A Q-SORT STUDY OF FAMILY CENTERED CASEWORK PERFORMANCE

bу

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ABSTRACT

The evaluation of social worker performance is a problem that frequently confronts the social work profession because the profession continually seeks to discover what it is doing for, and with, the clients it serves in order to learn how to serve them better.

A number of studies of effect have been launched to this end. The Area Development Project of Vancouver, British Columbia, is one such study. The project seeks to test a specific treatment method, "integrated family services", on a selected group of one hundred multiproblem families. The experimental design calls for one hundred families in the treatment group and two hundred families in two control groups in order to test the hypothesis that the demonstrating services of the project are more effective in improving the functioning of families with complex problems than the "usual agency services" of health and welfare agencies.

Studies of effect on casework services too often assume that there is no significant variation in the performances of professionally trained social workers when there is little reason to believe this to be the case. This study, which was carried out in conjunction with the Area Development Project, aimed at developing a Q-sort measure of family centered casework performance that could be used to test the hypothesis that there are significant differences between the inputs of professionally trained social workers. The proposed instrument would also document any differences between social worker performances should the hypothesis prove true.

The completed Q-sort of Family Centered Casework Performance was applied to the Area Development Projects' treatment group social

workers to generate a performance score for each of the workers as well as a profile description of the ideal family centered casework performance. It was possible to demonstrate that the inputs of the social workers differed greatly, while at the same time develop a precise profile description of the projects' "integrated family services".

The study also attempted to relate the performance levels of the treatment group social workers to client movement in the cases that the workers carried. The establishment of a definite conclusion in regard to this relationship was not possible because of limitations in time and data, however, a means of analysis was developed for use with final data from the Area Development Project when it becomes available.

The introductory chapter gives a brief summary of the problem of social worker evaluation, alternative ways of dealing with the problem and a statement of the scope and limitations of the study.

The Theoretical framework of the study and the methods utilized are outlined in Chapter II. In Chapter III, the study findings are presented along with descriptive data on the study sample. The thesis concludes with a brief summary of the study and its! conclusions followed by some proposals for dealing with final data on client movement when they become available.

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CHAPTER I

INTRODUCTION

THE SOCIAL WORK PROBLEM CREATING A NEED FOR RESEARCH

Summary Statement of the Problem

"A number of studies dealing with the treatment of the multiproblem family have been predicated upon the assumption that a 'professionally trained social worker' represents a uniform input. A casual observation of worker characteristics, philosophy and worker methods suggests that this is a very shakey assumption." (19, vii, p. 15)

If this assumption is false and different social workers represent a differential input it is important that we know how the input differs not just that it differs. This specific problem is actually part of the more general and continuing social work problem of social worker evaluation thus a research solution for this problem can and perhaps should have wide applicability.

This study was carried out in conjunction with the Area

Development Project of Vancouver, B.C. Their major research goal,
according to their research design, is to compare multi-problem

families receiving "integrated family services" from the project with
similar families receiving "usual agency services" from several
agencies to see if the specific kind of intervention proffered by the
project is a more effective means of helping multi-problem families
overcome their diverse and serious problems. (19, iv, p. 1)

The Area Development Project set up a treatment group and two control groups, with the treatment group receiving the integrated family services and the two control groups receiving usual agency services. This represents two broad types of worker inputs provided by two groups of social workers. It is obvious from the above that the problem of social worker input is of immediate relevance to the

research goals of the project.

The Area Development Project has had it's forerunners and it will no doubt have followers thus there will be future projects of this nature that will share this problem of worker input. Any research solution will therefore be of at least passing interest to future projects.

Administrators of all agencies are concerned with differentiating between social workers and their performances (input) for such purposes as hiring, promotion, training, planning supervision and so on. A research solution to this problem of input could be of great interest to this group of consumers. There is little doubt that this group is concerned with the evaluation of workers, however, interest in any solution would depend on it's ease and span of applicability.

Certainly administrators would need a solution that could be brought to bear on their particular version of the problem of worker input in a relatively short time.

The Research Problem and Alternative Ways of Dealing With It

The specific research problem that this study was primarily concerned with was that of testing the hypothesis that there is no difference in worker inputs while at the same time providing for a documentation of any differences in input should the hypothesis prove false. The assumption actually made is that there is no significant difference in the inputs of professionally trained workers, no one actually believes that all social workers come from the exact same mould.

There are several solutions possible, that is to say, there are several ways in which one can differentiate between social workers

and their performances. For example, we could give all workers an intelligence test and then state that the workers with the highest scores on the test give a performance of higher quality. We could then claim that this has a significant effect on improvement on the part of the clients that the worker serves and proceed to test this. A traditional approach to worker evaluation is the use of different rating scales completed by researchers or supervisors with reference to the workers. This type of index is, unfortunately, heavily qualitative in nature and it tells us little about what the worker is actually doing that is different. It merely says that he is doing the same things as the other workers, but better.

The Area Development Project has chosen to use a precoded case recording system to test the assumption in question and to document any differences between the workers. Use of this system allows the Area Development Project to machine tabulate data on:

- (1) Length of contact by mode
- (2) Length of contact by worker
- (3) Mode of contact by frequency
- (4) Systems contacted by number of contacts
- (5) Setting by number of contacts
- (6) Failure to make contact.

This data has been gathered only on the treatment group social workers. The case recording system has successfully demonstrated that there are quantitative differences in worker performance, however, qualitative differences must be inferred. Another problem posed by this solution is that the types of differences caught are limited and they may reflect factors acting on, rather than within, the individual social worker.

The Q-sort method, another alternative solution, was the one chosen for use in this study. This approach will be discussed at some

length with the discussion encompassing a short review of pertinent literature.

Q-methodology is a general name given to a group of psychometric and statistical procedures developed by William Stephenson. (17) It is, as Kerlinger (6) points out, mainly a sophisticated form of rank-ordering objects and then assigning numerals to subsets of the objects for statistical purposes. Respondents (judges, raters) are given a set of objects (verbal statements, pictures, etc.) and are asked to sort the objects into a number of piles according to some criterion. The number of objects to be placed in each pile is usually specified in advance so that the whole set will represent a normal or quasi-normal distribution.

Block's (1) description of the sorting procedure for his
California Q-set is a good illustration of Q-sorting in action. His
CQ-set aims at describing personality variables of "observed"
individuals. It should be noted that observed individuals include
hypothetical ideal cases such as the optimally adjusted personality.
In this situation the rater is evaluating cases that he formulates from
past observations of several individuals rather than evaluating
specific cases that are before him.

The actual procedure used is as follows. The rater is given one hundred cards containing a hundred different statements (items) that are written in a standard language. The cards, and therefore the items, are arranged by the rater so as to characterize the subject. This is accomplished by having the rater put the cards in order of representativeness from most characteristic to least characteristic

of the subject. Two illustrative items are:

- (a) "Is critical, skeptical, not easily impressed", and
- (b) "Is calm, relaxed in manner". (1, p. 32)

The CQ-set has a nine point scale that runs from least characteristic (scale point 1) through a neutral category (scale point 5) to most characteristic (scale point 9). A forced, quasi-normal distribution is achieved by having the evaluator place the cards into a designated number of categories (or scale points) with an assigned number of items for each category. Scale point 1 is allocated five cards or items, point 2 eight items, 3 twelve items, 4 sixteen items, 5 eighteen items, 6 sixteen items, 7 twelve items, 8 eight items and scale point 9 five items.

After each sorting the ratings (placements on the scale) made by the judge are recorded on a record sheet which lists all the items (cards). The value of the scale placement for any particular item may be entered beside it so that each items' value in describing the subject's personality is recorded. The Q-deck is then shuffled preparatory to another sorting.

This study was limited to the development of a Q-sort of family centered casework performance which was used to study the inputs of the Area Development Project (treatment group) workers. In addition to this, a dry run was made on relating worker input to changes in functioning on the part of the clients served by the treatment group workers to determine if a differential input has any significant effect on the clients. Final testing of any relationship between worker input and client change was impossible since suitable final data from the Area

Development Project on client movement was not available. Interim data on fifty of the one hundred treatment group families was used to establish a means of analysis for dealing with final data when they become available.

The scope of this study was also restricted to the foregoing because of a shortage of time which precluded the adoption of more ambitious goals.

Organization of the Research Report

Chapter II will describe the research design, including the conceptual framework, hypotheses, level of design, sampling procedures and methods of collecting the data. Chapter III will outline the study findings and Chapter IV will give a summary of the study, implications of the findings, and proposals for future research.

CHAPTER II

STUDY DESIGN

The Theoretical Framework

The theoretical base underlying the Q-sort of family centered casework developed for this study was drawn from the Casework Notebook with particular emphasis being given to the section on how to proceed with families. (10, pp. 81-170) The theory base was incorporated into the content of the Q-set through the use of Q-items which describe the knowledge, the activities, the attitudes and the skills that are central to the performance of family centered casework with the multi-problem family. The reader is referred to the Casework Notebook for an elaboration of the family centered casework approach.

Hypotheses And Assumptions Of The Study
HYPOTHESIS I

There are variations in the performances of the treatment group workers.

Q-sort measure of social worker performance that could be used to examine the treatment inputs of the Area Development Projects' treatment group workers to see if there are any significant differences in the inputs of professionally trained workers. Many research studies have been conducted under the assumption that there are no significant differences between workers yet even casual observation of social worker behaviour suggests that social workers differ greatly in their ability to deliver service effectively.

Performance was operationally defined and measured by the degree of the closeness of fit of a Q-sort of each individual worker's performance (evaluation sort) with a Q-sort of an ideal family centered casework performance (optimal sort). Closeness of fit was established by intercorrelating the evaluation sorts with an optimal sort via a product moment correlation. (5)

Two major assumptions were made in using the Q-sort method to test the hypothesis. The first assumption is that the items are exhaustive, that is to say, the items chosen are sufficient to describe all the relevant behaviour that makes up a family centered casework performance. Here emphasis is on items that are particular to the family centered casework approach rather than on items of a more general nature since we are attempting to describe a specific treatment approach. The second assumption is that the judges do not differ significantly in their understanding of the items.

HYPOTHESIS II

The performance levels of the treatment group workers are related to movement occurring in the cases served by the project.

This hypothesis aims at relating social worker competence, in terms of family centered casework service, to changes in the functioning of the clients served by the Area Development Project. The testing of this hypothesis was of secondary concern. Final testing of the hypothesis was impossible since final data on movement had not become available at the time of the writing of this report. This study was therefore restricted to doing a dry run on relating performance to case movement to establish a possible means of analysis for dealing with

final data when they become available.

Performance, the independent variable, remains defined as it was in Hypothesis I. Client movement, the dependent variable, was operationally defined in terms of scores based on the Geismer-Ayres scale for measuring family functioning. (4)

The Geismer-Ayres scale is a seven point ordinal scale that reflects a continuum of social functioning with the extremes of the continuum being inadequate functioning and adequate functioning. The scale has a central point termed marginal functioning which implies behaviour that is in keeping with minimum requirements for the protection of the community and the family. Inadequate functioning refers to behaviour that clearly entitles the community to intervene because laws are being violated, the welfare of the community is being threatened and the well being of the family members is seriously threatened. The scale can easily be applied to the nine major categories and the twenty-six subcategories of family functioning that are used in the schedule of family functioning because of the fact that three levels of functioning (inadequate, marginal, and adequate) are carefully defined in terms of each category of family functioning. There are four other scale positions but these are not descriptively defined. The scale used by the Area Development Project was as follows:

Inadequate		Below Marginal		Above Marginal	Near Adequate	Adequate
1	2	3	4	5	6	7

Client families can be scored on each category of family functioning at different points in time so as to provide a numerical

basis for comparison. This is the clients movement score. It may of course be a positive or a negative number. In the former instance this indicates an improvement in functioning while in the latter it represents a deterioration in functioning.

Testing of Hypothesis II is based on the assumption that the Geismer-Ayres scale is an effective means of measuring client movement.

Level of Research Design

The study is formulative-exploratory as no experimental design can apply at this time. There was no attempt at a rigorous testing of the hypotheses and there was no attempt to control intervening variables.

Plan of Data Analysis

The data on performance consisted of a Q-sort of an ideal family centered casework performance as well as an evaluation sort of the actual performance of each treatment worker. The evaluation sorts were compared with the optimal sort to yield an overall performance score for each of the treatment workers. This made it possible to rank the workers in respect to their competence at performing family centered casework. The workers represent a parameter rather than a sample thus the performance scores were analysed by inspection rather than by a statistical test. In addition to the foregoing, the optimal sort yielded a profile description of an optimal performance.

The data on movement consisted of movement scores which reflected differences in placement on the Geismer-Ayres scale for each client family at two points in time. A movement score was available for each of the nine major categories and each of the twenty-six subcategories of family functioning.

The five treatment group caseloads of the Area Development

Project were compared with one another in regard to the degree of change
of family functioning shown within each caseload via a one way analysis
of variance. The twenty percent level of significance was used to
avoid Type II errors*. More specifically, an analysis of variance was
done on all of the thirty-five categories of family functioning to yield
thirty-five F ratios to determine if the five caseloads came from
similar populations. (3)

While a nonparametric analysis of variance (such as the Kruskal-Wallis analysis of variance for ranks) could have been used a conventional F ratio was employed for reasons of computational convenience (the former would have required the writing of a new computer program). Use of the F ratio is defended on the grounds of:

- (1) the known robustness of the F test.
- (2) practical experience which suggests that F tests and nonparametric equivalents very rarely, if ever, produce
 different results.

Performance was related to movement scores by comparing the social worker's performance score profiles with the means of the movement scores for each caseload, for each category of family functioning that proved to be significant.

Sampling Procedures

The treatment group workers of the Area Development Project represented a parameter rather than a sample. The study group was composed of the five workers who are presently employed by the Area

^{*} An article by J.K. Skipper, A.L. Guenther and G. Waas (the American Sociologist, Feb. 1967, pp. 16-18) rejects the "sacredness of .05" level of significance.

Development Project and two workers who were previously employed by the project. Taken together the seven workers represent the treatment staff who served the treatment group clients since the inception of the project until the end of service.

The sample of clients used for the testing of Hypothesis II were selected on the basis of the fact that they were the only clients for whom there was a second rating of family functioning, thus they were the only clients for which a movement score could be obtained. There were fifty client families in this category out of a possible one hundred families. They were not evenly distributed amongst the workers thus the caseloads were not truly comparable. A breakdown of the clients and the caseloads is shown in Table I.

TABLE I - Distribution of Cases

	Worker 1	Worker 2	Worker 3	Worker 4	Worker 5	Total
Number of Cases	5	11	14	8	12	50

Methods of Gathering Data

Development of the Q-sort of Family Centered Casework Performance

Items for the Q-set came from several sources. One source was McGill University's School of Social Work Q-set of student social worker performance. A list of their items was presented to the senior staff of the Area Development Project who selected twenty-five items that were seen to be particularly characteristic of the project's services.

Social work literature was another source of items. More specifically, the major source of items was the writings of A. Overton (10, 11, 12, 13, 14), the casework director of the St. Paul Project. Most of the items culled from this literature came from the Casework Notebook. (10) This literature was selected because of it's relevance, both theoretical and practical, in describing the treatment or performance ingredients involved in giving service to multi-problem families.

The third and final source of items was a list of social worker attributes that were supplied by the senior staff of the Area Development Project. These attributes were based on assumptions about the kind of service a project such as the Area Development Project must provide if it is to help multi-problem families to grow and change.

Items from the three sources were pooled to form a preliminary list of one hundred and thirty-nine items that were seen to be of relevance in describing the family centered casework performance that the project's integrated services are based on. This preliminary list was examined for duplications, errors and irrelevancies and then submitted, in questionnaire form, to eight raters who rated the items in regard to their relevance or importance for characterising or describing the components of family centered casework. The raters were also asked to indicate any redundancy in the list and to suggest, for inclusion in the Q-set, any items (or ideas for items) that had been omitted. The one hundred and thirty-nine items were reduced to seventy by first dropping out redundant items and then by dropping out items

that were noted to be less important by the raters.

In the case of redundancy, the raters were asked to indicate items in the list that could be omitted since they were better stated by other items in the list. The raters were also asked to indicate these other items by number so that they could be identified and retained. In some cases there was a disagreement between the raters as to which of the similar items should be retained. This situation was resolved by majority vote.

In the case of item importance the raters were asked to rate the items as very important, important or unimportant. By assigning numerical values to these three categories a mean rating score was generated for each item in regard to the appropriateness of the item. The items that remained after the removal of redundant items were further reduced by the dropping of items that fell below a certain cutting point. This was somewhat problematic since the cutting point fell in the midst of a group of seventeen items which were all deemed, by virtue of their same mean score, as being equally relevant thus in order to end with seventy items it was necessary to choose four of the seventeen items to be retained. These were chosen by the writer on the basis of their unique descriptive value. That is to say, the four items were selected because they contributed discriminative descriptive statements that were not redundant.

The final seventy items were edited for conciseness and clarity with care being taken to avoid changing the meanings of the items in midstream. The items were then rewritten into positive and negative forms, essentially on a random basis, so that half of the

items were negatively phrased and half were phrased in positive terms.

A list of the final seventy items used to form the Q-sort is presented in Appendix A.

It is important at this point to note that seventy items can be expected to do descriptive justice to a way of performing casework services. There are two points to note here. First of all, if we are using the Q-sort to rank order subjects we are interested in items that differentiate between individuals. Items that do not reflect existing differences to be observed can therefore be eliminated. The second point is that the description aimed at is configurational, that is to say, the subject is described not only by particular items but also by particular permutations of items. (It is necessary to note that permutations, not combinations, are relevant when order counts.)

This is analogous to the psychiatrist's emphasis on a syndrome rather than particular symptoms. The main thing to ask is Are these the most useful or relevant descriptive statements? not, Are there enough statements? In any event Block (1, p. 62) assures us that there are 6.45 x 10⁸⁵ permutations of items in a hundred item 0-deck.

Application of the Q-sort instrument:

The completed Q-set was given to eight judges who were chosen as a result of their extensive and pertinent experience with Area Development type projects. They were asked to do an optimal sort of a family centered casework performance which would serve as a criterion performance against which the individual workers could be rated. The casework supervisor and the project director of the Area Development Project were two of the judges. In addition to doing an optimal sort

they were asked to do an evaluation sort on each of the workers. This included the two workers who had left the project. Additional judges would have been desirable since this would improve the reliability of the evaluation sorts, however, it was impossible to find another judge who knew the workers and their activities well enough to be acceptable as a judge.

Both the optimal sort and the evaluation sorts took the form of a forced choice along a nine point scale that ran from extremely uncharacteristic or negatively salient (scale point 11) through a relatively neutral category (scale point 5) to extremely characteristic or salient (scale point 9). A quasi-normal distribution was achieved by having the judges place the cards into a designated number of categories with an assigned number of items for each category. Scale point 1 was allocated four items, scale point 2 six items, scale point 3 eight items, scale point 4 eleven items, scale point 5 twelve items, scale point 6 eleven items, scale point 7 eight items, scale point 8 six items and scale point 9 four items.

Some concern invariably centers around this issue of using a forced-choice in Q-sorting.

Block (1, p. 78) advocates the use of a forced-choice to avoid idiosyncratic ratings which would make comparison of equivalence between sorts more difficult. He states that there is no difference in reliability while the forced-choice method yields more discriminations. The forced-choice method also contains the same information as the unforced choice method of sorting and the information is easier to find.

Kerlinger (6, p. 595) expresses the view that all psychometric procedures effect constraints on respondents thus this is a poor reason to reject the used of forced sorting. He states that the evidence for the use of the forced choice is mixed but the fact is that forced sorting procedures do force raters to make discriminations they would not normally make and this is useful when discriminations are the researcher's goal.

Livson and Nicols (7, p. 195) experimented with forced and unforced choices and found that their subjects had no natural preferences as a group. They do note that a rectangular distribution is useful for obtaining more discriminations coupled with better testretest reliability.

Wittenborn, (18) in his article on the current status of Q-methodology, also attests to the fact that there is no real agreement on this issue. It seems that any decision should be based, like so many other things, on the particular problem at hand.

The judges were also asked to complete a recording sheet after doing each sort. They were then asked to shuffle the Q-deck before proceeding to do a further sort.

The final optimal sort was a consensus of the sorts performed by the eight judges. This consensus sort was achieved by calculating the mean placement or score value for each of the seventy items after which the mean score was rounded to a whole number. Six of the items had a mean score which straddled evenly an interval between two whole numbers. These numbers were rounded in the direction that maximized the normalness of the distribution.

The evaluation sorts were a product of only two judges therefore when a mean score was calculated that was not a whole number it always evenly straddled an interval. In rounding these numbers to a whole number it was decided to alternate between raising the score to the next whole number and lowering the score to the next whole number.

Source of Movement Data

Beginning and interim ratings of family functioning for fifty of the one hundred treatment group client families were taken from the records of the Area Development Project. Movement scores were calculated by the computer from these before and after measurements as part of the program for analysis of variance.

CHAPTER III

STUDY FINDINGS

Descriptive Data on Study Sample

This study focused on the development and application of a Q-sort measure of family centered casework performance. The study sample used consisted of the seven Area Development Project social workers who gave casework service to the treatment group of client families during the life of the project. Two of the original five workers left the project in May (worker 5) and November (worker 2) 1967 and were replaced by two other workers (worker 6 and worker 7).

The five original workers, for purposes of identification, have been designated in this report simply as; worker 1, worker 2, worker 3, worker 4 and worker 5. Similarly, the two replacement workers are designated throughout as worker 6 and worker 7 respectively. The numbers used always refer to the same person. It is noted that there was one original worker who stayed with the project for only a short time and it was therefore impossible to obtain an evaluation sort on this worker.

The seven workers ranged in age from twenty-five to fifty years of age. Four of the workers held a Bachelors degree in social work, two a Masters degree and one a diploma in lieu of a Bachelors degree. Five of the workers came from the Social Welfare field with one of these having had experience in a childrens agency. One of the workers had exclusive experience in a childrens agency. The remaining worker was a recent graduate of a school of social work. The group was composed of four women and three men.

Problems in Sampling and Data Collection

The adequacy of the movement data relating to Hypothesis II was limited by the fact that there was an unequal number of cases in each of the caseloads. Of the fifty of the one hundred treatment group clients that were chosen for inclusion in this study five cases belonged to worker 1, eleven to worker 2, fourteen to worker 3, eight to worker 4, and twelve to worker 5. These fifty were chosen because of the fact that interim ratings were available for these client families and it was therefore possible to obtain movement scores for these clients. The interim ratings were obtained before worker 6 took over worker 5's caseload and before worker 7 took over worker 2's caseload thus worker 6 and 7 were not included in the study of movement.

This unequal distribution of clients was problematic since for purposes of analysis of variance it is desirable, if not necessary, to have at least fifteen cases in each caseload.

Another problem lay in the fact that interim ratings were made at two points in time, twelve months and eighteen months. Since there was only one rater involved for the vast majority of the ratings done the rating periods were drawn out so that the twelve month rating really represents a spread from eight to fifteen months while the eighteen month rating represents a spread from sixteen to twenty-one months*. This means that some client families were given more time than other families in which to undergo change. The use of one rater did however have the advantage of curtailing rater variability.

^{*} Due to the absence of the original rater five of the fifty interim ratings had to be done by two raters who did a consensus rating on the five cases.

Findings on the Hypotheses

HYPOTHESIS I - There are variations in the performances of the treatment group workers.

In developing a Q-sort measure to test the hypothesis the opinion of eight judges was sought via a questionnaire in regard to the importance or relevance of one hundred and thirty-nine items proposed for inclusion in the Q-set. A study of interjudge agreement on the question of item importance yielded twenty-eight intercorrelations of extremely low magnitude. The three highest intercorrelations were; .2507, .2494, and .2093. This low degree of agreement in regard to the descriptive value of the proposed items for characterizing a family centered casework performance suggests that all of the one hundred and thirty-nine items submitted could be regarded as being equally important. Under these circumstances we might expect to obtain similar results, in terms of performance scores, by using the sixty-nine items that were dropped to form the Q-set of family centered casework performance. This would not be totally unexpected since the original list of items had a high degree of redundancy in it's content.

The generation of an optimal sort (a sort of the ideal family centered casework performance) necessarily preceded the establishment of worker performance scores. Since the optimal sort is supposed to characterize the best way of proceeding with clients in giving them service the reliability of the Q-sort measure should be high. In other words, if the optimal sort was repeated a number of times the final distributions should be reasonably similar. We might expect to find one or two best ways of giving service but we would have little faith in

a measuring device that after ten applications told us that there were ten best ways of proceeding with clients. The Spearman Brown Prophecy Formula (1, p. 37) was used to do a reliability study of the composite of judges.

The formula takes the form:

Reliability of composite of judges = $\frac{N \text{ (average of interjudge correlations)}}{1 + (N - 1) \text{ (ave. interjudge correlation)}}$ where N is the number of judges used.

Substituting in the number of judges and the average interjudge correlation we obtain:

$$R = \frac{(6) (.7478)}{1 + (5) (.7478)} = .9467$$

This formula predicts that if the same judges were used again to generate another optimal sort the probability of obtaining the same distribution in the optimal sort would be .9467. The lowest of the fifteen intercorrelations was .6553 and the highest .8447.

The six judges used in the development of the optimal sort were selected from the eight judges who completed the questionnaire on item selection. The two judges that were dropped reside in the United States and it was judged impossible to utilize their participation through the mails. The judges were selected, in both instances, to represent variations in outlook so as to generate an optimal sort that would not be relevant solely to the Area Development Project. Given this basis of selection and the previous poor degree of agreement on item importance shown by the judges the degree of agreement in the formulation of the optimal sort is seen to be quite substantial. Only one judge could be seen as a clear isolate and this judges' five intercorrelations with other judges were in the magnitude of .6557, .6739,

.7205, .7391, and .7050. This judge was the only judge who did not have prior experience in working in an Area Development type project, the other five judges having been associated with the St. Paul Project and/or the Area Development Project.

This optimal sort represents an acceptable consensus of opinion of eight judges on what constitutes an ideal family centered casework performance thus the optimal sort is a criterion against which the performances of each of the treatment group workers can be measured. Performance scores for each of the treatment group workers were generated by comparing each worker's evaluation sort with the consensus optimal sort via a product moment correlation. (5) The resulting performance scores are an index of perfect correlation with the optimal sort. Differences in performance scores represent variability in how closely workers approximate an ideal performance. The worker's performance scores are shown in Table II.

TABLE II - Worker Performance Scores

Worker 1	Worker 2	Worker 3	Worker 4	Worker 5	Worker 6	Worker 7
.7935	.8625	.2814	.8839	.4686	.8956	.8795

Since we are dealing with a parameter rather than a sample no statistical test is used to establish the significance of the differences in worker performance scores. The scores can be regarded as falling on a continuous distribution between -1 and +1. Simple inspection reveals that the seven workers vary greatly in regard to how closely they fit

the criterion or optimal sort thus Hypothesis I, that there are variations in the performances of the treatment group workers is upheld.

The performance scores indicate the quality of worker performance but it is also possible to analyse the optimal and evaluation sorts to see what was done in addition to how well it was done. The optimal and evaluation sorts take the form of a quasi-normal distribution with the right side of the distribution representing items that are extremely characteristic of a worker's (or the optimal) performance and the left side representing items that are extremely uncharacteristic of a worker's (or the optimal) performance. Given this it is possible to print out the items that fall into the twentieth percentile or above the eightieth percentile to show the items that are most and least characteristic of the ideal family centered casework performance. Similarly, this can be done to show the items that are most and least characteristic of each of the workers' performances. It should again be noted that the items are descriptive statements that specify the ingredients of family centered casework.

A print out of the items above the eightieth percentile and items in the twentieth percentile of the optimal sort follow below. The items characteristic of an ideal family centered casework performance are:

- 4 Worker is able to relate to and communicate with the family and it's members.
- 11 Worker has a sense of conviction about the rights of families.
- 12 Worker has a sense of conviction that people can change within the limits of capacity and opportunity.

- 14 Worker is able to continue contact even after he has been rebuffed.
- 15 Worker is direct when it is appropriate and does not avoid potentially difficult areas.
- 21 Worker is able to elicit family goals by drawing out the hopes and aspirations that are held by the family.
- Worker is knowledgeable about the statutes, regulations, procedures and forms affecting the family work of the City Social Service Department, the Family and Childrens Court, the Childrens Aid Society, the Catholic Childrens Aid Society and the Family Service Agency.
- 48 Worker works independently and effectively even in relatively unstructured situations.
- 2 Worker is committed to the family as a unit of service.
- 19 Worker supports client enthusiasm without necessarily sanctioning unworkable goals.
- 20 Worker helps the family to focus on elements of discomfort in their present life that they would like changed.
- 68 Worker is able to formulate family diagnoses.
- 30 Worker is knowledgeable about agencies, resources and facilities such as education, supplementary assistance, childrens institutions, group services, health, rehabilitation, employment, psychiatric care, law enforcement, corrections, legal services, and the world of commerce.
- 52 Worker selectively focuses on the clients problem areas with appropriate techniques.

The items uncharacteristic of an ideal family centered casework performance are:

- 8 Worker is unable to reach out to families.
- 53 Worker fails to seek out the healthy functioning of the client and support these strengths.
- 25 Worker is unable to handle multifunctions such as court work, administration of financial aid, child protection, and general counselling.
- 7 Worker has no conviction that there is value in offering services to families who are not actively seeking help.
- 10 Worker is unable to maintain purposive working relationships.
- 23 Worker fails to begin by dealing with specific and urgent concrete needs of the family.
 - 3 Worker is unable to use a problem solving approach in giving service to families.
- 9 Worker is unable to take the initiative in discussing observed needs and problems.
- 55 Worker can not identify the client's needs.
- 54 Worker fails to interrelate his diagnostic planning and his treatment activities.
- 22 Worker is unable to set realistic expectations with the family.
- 27 Worker is unable to use authority constructively.
- 38 Worker shows little imagination or initiative in using community resources to help the client.
- 13 Worker is unable to recognize resistance in himself and deal with it.

- 24 Worker lacks initiative in carrying out first steps in treatment.
- 29 Worker does not accept the idea of one worker handling multiple roles.
- 51 Worker is unaware of issues that are important to the client.
- 64 Worker is unable to recognize and respond to nonverbal communication.

The items that are uncharacteristic of the ideal family centered casework performance can of course be changed into positive rather than negative statements. Once this is done these items can be added to the items that are characteristic of an ideal performance to yield thirty-two descriptive statements that specify the most important service ingredients of family centered casework. This means that the treatment service can be highly specified and we can say what the independent variable, performance, actually consists of. This is no small advantage.

Percentiles can also be printed out on the evaluation-sorts of each of the workers. This coupled with the performance scores would tell us how well the worker did and what he did.

HYPOTHESIS II - The performance levels of the treatment group workers are related to movement occurring in the cases served by the project.

The data on movement, movement scores, were analysed by comparing the five caseloads with each other on thirty-five categories and subcategories of family functioning via analysis of variance. (3)

The twenty percent level of significance was used to favor the discovery of categories of family functioning in respect to which the five case-loads vary significantly. Using this level of significance only one major category of family functioning and five subcategories proved significant.

Appendix C shows the nine major and twenty-six subcategories of family functioning that were subjected to a simple analysis of variance as well as the probabilities that the differences in mean movement occurred by chance.

The five subcategories of family functioning that proved to be significant were; job situation, physical facilities, household standards, attitude to Area Development Project social worker, and school adjustment. Household practices was the only major category of family functioning that proved to be significant.

Table III allows easy comparison of the worker performance scores, the number of cases per caseload, and the mean movement scores for each caseload for each category (or variable). The probability of the difference in mean movement scores occurring by chance is also shown.

TABLE III - The Relationship Between Performance Scores and Movement Scores

Worker Identification	Worker 1	Worker 2	Worker 3	Worker 4	Worker 5
	·				
Number of Cases Carried		11	14	8	12
Performance Scores	.7935	.8625	.2814	. 8839	.4686
Variable 1 - Job					
Situation		· /	<u></u>		
Probability .1416		0 (000	0.6000		1 0000
Movement Scores	0.5000	0.4000	0.6000	2.0000	-1.0000
Rank Order of			_	_	_
Performance Scores	3	. 2	5	1	4
Rank Order of	_		_	1	
Movement Scores	3 .	4	2	1	5
Variable 2 - Household					
Practices					
Probability .0284					
Movement Scores	1.4000	0.2727	0.2143	1.1250	0.4167
Rank Order of			•		
Performance Scores	3	2	5	. 1	44
Rank Order of					
Movement Scores	1	4 .	5	2	. 3
Variable 3 - Physical					
Facilities					
Probability .0383					
Movement Scores	1.6000	0.5455	-0.0000	1.0000	0.2500
Rank Order of					
Performance Scores	3	2 .	5	. 1	. 4
Rank Order of					
Movement Scores	1	3	5	2	4
Variable 4 - Household					
Standards					
Probability .0346					
Movement Scores	1.2000	0.0909	0.1429	1.0000	0.3333
Rank Order of					
Performance Scores	3	2	_5	1	4
Rank Order of					
Movement Scores	1	. 5	4	2	3
Variable 5 - Attitude					
to Worker					
Probability .1523					
Movement Scores	1.2000	0.4545	0.1429	0.8000	0.1818
Rank Order of					
Performance Scores	3	2	5	1	4
Rank Order of					
Movement Scores	1	3:	_ 5	2	4
Variable 6 - School					
Probability .0719					
Movement Scores	0.2000	0.1000	0.1538	-0.0000	0.0000
Rank Order of					
Performance Scores	. 3	2 .	5	1	. 4
Rank Order of					
Movement Scores	. 1	3	2	5	4

The table permits easy comparison of the rank order of the performance scores and the rank order of the movement scores. If the performances of the treatment group workers are related to movement occurring in the cases served by the project workers a substantial degree of concordance between the two rankings would be expected. Simple inspection reveals that there is no one to one matching in the rank orders of the six variables that proved to be significant in differences in mean movement scores. Simple inspection of rank orders is not, however, a suitable means of establishing the degree of concordance between the two rank orders since there is no one to one matching between the rank orders. This, coupled with the limitations of data discussed at the beginning of this chapter (p. 20), means that Hypothesis II could not be conclusively tested. Time was another limiting factor that precluded the use of a more suitable means of analysis of the data relating to Hypothesis II.

Complete data will be available at the School of Social Work, the University of British Columbia.

CHAPTER IV

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Summary of the Study

Studies of effect on casework services too often assume that there is no significant variation in the performances of professionally trained social workers, when in fact there is little reason for believing this to be the case. This study aimed at developing a Q-sort measure of social worker performance that could be used to test the hypothesis that there are variations in social worker performance. The Q-sort measure developed was designed specifically to deal with a specific type of casework service, family centered casework. instrument was applied to the seven social workers who served the Area Development Project's treatment group clients from the beginning of service to the end of service in March 1968. The hypothesis that there are variations in the performances of the treatment group workers was upheld. In addition to this the Q-sort measure was used to generate a set of descriptive statements that specified the ingredients of an ideal family centered casework performance. It is also possible to use the method to specify the ingredients of each of the social worker's performances. Since the social workers vary in how closely they approximate the ideal family centered casework performance there are really seven different performances or seven different independent. variables affecting the dependent variable of client movement. A knowledge of the differences between these performances makes it possible to control or take account of variations in the delivery of service so that variations in client movement can be appropriately

interpreted.

This study also attempted to explore the relationship between worker performance and client movement. It was hypothesized that the performance levels of the treatment group workers are related to movement occurring in the cases served by the project. Final testing of this hypothesis was not possible since final data on client movement was not available from the Area Development Project at the time of the writing of this report. The study therefore focused on developing a means for analysis of the final data when it becomes available. Interim data on fifty of the one hundred treatment group clients was used in the place of final data in the testing of the hypothesis. The data on movement was analysed by a simple one way analysis of variance on each of the variables of family functioning reported on by the Area Development Project. This yielded thirty-five F ratios only six of which proved significant at the twenty percent level. The mean movement scores for each of the five caseloads were compared with the performance scores of the workers who carried the five caseloads by comparing the rank order of the performance scores with the rank order of the mean movement scores. This was only done with the six variables of family functioning that proved significant. Simple inspection of the two rank orders revealed that there was no one to one matching between the two rank orders, however, this is not a sufficient means of establishing the degree of concordance between two rank orders and Hypothesis II was not therefore conclusively tested.

Conclusions

This study found that there were differences in social worker input. These differences between the workers are reflected in worker performance scores that were generated by measuring the closeness of fit of each worker with an ideal family centered casework performance. This optimal sort may be viewed as a specification of the particular treatment approach that is being tested by the Area Development Project thus the worker scores are an indication of how closely the project approximates its' goal of giving the particular type of service under question to each of the treatment group families. In addition to this, a print out of the evaluation sorts, as well as the optimal sort, would make it possible to see how the treatment that is being delivered by the workers differs from the ideal service that is the goal of the project.

The use of the Q-sort method has thus made it possible to define the independent variable, integrated family services, that is being used by the Area Development Project in a precise manner. This preciseness of definition in turn facilitates control of the application of the independent variable or at least makes it possible to take any variation in the application of the variable into account when drawing conclusions from the final data.

The Q-set developed for this study, although in need of refinement, could be most profitably applied in projects similar to the Area Development Project where there is a larger N, that is to say, a larger number of workers. This would be productive in that it would allow more rigorous study of the ends of treatment. The study of ends refers to the issue of relating the means of treatment, family centered

casework service, to changes in client functioning as was attempted in this study under Hypothesis II.

Proposals for Further Research

This study was restricted to a consideration of the Area

Development Project treatment workers. There is however potential

benefit in applying the Q-sort method to an analysis of the performance

of a sample of the various social workers that are serving the two

control groups of the project. Here one must remember that the two

control groups are not non-treatment groups and it has been assumed

that the treatment that they offer differs significantly from that

offered by the treatment group workers.

When final data on client movement become available from the Area Development Project it will be possible to undertake final testing of Hypothesis II which concerned itself with the relationship between social worker performance and client movement. This would necessarily involve additional ratings of family functioning for a number of the client families since two of the treatment group caseloads were served by two workers for a significant length of time.

The interim data, in testing Hypothesis II, was subjected to a simple one way analysis of variance with an analysis being done on each area or variable of family functioning. The possibility of discovering a relationship between worker performance and client movement would be enhanced via a two way analysis of variance of the areas of family functioning. This would also make more manageable the data since one F ratio and it's probability would be generated in place of thirty-five F ratios. A two way analysis of variance would however

involve dropping any areas of family functioning for which there is a rating missing. For example, the rating of the functioning of the father is not possible for all cases since there is no father in many of the families. This represents missing data which cannot be accommodated in a two way analysis of variance satisfactorily.

This study, in testing Hypothesis II, compared the rank ordering of the performance scores with the rank ordering of the mean movement scores for each caseload. The concordance of the two rank orderings was determined by inspection only owing to limitations of time. It would however be desirable and perhaps more fruitful to use a non-parametric test such as the method of M rankings (9, p. 320) to measure the concordance or discordance of the rankings.

The final possibility for data analysis proposed for use when final data become available is the development of a set of sub-hypotheses under Hypothesis II to contrast types of performances with types of client change. One such hypothesis might be that clients who are served by workers who score high on their ability to form and sustain a relationship will exhibit a better attitude towards the workers.

The foregoing proposals for further research are certainly not exhaustive but they do have much relevance for the Area Development Project and it is hoped that they, and this study, will be of value in furthering the research goals of the project.

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APPENDIX A

Q-Sort of Family Centered Casework Performance

- Worker understands the characterisation of a multi-problem family and the subgroups found in this population. (eg. the one-parent family, the low income family, etc.)
- 2. Worker is committed to the family as a unit of service.
- 3. Worker is unable to use a problem solving approach in giving service to families.
- 4. Worker is able to communicate with, and relate to, the family and it's members.
- 5. Worker realizes that most parents want to be good parents and they therefore can be used as allies in the treatment of the children.
- 6. Worker fails to support the single parent in his (or her) efforts to be both father and mother to the children.
- 7. Worker has no conviction that there is value in offering services to families who are not actively seeking help.
- 8. Worker is unable to reach out to families.
- Worker is unable to take the initiative in discussing observed needs and problems.
- 10. Worker is unable to maintain purposive working relationships.
- 11. Worker has a sense of conviction about the fights of families.
- 12. Worker has a sense of conviction that people can change within limits of capacity and opportunity.
- 13. Worker is unable to recognize resistance in himself and deal with it.

- 14. Worker is able to continue contact even after he has been rebuffed.
- 15. Worker is direct when it is appropriate and does not avoid potentially difficult areas.
- 16. Worker demonstrates an overall sense of responsibility.
- 17. Worker is willing to place trust in the client.
- 18. Worker is unable to develop creative solutions.
- 19. Worker supports client enthusiasm without necessarily sanctioning unworkable goals.
- 20. Worker helps the family to focus on elements of discomfort in their present life that they would like changed.
- 21. Worker is able to elicit family goals by drawing out the hopes and aspirations that are held by the family.
- 22. Worker is unable to set realistic expectations with the family.
- 23. Worker fails to begin by dealing with specific and urgent concrete needs of the family.
- 24. Worker lacks initiative in carrying out first steps in treatment.
- 25. Worker is unable to handle multifunctions such as court work, administration of financial aid, child protection, general counselling.
- 26. Worker does not accept the authority inherent in certain statutory functions.
- 27. Worker is unable to use authority constructively.
- 28. Worker is knowledgeable about the statutes, regulations, procedures, and forms affecting the family work of the City Social Service

 Department, the Family and Childrens Court, the Children's Aid Society, the Catholic Childrens Aid Society, and the Family Service Agency.

- 29. Worker does not accept the idea of one worker handling multiple roles.
- 30. Worker is knowledgeable about agencies, resources and facilities such as education, supplementary assistance, childrens institutions, group services, health, rehabilitation, employment, psychiatric care, law enforcement, corrections, legal services, and the world of commerce.
- 31. Worker is able to communicate with representatives of other disciplines that meet family needs.
- 32. Worker cannot perform a liaison role effectively.
- 33. Worker is unable to help the family modify attitudes that cut them off from, or block productive use of, a resource.
- 34. Worker prepares the family and the new agency for contact so that each knows what to expect from the other.
- 35. Worker recognizes the importance of the case conference in joint agency planning.
- 36. Worker recognizes that the community must do some adjusting to the client by creating facilities that meet the needs of the client.
- 37. Worker is committed to both the individual client and the community.
- 38. Worker shows little imagination or initiative in using community resources to help the client.
- 39. Worker makes himself (or herself) available after hours in an emergency.
- 40. Worker accepts the responsibility to ensure the continuity of services that the families require.

- 41. Worker does not appreciate the importance of the neighbourhood in family's life.
- 42. Worker helps the family to identify with the community where possible.
- 43. Worker is unable to analyse and describe clearly his own practice.
- 44. Worker lacks an understanding of the research objectives of the project and the requirements that these place on the worker.
- 45. Worker is unable to work within the project as an agency.
- 46. Worker is unable to interpret the project to clients and others.
- 47. Worker is unable to write clear and objective profiles
- 48. Worker works independently and effectively even in relatively unstructured situations.
- 49. Worker is unable to question and appraise his own role.
- 50. Worker is insensitive to underlying problems beneath the presenting problem.
- 51. Worker is unaware of issues that are important to the client.
- 52. Worker selectively focuses on the client's problem areas with appropriate techniques.
- 53. Worker fails to seek out the healthy functioning of the client and support these strengths.
- 54. Worker fails to interrelate his diagnostic planning and his treatment activity.
- 55. Worker cannot identify the client's needs.
- 56. Worker is forthright where possible.
- 57. Worker is unable to express concern in terms of specified problems that the client has.

- 58. Worker endeavours to establish a partnership with the family.
- 59. Worker uses language the client can understand.
- 60. Worker shares what the family can use from the diagnosis.
- 61. Worker is insensitive to the subjective meaning of facts.
- 62. Worker becomes a moderator or defender in family conflicts.
- 63. Worker is unable to formulate an appropriate interviewing plan for a variety of family situations.
- 64. Worker is unable to recognize and respond to non-verbal communication.
- 65. Worker arranges interviews directly with each parent rather than through an intermediary.
- 66. Worker does not express concern for the whole family.
- 67. Worker can recognize family interrelationships.
- 68. Worker is able to formulate family diagnoses.
- 69. Worker is skillful at conducting family interviews.
- 70. Worker is open minded.

APPENDIX B

SCHEDULE FOR DATA COLLECTION

Q-set of Family Centered Casework Performance Record Sheet

Subject:	• • •	D ! • *	o • o	e	Sort	er: .	· ø •	o • ·		•	Date	e : .	• •
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N.B. A value of 9 indicates "most characteristic"

A value of 1 indicates "least characteristic"

APPENDIX C

Categories of Family Functioning for Which Significant Differences Were Sought on Mean Movement Scores Between Different Caseloads

Cat	egories of Family Functioning	Probability *
1.		.2740
	Marital relationships Parent Child relationships Sibling relationships Family solidarity	.6108 .5013 .5460 .6252
2.	INDIVIDUAL BEHAVIOUR	.4011
	Father Mother Older children Younger children	.3622 .6650 .6706 .3601
3.	CARE AND TRAINING OF CHILDREN Physical Training methods	.3448 .2337 .5601
4.	SOCIAL ACTIVITIES Informal Formal	.6619 .2363 .5237
5.	ECONOMIC PRACTICES Source of income Job situation Use of money	.6091 .6445 .1416 .5680
6.	HOUSEHOLD PRACTICES Physical facilities Household standards	.0284 .0383 .0346
7.	HEALTH PRACTICES Health problems Health practices	.6876 .6749 .6813
8.	RELATIONSHIP WITH ADP WORKER Attitude to worker Use of worker	.4455 .1523 .6189
9.	USE OF COMMUNITY RESOURCES School Church Health Resources Social Agencies Recreational Agencies	.5427 .0719 .5392 .6864 .2136

^{*} Probability of differences in caseload mean movement scores occurring by chance for each category and subcategory of family functioning.