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Protective Services: Coercive Social Control
or Mutual Liberation

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The area of protective services for children has always been a difficult one for social work. Protective casework has, and is now, both praised and condemned simultaneously from different elements of the community. The stakes in the protective field are usually high and players are subject to various episodes of the "emotional plague" as Wilhelm Reich would have called it. People in protective work exercise their role as worker in a variety of ways and these 'styles' range from being police-like and oppressive to radical and promoting social change. It is characteristic of this work that people, both client and worker, are forced into a mixed bag of emotional and value conflicts.

The roles which social workers assume are directly related to how the agency views the problems that are its charge, and its function, both overt and covert, in the community. The problem for protective service is that of child abuse and neglect; the function of protective services is to prevent or control the problem. The word function, when used in a social work context, has a meaning beyond the technical. In its historical connection with social work, the functional school has provided a psychological and more important an ideological world view as a framework for many of the traditional social agencies. It is necessary that this world view be understood for a number of reasons.

First, any world view attempts to define a human problem as complex as child abuse or neglect, will limit or allow certain types of corrective actions and not others. The definition of the problem itself involves causal assumptions upon which services are based. Second, depending upon its acceptance in the social/political/financial world, various aspects of the definition/service will be valued and others will not. Third, every world view has social and political implications which either support the existing state of affairs or promote change. Fourth, the issue of which world view (ideology, value system, etc.) determines the focus of protective services, is important due to the social control factor which heavily burdens the shoulders of the protective worker and the client. The caseworker, in effect, buys into and enforces this world view. The question then becomes for all of us, do we know what we are buying? Thomas Szasz (1970) raises the same issue:

Every ideology presents the individual with a painful choice: What should be his attitude toward it? Should he be a loyal ideologist or a critical thinker?

The mental health professional who chooses to be a loyal member of his profession will thus embrace the ideology of mental health: he will teach it, apply it, refine it, distribute it as widely as possible, and above all, defend it against those who assail it. Whereas the professional who chooses to be a critical thinker will scrutinize the ideology: he will analyze it; examine it historically, logically, and sociologically; criticize it and hence undermine it as an ideology.

The intent of this paper is to look at some alternatives for protective services that originate in a different world view perspective.

Before we can understand where we should be going, we have to come to grips with what type of assumptions we presently operate on, and what assumptions we should move toward. The present protective ideology has been based upon what has been referred to in the sociology of knowledge literature, as the collectivist (Goroff, 1973) and diagnostic paradigms. (Warren 1971) Our collectivist assumptions are those which maintain,

.....that the highest of all values is the society (and the peace and harmony it guarantees). While individuals are important, they are second to the community, for without the community, the individuals are insignificantthe internal peace of the community is the highest of all values; therefore people must order their behavior to the priority of the community.

The diagnostic paradigm relates to our collective assumptions; the problem that social work has to deal with then becomes the "individual deficiency" in the family, child, group, etc..... To provide services under these assumptions involves the residual or 'mopping up' operations we witness around us. Typical of this is the way in which poverty is attacked. We provide Headstart, WIN, career training, etc. The only trouble is, is that poverty results from the lack of money not education, babysitting services, etc. When workers buy into the collectivist-diagnostic approach they must be aware of the assumptions on which the problem is supposed to rest. We accept a definition of the situation, when, as Laing (1972) has so aptly stated, "It is we who have to discover what the situation actually is!"

In opposition to this, is the competing paradigm revolving around individualistic-social change beliefs. Individualism is:

an ideology which maintains that the person is the highest of all values and the vindication of a society is to be found in its assistance in the maximum unfolding of the individuals potential.....society and institutions are instrumental, i.e., institutions are made for people and not people for institutions.(Goroff, 1973).

Within these assumptions our point of orientation becomes the "dysfunctional social structure" and that "the problem" is a system output rather than inability to function within the social norms.(Warren 1971)

It is initially essential that issues for practice be divided into "work-place issues", and "worker-client" issues (Steinback, 1974). At the outset there are a number of work-place issues which need to be encompassed within a new conception of protective casework. First, activity should be aimed at opening up the agency's power and decision-making structures so as to be more representative of client and worker interest. Within the protective field that means worker-client representatives (voting) on all boards is essential. Part of our social work practice should be to encourage consumer involvement as well as our own in those system decisions which affect the lives of all of us. The absence of this involvement is a class phenomenon in the Marxist sense.

For example, the class nature of protective services is especially visible when we look at the composition of governing boards. Board members are usually recruited from the upper middle and upper business strata of society. Many are quite wealthy and politically influential. Almost without exception, there are no service consumers on these boards. Board members are usually recruited through a nominating committee and/or at the recommendation of the various executives. The reason for this phenomenon is simple: money. Private agencies are dependent for a large part of their funds on solicitations, contributions, and participation in the United Way and Community Chests. It has only been recently through the purchase of service contracts, that federal and state funds have been introduced. This new source of funding has not, however, necessitated any change in the structure of protective services. The funding has increased the bureaucratic malaise within organizations and reinforced the "noblesse oblige" bias. The restrictions on this money usually gear it only to casework services for people on welfare. Public, governmental protective service suffers some of the same difficulties in the legislative appropriation process. Protective work is quite subject to the criticism expressed by Edgar and Jean Cahn: (1968).

Professionals stand guilty of having structured a situation where the poor may speak in only one capacity--asking for help, acknowledging need and dependency.....By confining the poor to speaking in that role, professionals purport to

prove an incapacity to function responsibly in any other roles.

With the boards as homogeneous as they seem to be, they are prone to reflecting a conservative approach or what is known as the residual view of social welfare. (Romanyshyn-Romanyshyn 1971) Even within the standards set by the CWLA (1973) not much attention is given to the composition of the governing boards:

5.6 COMPOSITION OF GOVERNING BODY

The governing or advisory board should be representative of the community served, which may include individuals served by the agency, and should truly express the community's concern for children.

The plain fact is, that the world view of board members has not been challenged through minority group or client input. There appears to be no major effort to change or improve this situation. The prevailing or dominant protective ideology has posed the problem in such a way as to preclude these types of structural changes within the organization. There seems to be little or no awareness and recognition generally of the political and class role of protective services.

There are several obstacles to that awareness that are intrinsic to the protective philosophy. One obstacle inherent in the philosophy is its near total emphasis that the problem of child abuse/neglect lies within the internal functioning of the family. The problems are based in the inadequate functioning of individuals. The response of society then, when the issue is formed in this way, is helping families cope. The implication is that the social order and arrangement of power relationships and forces are not viewed as causes of family dysfunction. Racism, sexism, alienating work, housing, bureaucratization, school socialization, etc., are not systematically included within the philosophical outlook of protective services. The emphasis is on adjustment not change. (Radical Therapist Collective, 1971).

This point cannot be over stressed. It is the family that is investigated, treated, helped, etc., and in many ways victimized. It should be said that the very manner in which we define casework lends itself to this very purpose. An alternative ideology would pose the issue in a different manner. The women's movement, for example, has provided a clear example of a changing world view. Prior to the changes of the 70's the emphasis was on treating the individual woman. Then, she herself, began to learn that the core or root of many of her problems involve her second-class status and oppression by the social structure. This expansion of consciousness led many to action and social change. The point is, that as

long as the problem (female neurosis, etc.) was defined as being totally within the person, no awareness and effort was being directed at the social and political causes of her mental illness (if you wish to use that term). This example leads us to speculate and re-define the problem of child abuse and neglect in terms of the social factors which promote and maintain human alienation from the self and others. (Radical Therapist Collective 1971)

A second obstacle in the protective philosophy is related to the first. If in fact we do not define the social/political factors within the scope of the problem, then the awareness of those very problems within the service unit is also ignored. Like many other organizations, protective services has its share of institutionalized alienating practices and policies. For example, the hierarchial structure sets supervisor against worker not only within the contexts of real power differences, but also within a belief system which views the worker as dysfunctional should he/she not be able to cope with, or 'treat effectively' client problems. The typical worker evaluation process reflects the real oppression of this structure/belief hegemony.

A third obstacle to awareness in the protective philosophy is that it disguises in rather altruistic terms the political and police-like function of the protective worker. An example from a flyer that is sent from time to time to parents whom the social worker is intending to visit illustrates this point.

THE GOAL OF CHILDREN'S PROTECTIVE SERVICES

Our goal is to help parents so that they and their children may be happier and healthier.

Fortunately, parents are able to use the help provided by the CPS to improve the care of their children in nearly all the thousands of families served.

Only in the few situations where children are seriously neglected or abused and when parents are unable to use help to improve conditions, does Children's Protective Services find it necessary to seek court assistance to protect children.

We hope you will see your social worker as a person who wants to, and can, help you and your family. (MSPCC)

Contrast this to the statement by a local protective agency board president written fifty years ago.

The emphasis on modern life is largely on pleasure. But there are some things which do not change. The duties of parenthood remain the same and it is part of our work to force the culpable parent to shoulder his burden instead of leaving it to be born by the public. (Author's Emphasis) (Cobb 1924)

Despite its repressive nature, it is candid. The effect of the present public relations over-kill is to mystify and deceive both client and worker as to the potential outcome of their transactions. Both parties are placed in continual double binds with regard to honesty, confidentiality, ethics, and morality. In the old days an "agent" of the Society went out to "investigate" a "report". Today that isn't done. The community sends out a "social worker" to extend "casework services" in response to a "request" from one of its members. In fact, protective work is fulfilling the same function in a very similar manner. Granted, times and attitudes have changed; but in protective services, the ideology, and its direct service component have remained essentially the same. The PR, however, has taken the Madison Avenue trip due to its primary fund raising function.

The foregoing social analysis implicit in the protective philosophy, reveals numerous blocks which prevent an awareness that would view consumer involvement in decision-making as an absolute necessity.

Another work-place issue which needs to be re-defined in protective services is that of social action. Administration and workers must conceptualize "the agency as an instrumentality for effective intervention in some of those environmental factors which shape the life of clients". (Sternbach, 1974) This does not only refer to helping clients utilize community resources to cope with outside stress. Social action is the creation of services based upon a radical ideology of active and collective resistance by the worker, his colleagues, and the client, to repressive and sub-human political and social policies. Resistance is a valid part of social casework! It is not the product of 'projective defenses'.

The social action aspect of protective service is typically described as cooperating with other agencies and organizations toward the improvement of community conditions which adversely affect children. This description is less than accurate. A quote from a less publicized statement issued by a research director during one of the periods when social workers were becoming dissatisfied with limitations on their ability to act illustrates this point:

Social action is a cop-out. It's a cop-out because it's something everybody can do and almost everybody does do even down to individual voting. It's a cop-out because it's so easy to do.....But mostly it's a cop-out because it directs our attention to the other fellow, the other institutions and away from our own setting and work.

Related to this is that as our pluralistic society is organized there are areas of interest advocating the best program in those areas--housing, day care, health, etc., and what can we accomplish by duplicating those efforts? (Cohen, 1970)

This statement reflected the posture of a protective agency toward social action, and message came through clear; keep your nose to the stone, and stick to business. The problem is, however, it's a stone that may be leading nowhere, and whoever defines what business is, controls it.

As David G. Gil (1974) has so aptly commented,

Thus, one cannot help wondering whether these specialized, symptom-focused agencies are, indeed, committed to the eradication of social problems, or whether, perhaps, out of a symbiotic relationship with and a myopic perspective on them, the agencies themselves become factors contributing to the perpetuation of the problems.

The main point in this paper is that the philosophy which undergirds most of protective services supports existing institutions by the very nature of the assumptions upon which it rests.

Social workers must engage in activity which promotes debate and frequent examination of agency-wide goals, philosophy, policy, and services. With the constant emphasis on doing the job we have failed to reflect critically what the job is! These issues must involve worker-client input. Laing (1972) made a rather interesting comment in this regard, he said:

Another danger is that we let others do the theorizing while we do the work. None of us can afford to take on trust statements by people who think they can tell us what we are doing, or should be doing: people who do not actually do the practical work themselves, but who feel they are in a position to theorize about it. This is a dangerous state of affairs.

It is the worker and his client who must assess the issues and become aware (with a capital A) of what is happening to them. We may not want to live with our clients in the Oscar Lewis tradition, but unless we involve them actively in the structure we may never really know them as people but only as clients.

The people that do the work, take the chances, risk their emotions and sometimes their physical well being are not involved in a meaningful way in the decision-making process. Committees are born and they die; but when push comes to shove decisions are made by the select few at the top. Unionization of staff typically has been discouraged not only by the powerholders, but by those workers who have already internalized the myths and legends of bourgeois professionalism in protective work. When staff get worked up about the need for a social change perspective in private agencies, they are anesthetized with moans and groans about the IRS rulings on their tax exempt status. Sadly, protective workers and administrators do not challenge these rulings. Not surprisingly, the definition of a political act conveniently excludes the heavy and on-going establishment legislative maneuvers and inter-bureaucratic power games. Workers should become aware of and identify those areas within the structure or practice "which may reflect institutional or individual oppression. Included are questions around racism, sexism, classism; poor communication and misuse of power." (Sternbach, 1974) Within this activity should come the protection of worker rights, opposition to practices such as the dress codes which enforce societal sexual identifications, concrete action on the hiring and training of professional and non-professional indigenous social workers, challenging arbitrary promotional and hiring practices, overcoming obstacles to unionization, etc...

This raises another point. We need each other as people. Protective workers as a collective are performing a service. Within that collective we must not deny the intimacy that we need to share as human beings. Workers need to become involved in group activity so as we can grow as a collective. Those activities can involve peer supervision, hiring, salary negotiations, professional and administration matters which are now within the purview of the hierarchy. Issues such as, whether or not to go to court, problems with welfare, ineffective or repressive courts or police, etc., can be examined and acted on effectively only in a collective. The social worker should try "to build in a structure(the opportunity for) meaningful social relationships through the creation of the small face-to-face collective." (Sternbach, 1974).

In relation to worker-client issues, we need to think of human relationship within a democratic framework, rather than the authoritative one which we presently use. (de Chenne, 1973) It is within an authoritative framework that we become actors within various professional and

community role expectations. We accept the medical/diagnostic/psychiatric model and try to justify unethical practices such as harassment and invasions of privacy. In the democratic framework we hope to begin to shy away from stereotyping in terms of ourselves as well as the client, and develop a more humanistic approach to social work practice. In protective work we need to refine and develop our methods within the democratic paradigm and center our treatment plans around several core elements.

First, it is necessary that our work with clients be as explicit and as open as possible. The client must be made aware of where the worker is coming from, where he will go, and why that is important. We should get away from mystifying the client (especially where court action is to be initiated) and having hidden agendas. The protective ideology perpetuates the deception of clients through the use of terminology which disguises intent and function. In protective work a client should be given on his initial visit a written list of both his and his child's legal and ethical rights with regard to the agency and the law. This is to insure that work with the client remains as much as possible within the protection of constitutionality and fairplay. To fulfill the mandate that explicitness puts upon us, the agency must embark on a policy of open records and open staffing. The client should be allowed to inspect and review his/her record in its entirety and also to attend those staff or consultation meetings where his/her child or family will be discussed. Laing (1972) notes that many of us talk as though we know or understand what is going on, when in fact we do not. When our impressions are put into a record or expressed at a meeting they are taken as truth, and begin to develop a social power of their own which may be oppressive to the client. For example, relationships between protective workers and other professionals in welfare offices, courts, police clinics, housing projects, etc., usually develop their own mutual investment over time. The result is that the poor connected with these various services have little protection from invasion of privacy since confidentiality issues are over-ridden by the need for expediency and maintenance of an informal data gathering system used inter-changibly by all members. The poor, because they are forced to be involved with the human services bureaucracy, have to continually contend with enforced intimate self-disclosure. The informal data gathering system survives on these disclosures which are important determinants of agency action.

The more the gathering system becomes entrenched and mutually reinforced, the more certain points (agencies) become referral sources, to protective services. The main referral sources are those which deal directly with poor people. Combine this with an economic system which reinforces the "casework" approached to poverty and an overwhelming pressure is created to further develop these referral agents. The middle classes generally are not subject to the same intensive monitoring and surveillance procedures due to their relative isolation from public social and welfare services.

Other writers have already indicated that social welfare policies and practices serve as coercive social control mechanisms for poor people unlike other segments of society.(Goroff,1974)

Second, treatment must be negotiable. Protective services because it has control implications, must be of a contractual nature. This contracting with the client (and in many cases this should be written) helps to insure a give-and-take process and protection from unwanted forms or areas of treatment. A social work contract is an explicit agreement (written) developed by the worker and the client concerning "the nature of the target problem, specific strategies and goals of social work intervention, and the roles and tasks of the participants."(Maluccio and Marlow, 1974) It is within this contract, or the list of rights that provisions should be made for: 1) change of worker at the request of the client; 2) periodic review by the client, worker, and another staff person to insure agreement on means and ends of intervention; 3) procedures within the agency to handle grievances by the client against the worker.

Third, the treatment or service offered and engaged in with the client, must be teachable. We should attempt in treatment to help the client learn those skills and assessment capabilities that we ourselves use. The purpose of this is so the client also can become an agent for change. This involves interpersonal communication styles as well as manipulation of the environment. Awareness must be heightened on how social, political, and economic systems initiate, reinforce, or aggravate internal family or individual personal problems. Within protective work this may be the agency, welfare, the courts, etc....Clients should be given an opportunity to learn how those systems supposedly designed to help them, may be performing another, not so helpful function. In being teachers our emphasis is not only on individual responsibility for behavior but also in achieving through direct action a more responsible social order. It is important that we lay the groundwork, encourage, and support actions by clients to change their lives and others through legitimating their efforts by our continued relationship with them.

Fourth, it is important that the relationship with clients be based in a mutuality of problem solving and exploration. The protective worker must allow himself/herself to be explored and offer as well as expect self disclosure. In the authoritative/collectivist, diagnostic view this is quite limited. The worker is the representative of the community rather than a person. Our way of relating should encourage authenticity and little game playing. (Berne, 1967) Our commitment should be to the client rather than the system. It is only through the development of this mutuality that we can learn to feel what the court process is like, what welfare is like, what standard housing is like, etc. While increasing our real empathy we will gain more respect

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