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THE DOMAIN OF SOCIAL WORK: WHAT IS IT?

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ABSTRACT

Cast within a framework derived from general systems theory, the authors examine the domain of the social work profession. Domain is first defined as having several components. These are specified and fully expanded as Claimed Domain, Domain Competition, Emerging Domain and Unclaimed Domain. This elaboration is followed by a discussion of some of the constraints that impinge upon the profession's ability to define and to choose its domain.

In the early eighties, the social work profession still grapples with the issue of domain. In terms borrowed from general systems theory (Berrien, 1968) it is suggested that domain is a bounded sphere. Domain can be identified by some differentiation in the relationships existing between the components inside the boundary and those relationships that transcend the boundary. In adapting this concept to social work, Kahn in 1969 stated that, to a profession, domain is "a limited sphere of activity prescribed by (1) its societal mission or goal, (2) its functions and methods of practice and (3) its social problem areas or fields of service." Each of these three characteristics remain under debate to the present. Meyer (1981) admonishes that we must define who we are, and what we do, or others will do it for us. Social Work, in January 1981 brought out its second issue on Conceptual Frameworks in response to continuing uncertainty as to what social work's purpose is and what it should be. Despite these uncertainties, through the years the person - in - environment focus has endured and prevailed (Compton and Galway, 1975; Briar, 1981). This focus has led the profession to a dual orientation on both micro and macro phenomena, that is, helping individuals and families and also attempting to humanize organizations, communities and social institutions.

Thus, over time the profession has developed a wide range of methods or modalities to address these orientations beginning with social casework and currently including social policy analysis and formulation, and social planning.

While the profession, at least theoretically, does control its mission or goal and its methodological repertoire, it has much less control over most of the third aspect of domain, social problems areas or fields of service such as mental health and drug abuse in which "turf is shared". Here, it is appropriate to cite Brieland's (1981) succinct definition of domain. He declares that domain denotes what professional group is in charge of a particular area of practice and who makes the decisions.

While we agree with this definition, in our view, domain may be defined as a multi-faceted concept in which further differentiation leads to a series of definitions of domain components that can be useful in their application to the profession. These are Claimed Domain, Domain Competition, Emerging Domain and Unclaimed Domain. (Waring and O'Connor, 1981)

Thus the major purpose of this paper is to present, describe and apply a conceptual approach for the inspection of social work's domain. It does, then, offer one kind of compass from which to take a bearing on the profession. In our discussion, we will emphasize that aspect of domain, the social problems area or fields of service that continues to change in response to factors at the societal level. We will also discuss some of the constraints on the profession in establishing its domain.

THE DOMAIN FRAMEWORK AS APPLIED TO SOCIAL WORK

Since domain may be viewed as comprised of component parts, the definitions of these domain components will be presented below. We begin with Claimed Domain.

Claimed Domain - refers to what the focal profession asserts are its goals, the practice methods (modalities) it uses to reach these, and the social problems areas in which these methods are applied.

Despite a lack of consensus about missions and goals, social work has maintained a focus on the person - interacting - with - environment even though difficulties in characterizing these interactions persist not only in social work but also in the social sciences. However, in emphasizing one or the other of these foci, the person or the environment, the profession has moved to develop practice methods that address both. Social casework emphasizes intervening with the person, while social policy and social planning emphasizes intervening with the environment. From about 1920 until the 1960's, social casework and its supervision were the profession's primary domain methods. From 1923, when Case Western offered the first course in group work, through 1937 when Grace Coyle

made the distinction between group work and recreation, group work methods developed along with casework, though at a slower rate. In the 1940's and 1950's, but particularly during the 1960's, community organization methods grew and developed.

Yet, another practice method that the profession claims is liaison or linkage. In 1972, Lubove urged the profession to maintain this part of its heritage in stating that:

"If social work could claim any distinctive function in an atomized urban society with serious problems of group communication and man's deprivation, it is not individual therapy but liaison between groups and stimulation of social legislation and institutional change." (pp220-221)

More recently social administration, social planning, social policy analysis and formulation have appeared as part of the profession's methodologies. These macro interventions are intended to more effectively influence the social structural arrangements, institutions and organizations that affect and comprise the context of practice and encompass clients' life situations. Nevertheless, a majority of graduates are still entering the direct services, that is, interacting with individuals and families (NASW News, 1973).

Among the fields of service, family and children's services both in the public and private sectors are generally recognized as a domain of social work. (Brieland, 1981) However, currently the trend to job declassification within the public agencies is leading to a situation of domain competition. While the income maintenance system no longer attracts social work personnel in significant numbers, still the profession maintains its concern for social policy within it. (Brieland, ibid) And professional social workers do hold supervisory and staff positions within this domain.

Domain Competition - refers to the condition in which the focal profession vies for control of either social problems areas or of practice methods.

Competition for domain occurs for various reasons. One is that changes at the societal level also change the size of domain. The target population within the social problem areas may increase, for instance, by being redefined or through population changes. As established domains become ever larger, they become attractive to other professions; an example is health. Another reason for competition is that as new needs emerge, giving rise to new domains, these are often perceived simultaneously by several professions, some of which may have a fairly well developed and readily applicable technology. An example is the capture of state level administration of the human services by graduates of business schools or public administration programs.

A third reason for domain competition is that some roles, such as consultant, involve the supplementation of knowledge often acquired through specialized work rather than professional training. Given this circumstance, social work organizations tend to enhance their status by turning for consultation to disciplines perceived as having a higher status than social work. (Kadushin, 1977)

A fourth reason is that major social problems areas are so complex that they require the application of existing knowledge from across several disciplines, or the development of new expertise. An example is gerontology, in which psychologists are interested in the cognitive changes in the aging process, business school graduates are concerned with pre-retirement and estate planning, and educators create programs for the life-long learning needs of the elderly.

Under these conditions, social work faces domain competition both in practice methods and in nearly all social problems areas. For instance, the function of social casework, if it is seen as counseling with individuals, families and groups, is now being practiced by others in the human services such as rehabilitation counselors, marriage and family life counselors, and clinical psychologists. This is largely because the numbers of people who now seek some form of guidance have continued to grow, and this is perceived by several professions.

With the recent proliferation of the human services and with the development of state and state-regional organizational structures, new opportunities for employment in administration were also observed by other professions, many with higher status than social work. Under these conditions few social workers hold high level administrative and policy positions in the human services. (Scurfield, 1979)

Many are occupied by business administrators, attorneys, physicians, and non-professional career civil servants. Even the umbrella structures, such as Human Resource Services, that cover the fields of child welfare, gerontology, mental health, and drug abuse are generally devoid of social work leadership. (Gummer, 1979; Sarri, 1980) An exception is the community mental health movement, in which 31 percent of the administrators in community mental health centers are social workers. (US DHEW, 1978) Another is family and child welfare services.

Many of the social problems areas in which the profession practices are not only complex but are also located in settings dominated by other disciplines. For example, the health field, including mental health, in which one fourth of the NASW membership is employed, has long been dominated by the medical profession. Thus, in controlling policy such as hiring and budgets, it is physicians who ultimately decide what disciplines will be employed and what their salaries will be. Similarly, in other host settings such as schools, nursing homes, prisons and the work place, the profession faces the same conditions.

Further, in some of these host settings such as schools, the dominant discipline, education, is now influencing the requirements for certification for school social workers. More education courses and therefore fewer social work courses are being insisted upon. Thus, conditions for entry into a particular social work speciality are being shaped by another profession.

Emerging Domain - refers to new spheres of activity that are generated by new and unmet social needs resulting from the processes of social evolution.

One such emerging sphere of activity which is a field of service is family planning. While some of its roots grew from the planned parenthood movement that emphasized spacing children and limiting family size, family planning today is at the frontier of medical discoveries that have enormous social, psychological and ethical consequences. Infertility is being countered by new controversial means such as test-tube fertilization and the recruitment of voluntary female hosts. Genetic counseling and the use of amniocentesis for the prevention of birth defects is carried out during pregnancy. As more and more women in high-risk age groups give birth, a need for such counseling will increase. (Selle, et. al., 1979) Genetic counseling prior to conception is more traditional. Yet, as in the case of sickle cell anemia, it has profound social and psychological ramifications. Further, family planning with a responsible parenting and self-fulfillment focus is being offered to thousands of adolescents in their early teens. As a social problem area, this is an emerging domain of particular interest to the fields of religion and of health which are likely to compete because of value differences. (Calahan, 1969; Sklar and Berkov, 1974) Social work might offer family planning services from a less biased perspective. It is the one profession that attempts to integrate social and psychological aspects and, through a clear translation of medical information, attempts to offer clients the opportunity for informed decision-making. Since social workers are already employed in hospital clinics, child welfare agencies and schools, making their services available for this particular function might involve reassignment or increased caseloads and might necessitate their receiving some specialized training.

Having its origin in social work sponsored Travelers Aid is relocation service. (Smart, 1971) Relocation is a social concern across the country, but especially where migration is consistently very heavy. This holds for the sun-belt states of California, Florida and Arizona, where many retirees and those who suffer energy shortages are moving. Further, whenever there are dislocations and population shifts brought about by industries' search for cheaper labor, by a large industrial shutdown or by urban redevelopment, a need for assistance with relocation occurs. In 1977, the number of salaried employees transferred by their companies was 22 percent. (Perlis, 1977) Such uprooting often produces stress for all family members - spouse and children - who give up friends,

community, and contacts with relatives. Thus far many corporations have ignored the problem. However, over the last two decades, relocation management firms, on a fee basis, have provided corporations with services in finding appropriate homes in a desired community for those who are transferred. (Gaylord, 1979; Jorgensen, 1979) Their services clearly fall short of meeting the needs of employees for recreating their social support system and for adapting to what may often be a very different cultural environment. Relocation, then, is a natural service area for social work to enter. It fits with the profession's values and methodology. It could be financed on a fee basis through contracts for services between corporations and social service providers. For those abandoned by runaway or shut down industry, the financing for this service would probably have to come from the public sector.

The profession has a long history, within industry and unions and labor, which comprise the domain of industrial social work. (Kurzman & Akabas, 1981) In the early part of the century, social workers, consonant with their social activist values, worked in the labor movement toward the founding of unions. A pioneer in planning and providing an array of services in unions was Bertha Capen Reynolds. (1975 Reprint) Some others have continued this tradition. However, social work has had lesser involvement with industry; that is with the work site and employers. Industry has been viewed by social work as exploitative of employees, for example, by knowingly injuring their health, and also as exploiting natural resources - both carried out in the service of a profit orientation. Recently, there have been signs of corporate responsibility to employees. One sign is the concept of a "human contract . . . developed by labor and management around the conference table in a climate of cooperation . . . and administered by a professional tribunal in industrial social work". (Perlis, op. cit) Further, in 1978 the first National Conference on Social Work Practice in Labor and Industrial Settings was held in New York City. This three-day conference brought together one hundred masters' social workers functioning in all aspects of industrial social work. In doing so, it signalled a confirmation of the expansion of this practice domain.

While medical professionals offer some occupational health services, and psychologists do some research on productivity, no one profession staffs this domain in large numbers. (Fleming, 1979) Further, the policy decisions to contract for services are made by employers and unions. If social work can resolve its value conflict with industry, that is, the work site, and view this arena as a major interface between the person and the environment where prevention is possible, then it might begin to develop and sell its services as a viable product. (Jorgensen, op. cit) These services might be purchased on a contractual basis as is done by Xerox in Rochester, New York, or social workers might be retained as regular salaried employees, as they are at Polaroid in Boston.

A second emerging or perhaps re-emerging domain in social work is corrections. Within criminal justice, social work and corrections parted company in 1915 when probation officers withdrew from the National Conference on Charities and Corrections, partly to protest social workers' intention to formalize educational training. (Chute & Bell, 1956) In 1945, at the National Conference of Social Work, Dean Kenneth Prey opened a debate, that, again, was to change history by suggesting that social workers, who were committed to a theory of self-determination, might also have an important role in trying to motivate people to accept help and that this could be done even within authoritarian settings. By 1959, the National Association of Social Workers had developed a corrections curriculum. (Studt, 1959) However, until recently the profession still limited its participation to juvenile justice and to adult probation. Today there is evidence that it is moving in small but noticeable numbers into other parts of the system, such as police departments. (Collingwood, Douds, and Williams, 1976; Wolf and Rudman, 1977; Burnett, et. al., 1971)

The entire correctional field is destined to expand due to a combination of societal conditions. The population continues to grow, even though its rate of increase has slowed. Accelerating technology, unstable economic patterns, and a changing correctional philosophy - all are contributing to a need for more social control. (Fox, 1977) Therefore, corrections will continue to offer opportunities for social work. Corrections, like industry, has posed a value dilemma for the profession. Corrections is also a host setting in which social work has a more limited administrative and policy-making role. The exception is in the area of juvenile corrections where, often, social workers administer and staff juvenile institutions and group homes. However, both industry and corrections offer opportunities for clinical social work practice. (Waring, 1982) Further, in these two social problems areas, there is little competition from other disciplines such as medicine, psychology, sociology, and nursing, none of whom are represented in large numbers and who are also, in these instances, employed in host settings.

Unclaimed Domains- are those fully developed spheres of activity, whether practice methods or fields of service, that are not claimed by any profession.

Within the profession, there is an important unclaimed practice method - research. Until very recently, social work did not prepare research specialists. For instance, although the Federal call for evaluation is a decade old, only a few schools of social work have prepared program evaluators. Social workers equipped to study the direct services by process and by outcome are still very few. Rather, professionals with recognized research skills, especially those that mesh with the social services such as psychology and sociology, have filled this void. (Austin, 1977) However, with the dramatic changes in social work education during this past decade when the growth of doctoral programs accelerated, this situation may change. Those services that

might be expected to be staffed by social work researchers are the larger family and childrens services. The need for data management systems and for assessing the impact of services is also creating job opportunities.

A field of service in which no one profession has yet emerged as dominant or has been recognized as holding the major responsibility is domiciliary care. (Morris, 1977) In a small way, church-sponsored group homes, both for wayward and neglected children and for the elderly, have been in operation for many decades. Most have been under social work auspices. With increases in child abuse and neglect and with increases in the elderly population, this form of care probably will expand, in part to prevent institutionalization and removal from the community which is now seen as more expensive and less humane. Kahn and Kamerman (1980), and Austin (1980) view domiciliary care as a part of the "sixth social service" that is, "social care" along with personal social services and family-centered psycho-social services. At present, social work is strongly involved in administering and staffing domiciliary care for children and also for those elderly who are in nonmedical settings. While some social workers are employed in nursing homes, few nursing homes are owned or operated by professional social workers who do not view themselves as proprietors or as managing a service that produces profit. However, this is not necessarily congruent with the profession's move toward accepting the role of private practitioner, though the profession may argue that such a move enhances its status. New competitors for domiciliary care of the elderly are likely to be members of the medical profession who do invest in the nursing home industry.

Today, there is general agreement that assuring living arrangements at the community level for dependent and deviant populations remains an unclaimed domain, one for which no profession has accepted the responsibility. While the medical profession will probably continue to assert its willingness to take responsibility for those who are physically dependent, it would seem that social work, in consonance with its history, values, and skills, could expand its practice by acknowledging its competence to provide living arrangements for those who are developmentally, financially and socially dependent. Even during times such as these, characterized by economic uncertainty and political conservatism, society demands provisions for dependent and deviant groups - those whom we profess to serve.

DISCUSSION

In making decisions about domain, the profession is constrained by the broad environment of its societal context. One part of the context is the social, political and economic climate which defines both social problems areas and the extent to which funding will be made available. Another part of the context is other disciplines with whom the profession competes for turf. Some of these, such as medicine and psychology, are older and greater in number, have politically influential membership associations, and have gained fuller acceptance and recognition. Others such

as marriage counseling are younger and are now vieing with social work for recognition and political influence. These newer professions are supporting the movement to declassify social work positions and thus expand their own employment opportunities.

Yet social work has its own history and uniqueness. This might lead it to reaffirm its acknowledged claim to the fields of family and children's services and to those practice methods it developed and still dominates - social group work, community organization and liaison-linkage. Further, challenging opportunities for all professions lie within unclaimed and emerging domains. The unclaimed domains of domiciliary care and research for the social services and the emerging domains of family planning, relocation and industry - all beckon.

Whatever decisions the profession does make will be influenced internally by its values and also by the stage of development of its practice repertoire. Externally, such decisions are influenced by forces at the societal level. These influences also lead to changes in service delivery that may then lead to new practice roles. This, again, has the potential effect of expanding the practice aspect of domain. The profession then finds itself continuing to develop, but without examining and, thus, consciously deciding whether these new roles are what it wants and can perform well.

The profession can not keep waiting to define its domain - what it wants to do and what it can do. If it does not, then in the words of Carol Meyer (1980), the external environment will decide who social workers are and what their purposes should be. Coercion will be victorious over choice. What decisions will the profession have the courage to make?

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