social work; so the fact that this text is a British publication and hence refers to the British standards for practice, e.g., professional capabilities framework (British Association of Social Workers, 2018), does not lessen its value within Aotearoa New Zealand. Although this book would likely not be nominated as a course text due to its focus on the UK situation, it is a valuable book for students and educators, especially practice educators. For instance, Chapter 8 focusses on using reflective practice to support student learning during practical placements.

This book is very readable, keeping the reader engaged with the research snippets, case studies and exercises introducing the application of reflective practice. It has clear, well-set-out chapters with an overview of each chapter at the beginning and a comprehensive summary at the end. The authors of the chapters are drawn from both practitioners and academics.

Overall, the book provides a relevant theoretical perspective balanced with

research information, case studies and activities. There is a significant emphasis on integration of theory and practice experience with the use of critical analysis and reflections when applying theoretical approaches to client/practice situations. This is further explored in the valuable emphasis on supervision and the integration of reflective practice to supervision process and the value of reflective journalling (see p.143) to enhance both practice and supervision.

This is a text book aimed at the student and its purpose is, therefore, to educate. The text manages this well, covering theoretical frameworks, self-awareness activities and the application of reflection to practice. The latter involves both professional reflection on oneself and practice reflection on both self in practice and situational dynamics.

The complexity of organisational structures and the inter-professional working regimes are covered with reference to multidisciplinary teams and collaborative working while maintaining professional identity, which calls upon the reflective process of professional foundations, standards and ethos.

Throughout the book, the key standards of the Capabilities Framework for Social Workers in England and Wales (BJSW, 2018) provide a base for development; these standards include, professionalism, ethics and values, acknowledgement of diversity and equality, rights and justice, skills and interventions, contexts and organisations and, of course, critical reflection and analysis.

My overall impression of this book is that it is a worthwhile, student-focused and interactive book providing good depth of content, presentation of theory, research and case study evidence and application activities. While its primary audience is UK-based students, it still provides valuable information for practising social workers and can be applied to the Aotearoa New Zealand context of reflective practice.

Reference

British Association of Social Workers. (2018). *Professional capabilities framework for social work in England: Guidance on using the 2018 refreshed PCF*. Retrieved from <https://www.basw.co.uk/resources/professional-capabilities-framework-social-work-england>

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