

THE SOCIAL CASEWORK APPROACH TO MARITAL COUNSELLING

An Exploratory Analysis of Some Characteristic
Family Service Agency Cases, Vancouver, 1957.

by

BRIAN WORTH HESELTINE WHARF

Thesis Submitted in Partial Fulfilment
of the Requirements for the Degree of
MASTER OF SOCIAL WORK
in the School of Social Work

Accepted as conforming to the standard
required for the degree of
Master of Social Work

School of Social Work

1957

The University of British Columbia

ABSTRACT

Social workers have been interested for many years in the problems of adjustment that occur in marriage, and have attempted to assist those families grappling with marital difficulties. In particular the Family Service Agency of this and other communities has concerned itself with marital discord, and through study has tried to broaden its knowledge, and refine its skills. This study is a part of the re-evaluation that is constantly underway.

This study is an exploratory one. It is concerned with the strengths and the limitations of the social casework approach to marital counselling. The six cases examined are difficult ones containing problems of a serious nature. The primary reason for their selection was that they revealed the casework process in some detail. The cases have been summarized, and the casework process closely examined.

On the basis of the analyses it was found that ego supportive casework, the observance of the social work principles of self-determination, individuality, objectivity and the non-judgmental attitude, and the use of community resources are extremely helpful to families experiencing marital problems. In addition, the ability of the caseworker to grasp the total functioning of the client in his family and social situation is a positive aspect of the casework approach.

The chief weakness of the casework approach as it has been evolved to the present time is the policy of routinely assigning one caseworker to help both partners. When the partners are dependent and immature people they are unable to share a deep, therapeutic relationship with the same caseworker. This study supports a proposal made by Mr. Sidney Berkowitz some years ago. Mr. Berkowitz claimed that the caseworker should decide early in the contact whether serious conflicts or mild disturbance was involved, and that two caseworkers should be assigned in the former instance.

Other weaknesses in the casework approach resulted from the caseworker's lack of diagnostic thinking and planning, and from their failure to observe the social work principles. The caseworkers also did not seem to realize the harmful effects of marital discord upon the children, and in only one case was direct casework help extended to a child.

In presenting this thesis in partial fulfilment of the requirements for an advanced degree at the University of British Columbia, I agree that the Library shall make it freely available for reference and study. I further agree that permission for extensive copying of this thesis for scholarly purposes may be granted by the Head of my Department or by his representative. It is understood that copying or publication of this thesis for financial gain shall not be allowed without my written permission.

Department of Social Work.

The University of British Columbia,
Vancouver 8, Canada.

Date Oct 7 1957

TABLE OF CONTENTS

Chapter I	<u>The Social Casework Conception of Marital Counselling.</u>	Page
	The outlook of the Family Service Agency on marital conflict and marital counselling. Views held by other professional people. Marital conflict and marital disturbance described. An outline of social casework; its basic principles and concepts. Purpose of the study and method of selection of cases.	1
Chapter II	<u>Casework Help Directed Toward Reintegration of the Marriage.</u>	
	Outline and analysis of three cases showing: (a) Supportive assistance for a wife. (b) Supportive assistance for a disturbed husband. (c) Casework help on a family centered basis. The significant points emerging from the analyses.	21
Chapter III	<u>Casework Help Directed Toward Dissolvment of the Marriage.</u>	
	Outline and analysis of three cases showing: (a) Supportive and clarifying help for a dependent wife. (b) Environmental help for a dependent, immature couple. (c) Supportive and clarifying help for a disturbed husband. The significant points emerging from the analyses.	54
Chapter IV	<u>The Strengths and Limitations of the Casework Approach to Marital Counselling.</u>	
	The necessity for observance of the casework principles. Involvement of the second partner. The marital relationship an important factor in treatment. Children of the clients studied. The effectiveness of ego supportive therapy, and the usefulness of community resources.	93
Appendix		
A.	Schedule 1 Facesheet Information for Cases Presented in Chapter II.	112
B.	Schedule 2 Facesheet Information for Cases Presented in Chapter III.	113
Bibliography		

ACKNOWLEDGEMENTS

I wish to thank Mrs. Helen Exner and Dr. Leonard Marsh of the University of British Columbia School of Social Work whose assistance has proven invaluable.

Mr. Deryck Thompson, Director of the Vancouver Family Service Agency, helped in the preparation of the first chapter and also co-operated fully in making case records available. His assistance and that of all the agency staff was greatly appreciated.

THE SOCIAL CASEWORK APPROACH TO MARITAL COUNSELLING

**An Exploratory Analysis of Some Characteristic
Family Service Agency Cases,
Vancouver, 1957.**

CHAPTER I

THE SOCIAL CASEWORK CONCEPTION OF MARITAL COUNSELLING

Marital discord has been a subject of concern for many centuries, but in the last thirty years it has received unprecedented attention. The aura of silence which surrounded all subjects pertaining to sex in the days of Queen Victoria has been effectively broken. Other changes, too, have taken place, and many of the characteristics of married life in previous centuries have disappeared. The institutional aspects of marriage, such as the religious and traditional views that the marriage bonds were binding and lasting, literally until "death do us part", the large families and family businesses, all acted as controls upon marriage and tended to give it permanence. Legal control has been relaxed, too, and some students of this subject feel that divorce presents a hazard to successful marriage. In their book Building a Successful Marriage, Judson and Mary Landis declare that:

"People are deluded into thinking of divorce as a ready and acceptable solution to problems that arise in marriage. The prospects of escape through divorce prevents people from facing, in a mature manner, the problems of marriage." 1

Because of the exposure of marital problems to society, and in many cases a realistic request for help in coping with these problems, a demand has been created for skilled people who can give assistance. The first marriage counsellors were religious leaders and doctors, who

1 Landis and Landis, Building a Successful Marriage - New York-Prentice Hall Inc. 1948, Page 7

because of their status in the community and knowledge, were consulted when problems of human adjustment arose. Yet many of the problems were outside their areas of competence and as a result other professional people began to interest themselves in marital conflict. At the present time marriage counsellors are drawn from the ranks of sociologists, educators, psychologists, psychiatrists, cultural anthropologists, medical doctors, ministers and priests, and social workers. In the United States, where the interest in, and demand for, marital counselling has been most marked an Association of Marriage Counsellors has come into being. In the latter part of 1956 the profession of marriage counselling was legally constituted a separate and distinct profession, although as yet no distinctive education and training has been outlined.

Social workers took an interest in marital conflict for two reasons. First, because it was obvious that here was an area in which people needed assistance in order to live a more satisfying life. In the second place, it was equally apparent that marital conflict was one of the chief causes of family breakdowns and neglected and unhappy children. Since the turn of the century, social workers have extended services to those in marital conflict. The concentration of marital counselling services in social work agencies has been in the family service agencies, and it is from the Vancouver Family Service Agency that the material for this study has been drawn.

The Family Service Agency has four main programmes; marital counselling, parent-child relationships, individual problems of adjustment, and income management. It works closely with other social work

agencies in the community, such as the Children's Aid Society, Catholic Children's Aid Society, City Social Service Department, provincial and municipal social welfare departments, the social service departments of the city hospitals, the provincial mental hospitals, and the neighbourhood houses. The only other agency which deals with marital counselling per se is the local branch of the Canadian Mental Health Association which employs a psychologist to offer service to those in marital conflict.

The views of family service agencies with regard to marital counselling have been formulated quite precisely during the past few years. Marital conflict is not thought of as a specific entity set apart and altogether different from other areas of individual malfunctioning. Rather, the family agency regards marital conflict as revealing a situation where the results of immaturity and emotional deviation are clearly to be seen. Speaking to an annual meeting of the St. Louis County Family Service agency Miss Elizabeth Good stated:

"Marital discord is sometimes spoke of almost as if it were a specific entity. We refer to marital discord in the same way that we speak of juvenile delinquency or tuberculosis. The difference is that tuberculosis has a definite etiology; its cause can be traced to the invasion of the physical system by the bacillus tuberculosis. There is no bacillus marital discord. The etiology of marital discord lies in the needs which each marriage partner brings to the union, and their infinitely complicated interrelationship. 1

1 Quotation from paper presented by Miss Elizabeth Good to the 32nd Annual Meeting of the Family Service Society of the St. Louis County, January 8, 1947.

The social work conception of marital counselling is not, however, the only one. Members of many professions have interested themselves in marital counselling, and each professional person has applied his own particular skill and knowledge to the task of helping married clients to resolve their difficulties. The services provided by marital counsellors, therefore, varies greatly according to the outlook and training of the individual counsellor. The social worker and the psychiatrist engaged in marital counselling render a service which is geared to helping immature partners achieve a more satisfactory adjustment together. Yet, although working towards the same goal, the social worker and the psychiatrist function in different areas. The former works only with conscious feelings and motivations, the latter actively probes into the unconscious hoping to reveal and resolve feelings, long since forgotten but nonetheless extremely influential. A further difference is that the social worker's role includes helping marital partners who have experienced difficulties primarily because of some physical or environmental difficulties. The psychiatrist works only with people suffering from emotional conflicts too serious for them to solve unaided.

Other marital counsellors, drawn primarily from the professions of sociology and education, regard marital counselling as a purely educational service. These counsellors assist their clients to understand some specific aspect of marriage, such as the biological, the legal or the cultural, around which the clients have experienced difficulty.

A sociologist, Robert Foster, expresses the outlook of this group in the following manner:

"We can say with reference to the marriage counsellor that his job is not to rehabilitate sick people, but of helping to clear up matters of information, misinformation and conflict with normal people who are not mentally ill". 1

However, in a field as new and as broad as marital counselling there is need for a diversity of opinion, and a need for all the knowledge that the social and biological sciences can reveal about human beings and their behaviour. All professions have something to contribute, and doubtless each profession feels that its approach and treatment is best suited to cope with the problems that marital disturbance presents. Caseworkers believe that the generic approach of social casework uniquely qualifies them to appraise the total functioning of the client.

"Many people can and do offer advice, many have a technical knowledge of particular phases of marriage, and can offer sound instruction, but caseworkers alone have a method of treatment that approaches the situation with an understanding of both psychological motivations, and of social factors in the situation that may be contributing to the problem". 2

There are, however, factors which hamper effective casework treatment of marital problems in a family agency. In the first place, the traditional conception of a social welfare agency being a charitable organization dedicated to helping the poor prevents many

1 Foster, Robert, "Marriage Counselling in a Psychiatric Setting". Journal of Marriage and Family Living, February 1953, Page 42

2 Waelder, Elsie, "Casework with Marital Problems", Journal of Social-Work, May 1947, Page 47

middle and upper class people from coming to such an agency. Secondly, the fact that social agencies offer counselling services is unknown to a large part of the public. Both of these factors, however, vary with geographical area. Agencies are realizing the value of interpreting their roles and services to the public and this will in time diminish much of the ignorance existing. Institution of a fee-charging scheme in many social agencies for those who want and can afford to pay for services has proved to be extremely effective in attracting the middle and upper classes.

A third limitation to marital counselling in many social work settings has been the scarcity of male social workers. The Vancouver Family Service Agency employed no male workers until recent years and the present ration of six men to twelve women represents the highest number of men ever to work for the agency. As can be readily appreciated, many clients, especially men, prefer to discuss their problems with a male worker, and this shortage has done much to limit the marital counselling services of this and other social work agencies. 1

Marital Conflict Defined.

Marital conflict has been concisely described by Sidney J. Berkowitz as occurring in a marriage when "the negative factors of frustration, disappointment and hostility outweigh the positive factors of love and companionship, mutual respect and sexual harmony." 2

1 It should be pointed out that the total number of women workers employed includes three part-time workers. The Director of the agency, who in addition to his administrative duties, is responsible also for some cases; he has been included in the number of male workers.

2 Berkowitz, Sidney, "An Approach to the Treatment of Marital Discord", Journal of Social Casework, Nov. 1948, page 1

Mr. Berkowitz distinguishes between marital conflict and a problem in marriage, which he describes as a situation "where strains and tensions develop primarily because of the effect of situational or environmental factors while the basic relationship remains satisfactory".¹ Many of the problems which occur in marriage can be resolved by the partners themselves without any recourse to outside help. Sometimes, however, the basically positive relationship becomes damaged because of the depth and/or extent of the problems and the partners find that they are unable to reach a satisfactory solution.

Social workers engaged in marital counselling are called upon to assist clients having marital problems and those suffering from marital conflict. Not always, however, is this differentiation between marital conflict and marital problems made, but in the analyses of the cases contained in the following chapters it will be referred to frequently. Mr. Berkowitz in differentiating between marital conflict and marital disturbance makes no mention of the attitude of the partners toward their marriage. Some partners, even when suffering from marital conflict, desire and are willing to work for reintegration of their marriage. Others see separation as the only possible answer and refuse to consider any alternative solutions. The motivations of the partners must be considered when the caseworker is attempting to decide whether a certain case reveals marital conflict or disturbance.

In this study six cases are examined. Three cases definitely can be classed as marital conflict cases. The others could be described as marital problem cases as the basic relationship was

1 Ibid. Page 1.

satisfactory, and the partners wanted to preserve their marriage. Yet the causes of the breakdown of the relationships were the incompatible emotional needs of the partners, not physical or environmental circumstances. For the purposes of this study Mr. Berkowitz's description of marital disturbance has been enlarged to include the following: when the partners need each other and are desirous of resolving their problems together, and when in the opinion of the caseworker this desire is a realistic one, that such a case, irregardless of the causes of the problems, constitutes one of marital disturbance rather than marital conflict.

Social Casework.

Social casework is concerned with the problems of social adjustment which people encounter, and with which they cannot cope alone. Casework has been developed to assist individuals to achieve a more wholesome and satisfying social adjustment. Where needed, social casework co-operates with other methods that have been devised to assist people, namely psychiatry, medicine, education, religious training and other social work methods: social group work and community organization. One of the most adequate definitions of social casework was formulated by the Rev. Swithun Bowers. Writing on the "Nature and Definition of Social Casework", Rev. Bowers states, "Social casework is an art in which knowledge of the science of human relationships and skill in relationships are used to mobilize capacities in the individual and resources in the community appropriate for better adjustment between the client and all or part of his total environment". 1

1 Bowers, Swithun, "The Nature and Definition of Social Casework", Journal of Social Casework, Oct. 1949, Page 127.

In order that a clearer conception of casework can be obtained, various methods within casework have been listed and defined. Dr. Florence Hollis made a valuable contribution in this area by describing four methods of casework treatment. Dr. Hollis based her classification on "the means by which change was brought about - the various processes and techniques used", and she used the terms "environmental modification, clarification, psychological support and insight development"¹ to describe these four levels. Since one of the purposes of this study is to examine the casework process as demonstrated in marital counselling practiced by caseworkers, it is necessary that some attention be given to this classification.

As the term suggests, environmental modification consists of altering unfavourable surroundings as that the client's adjustment to his environment may be as harmonious as possible. Thus a caseworker would assist a family to find more adequate housing if their present house was unsuitable, and would aid an unemployed client in obtaining a job. This was originally the sole approach of social work, but other casework methods of helping people have been devised in the past thirty years.

In the giving of psychological support the caseworker supports and encourages when the client is not able to cope with environmental pressure and/or inter-personal problems. It should be emphasized that the supportive help of a caseworker differs from the friendly advice

¹ Hollis, Florence, "The Techniques of Casework", Journal of Social Casework, June 1949, Page 147

and help of a lay person. The caseworker consciously and deliberately gives support to the ego because he has decided that the client has lacked the supportive help of one or both parents, or is under great pressures; and that he can best be assisted by having this need met. Psychological support is specifically an attempt to support the strengths that the client possesses. It may also be used in conjunction with all other methods of casework help.

With regard to clarification Dr. Hollis states that:

"the dominant note in clarification is understanding - understanding by the client of himself, his environment and/or the people with whom he is associated. It is directed towards increasing the ego's ability to see external realities more clearly and to understand the client's own emotions, attitudes and behaviour." 1

Clarification is usually concerned with fully conscious material, while insight treatment is more intensive and involves reliving of feelings.

Insight treatment borders on psychotherapy, and for this reason it is undertaken only by skilled workers working with psychiatric consultation. In insight treatment the caseworker assists the client to become aware of suppressed or repressed feelings and attitudes which are influencing his present behaviour. Casework treatment according to Dr. Hollis works only with unconscious material that has been repressed or suppressed in late childhood or adolescence. The material which became part of the unconscious in early childhood is left exclusively for the psychiatrist. "The chief difference (between

1 Ibid, Page 152

insight gained through casework treatment and psychotherapy) is one of depth - depth of the transference of the worker's comments and of the material reviewed by the client. We reach and comment on suppressed material and those unconscious thoughts and feelings that are not¹ deeply repressed." Other writers such as Gordon Hamilton see the caseworker dealing only with conscious material.

The Principles and Elements of Social Casework.

Social casework, like all forms of social work, is based upon democratic principles. Without an understanding and appreciation of the democratic way of life it would be impossible to gain an adequate conception of social work. Dr. Gordon Hamilton, who has written extensively on this subject, states:

"Only if the individual is respected and allowed to develop through education, science and free institutions is he capable of creating the conditions under which he lives. That he does participate fully in his own socialization is the central assumption of casework."²

The principles of social casework are then essentially democratic ones.

They are listed below and are elaborated later in the study.

- 1) Recognition of the client's right, as far as possible, to decide for himself.
- 2) Acceptance of the client as a worthwhile person.
- 3) Recognition of the client's right to a happy and satisfying existence, and his right and duty to contribute to the community in which he lives.

1 Ibid, Page 153.

2 Hamilton, Gordon, Theory and Practice of Social Case Work, Columbia University Press, 1951. Page 8

- 4) Recognition that all behaviour is meaningful and that existing behaviour represents the most satisfactory method of adjustment that the individual has been able to achieve.
- 5) A desire to help those desiring assistance and an ability to provide directly or through referral the services needed to effect a more adequate adjustment.

The elements of casework, which considered together make up the total casework process, are of particular concern to this study as the casework process will be examined in detail. The logical place to begin an examination of the casework process is with the concepts of study and diagnosis.¹ Study and a diagnostic evaluation of the client is essential for the caseworker to know the needs of the client and to provide services that the client can accept and use constructively. To illustrate: to offer a profusion of services to a hostile client, convinced he is alone and unloved, would be wasted effort, unless this meant someone was interested in him. Until this client had been shown that he is important and cared for, he would be unable to utilize any services effectively. It is through study and the use of a comprehensive psycho-social diagnosis that the caseworker determines the amount and the kind of help that the client needs in order to effect a more satisfying adjustment.

1 Ibid, Chapters 8 and 9.

Gomberg and Levinson have delineated three components of diagnosis:

- " 1) the personality structure of the client, the extent of pathology, and whether the maladjustment can be treated in a casework agency;
- 2) the client's readiness, willingness and ability to use help, and
- 3) the family diagnosis."

The treatment plan is based upon the diagnosis. By consciously formulating and carrying out a treatment programme the caseworker attempts to aid the client in the most effective way. It should be stressed that the treatment plan is a plan of method to be used to help the client find and move toward his own goal. It is not haphazard, casual encouragement, nor a way of manipulating the client. It is geared to the needs of the client, just as the medicine prescribed by a physician is calculated to remedy some physical maladjustment.

Many of the principles of casework must be considered as elements inherent within the casework process. The principle of self-determination must be observed, not as a vague, generalized concept, but as an indispensable, and guiding principle in every case. Every treatment plan must recognize the validity of this principle, for only change that is brought about by the client himself will be lasting change. In addition, every client, unless he be mentally deranged, has the right to decide for himself whether he wishes to change.

1 Gomberg, M. Robert,)
) "Diagnosis and Process in Family
Levinson, Frances T.) Counselling, F.S.A.A., 1951, Pages 21, 22.

The principle of individuality is also observed with every client. Caseworkers should be careful not to regard their clients in routine fashion and stereotype them into fixed moulds. While similarities do exist between clients, each is an individual with distinctive characteristics and should be regarded as such.

The principle of objectivity accompanies all forms of casework. The caseworker consciously refrains from becoming over-identified with the client and tries to obtain an objective and accurate picture of the client and his difficulties. With this appraisal in mind the caseworker can offer the client helpful and realistic assistance.

Another inherent element of the casework process is the non-judgmental attitude of the caseworker. The caseworker does not condone the actions of the client but he accepts them, realizing that the client behaves as he did for some definite and, often to the client, logical reason. The caseworker does not assume a critical attitude but rather an understanding and encouraging one which helps the client to relinquish his present unsatisfactory level of adjustment and strive for a more satisfying one.

Finally we need to consider one of the most important aspects of the casework process - that of relationship. The concern of the caseworker for the client, the knowledge and understanding of human behaviour possessed by the worker, the awareness of the client's needs and how these needs may be met, are all made available to the client through the medium of the relationship existing between the

client and the caseworker. The tone of the relationship is set by the caseworker's attitude and "it is consistently accepting, strengthening, encouraging, responsive, and enabling."¹

Many of the clients of a social work agency have experienced negative relationships with one or more parents, which have tended to make them suspicious and hostile. The caseworker treats the client as a person of importance and value and tries to show the client that not all relationships are negative and harmful. This experience enables the client to move eventually toward establishing a more mature relationship with the caseworker and later with other adults.

Method and Purpose of the Study.

It is the intention of this study to examine the casework approach to marital counselling, and attempt to determine the positive and negative aspects of this approach. Other research studies have been concerned with the effectiveness of social casework as a method of marital counselling. Wilfred Calnan, in a thesis entitled the Effectiveness of Family Casework, examined thirty-four cases of marital discord, with the aim of trying to discover if family casework was effective in helping people with marital problems. Mr. Calnan chose four groups of cases; the first had as the common factor a marriage of less than five years duration; the second, consisting of cases of advanced marital conflict; the third, of cases ending in separation and divorce; and the fourth, where reconciliation was

1 Scope and Methods of the Family Service Agency, Report of the Committee on Methods and Scope of the F.S.A.A., New York, 1953, Page 16.

effected. Mr. Calnan found that as the marital problems increased in severity they became increasingly hard to treat. Accordingly, the greatest amount of success was found in the first group. Mr. Calnan states:

"Throughout this range of cases, except for isolated instances, family caseworkers demonstrated a quality of craftsmanship, on a level higher than any achieved in the other group of cases. This statement must be qualified by the observation that the problems among this group of families were comparatively simple." 1

In arriving at his conclusions as to whether the casework had been effective, Mr. Calnan used as his criteria of success the following:

"The success of family casework, it would seem, should be measured in terms of achievement in helping clients and families to deal with the social and personal problems of living, so that they will be able to carry on in normal society". 2

Mr. Calnan found that the casework services of the Family Service Agency "were reasonably effective". 3 However, where problems were complex as in the second, third, and fourth groups, Mr. Calnan thought that there was a need for improvement. He specifically recommended that the future caseworkers employed by the agency be psychiatrically orientated.

Another research study based upon the case records of the Family Service Agency has direct relevance to this study. In her

1 Calnan, Wilfred, The Effectiveness of Family Casework, An Evaluation of the Casework Treatment of Family Relationship Problems by the Family Welfare Bureau of Vancouver, MSW Thesis, 1948, Page 117.

2 Ibid, Page 172

3 Ibid, Page 201

Master of Social Work Thesis Mrs. Betty Morton dealt with the "role of the male in marital counselling cases, and the planning of the caseworker in regard to the husband's participation in treatment".¹

Mrs. Morton concerned herself primarily with the husband in marital discord. She attempted to find out what sort of a person he was, and how his involvement in treatment affected the outcome and the planning of the caseworker. Mrs. Morton found, on the basis of the fifteen cases studied, that:

"An improvement in the marital relationship is possible, irrespective of the focus on the wife, the husband, or both marriage partners. In most cases, however, where there was considerable improvement in the marriage relationship, positive movement had been achieved by both partners." ²

Both of the above studies revealed that social casework can help those in marital conflict. They were not, however, concerned with how casework helps. This study was motivated by a desire to discover the positive and negative aspects of the casework approach and to specifically enquire how caseworkers help marriage partners to resolve their problems and conflicts.

The limitations of the study should be made clear at this point. Because of the number of cases studied and the subjective nature of the analysis, it would be absurd to claim that this is a definitive or exhaustive study. It represents, rather an illustrative review of the casework approach and process in an attempt to

1 Morton, Betty, The Psychodynamics and Treatment of the Male Partner in Marital Conflict Cases, An Exploratory Study based on Family Service Agency Files, Master of Social Work Thesis, University of British Columbia, 1957, Page 133

2 Ibid, Page 132.

select some of the strengths and some of the weaknesses of the casework approach.

This study was undertaken because of the writer's interest in the casework process, and in the attitudes and capabilities of social caseworkers in counselling those in marital conflict. The paper is of current interest locally because of the evaluation of the Marriage Counselling service of the Canadian Mental Health Association by the Social Planning Section of the Community Chest and Council, and the differing opinions in the community regarding the appropriateness of having two marriage counselling services in one area. There is, too, some question as to which is the more effective approach. It should be noted here that no attempt will be made in this paper to decide this question. To accomplish this would mean a random sampling and an intensive analysis of a large number of cases of both agencies by an objective research team. This paper will be of concrete use only to social caseworkers, either to acquaint those who are unfamiliar with the subject, or to assist those who are engaged in marital counselling to examine critically their skills and attitudes.

The six cases examined in the following chapters were chosen for study because they seemed to offer fruitful discussion of the casework approach to marital counselling. The case records have been summarized, and the information needed for an understanding of the cases has been gathered under the following headings.

- A. Background of the Family.
 - 1. Background information.
 - 2. Presenting problem.
- B. Family Strengths and Weaknesses.
 - 1. Ego strengths of the partners.
 - 2. Willingness to use casework help.
 - 3. Economic - environmental circumstances.
 - 4. Family relationships.
- C. Casework Process.
 - 1. Diagnosis and treatment planning.
 - 2. Out come.

Following the presentation of the case summaries, the casework help is examined. Throughout the examination the outline of casework as presented in this chapter will be directly related to the case analyses.

One other point should be made clear at this juncture. The writer found that the recording in many of the records was inadequate and often vital information was missing. Diagnoses and treatment plans were sometimes stated in clear and definite form, and in other cases were not even referred to. Facesheet information, which has been gathered together and is contained in schedule form, was frequently incomplete. It should be noted that all available, pertinent information is presented in the case summaries.

The first method of selection of suitable cases consisted of examining all cases closed in the year 1955 which had as the sole presenting problem marital conflict. This approach was found to be a sterile one, because the nature of this study demands that the cases be long term ones, in which the casework process can be seen in considerable detail. The majority of the closed cases were found to be short term ones, only two being suitable out of a total of eighty-five that were read. This method of selection, therefore, was abandoned as it was thought that it would take too long to find the required number of suitable cases.

The second approach was through the caseworkers of the agency. Seven caseworkers, all of whom had worked with the agency for five years or longer, were asked to recall three closed cases of marital conflict in which they felt the casework process could be studied. The outcome of the case was not a determining factor at the outset, but the writer, when making the final selection, chose three cases where the partners had been helped to separate, and three where the marital difficulties had been at least partially resolved.

CHAPTER II

CASEWORK HELP DIRECTED TOWARD THE REINTEGRATION OF THE MARRIAGE

The casework help in the three cases to be examined in this chapter was focussed upon helping the clients to reintegrate their marriages. The clients desired to resolve the problems that were facing them, and to achieve a satisfactory marital adjustment. This desire is indicative of a certain amount of ego strengths, and although all the clients faced many problems, the basic relationship was satisfactory. These cases appear to be ones of marital disturbance. All the clients needed their partners, and all were desirous of resolving their problems together and not as a single person.

Black Case - Supportive Assistance for a Wife:

A. Background of the Family:

1. Background Information: Mrs. Black was raised in an extremely rigid home, where high standards were set for the children. Mrs. Black's mother was the dominant person in the home, and Mrs. Black remained dependent upon her mother even after her marriage. Her father suffered from a chronic disease, and was unable to work. From the information available it would seem that Mrs. Black did not have much affection, except when she conformed to the strict standards laid down by her mother. Because of the poor family circumstances, Mrs. Black had to leave home at the age of sixteen and seek employment.

Mr. Black was never interviewed by a caseworker, and the background information given in the case record was provided by Mrs. Black. Mr. Black was the youngest child in a family of three. His father died when he was three. In order to support the children, Mrs. Black Sr., went out to work. The eldest child was placed with an aunt and uncle following the death of Mr. Black's father. Mr. Black and his sister were given responsibilities early, and had to prepare meals and clean the house. Mrs. Black Sr. became a heavy drinker after the death of her husband, and she gave the children little affection. She was inconsistent in disciplining the children, being alternately indulgent and then severe.

2. Presenting Problem: Mrs. Black contacted the agency twice, requesting financial help to assist her with confinement expenses. Mr. Black, at this time, was in the Air Force, stationed away from home. On both occasions financial aid was given, and the case was closed. In 1952 a referral from the Family Court was accepted by the agency and by Mrs. Black for help with the marital problems besetting Mr. and Mrs. Black.

B. Family Strengths and Weaknesses.

1. Ego Strengths of the Partners: Mrs. Black's ego was fairly strong. She proved to be able to adapt to the marital situation, even though a complete resolvment of the problems was not effected. Mrs. Black's basic personality configuration

remained unchanged at the cessation of the casework treatment. She was, however, able to accept some of the responsibility for the marital problems, and not blame Mr. Black totally as she had done prior to the contact with the agency.

Since Mr. Black was not involved in treatment, no diagnostic assessment of him is contained in the case record.

2. Willingness to Accept Help: Mrs. Black wished to receive help with the marital situation, and was able to co-operate with the caseworker in achieving some improvement. However, she resisted being involved in a treatment situation that was focussed upon her own personality problems.

3. Economic Environmental Circumstances: Although the initial reason for Mrs. Black's contact with the agency had been for financial assistance the Blacks proved able to care for their own wants. Mr. Black worked as a butcher and earned quite a high salary. Mrs. Black was a capable housekeeper. Despite Mr. Black's habits of gambling and drinking, she was able to manage the household budget without outside assistance.

4. Family Relationships: During most of the time that Mrs. Black was in contact with the agency, Mrs. Black Sr. lived with the family. Her presence in the home contributed to the marital difficulties of her son and daughter-in-law, as most of Mr. Black's personality conflicts stemmed from his relationship with his mother. Mrs. Black Sr. occupied a position of some importance in the Black family, principally because of Mr.

Black's emotional dependency upon her, but also because he owed his mother a large sum of money. When Mrs. Black Sr. moved out of the Black home, Mr. Black was able to consider his wife as a person of worth, and did not project his feelings of hostility that he felt toward his mother onto Mrs. Black.

The Black children are mentioned only infrequently in the case record. In two interviews Mrs. Black stated that the children were becoming disobedient and unco-operative. She blamed her husband for the change in the children's behaviour, and claimed that his drinking and rowdy habits were the cause of the children's restlessness. For the most part, however, Mrs. Black did not exhibit too much concern about the children.

C. Casework Process:

1. Diagnosis and Treatment Planning: The caseworker recorded her diagnostic thinking of Mrs. Black in the following manner: "Mrs. Black is a rigid, withholding person with a strong drive toward perfectionism. She has difficulty in expressing her hostility, and has much hostility toward men. She is able to channel her energies fairly constructively into her housework, and seems to care for the children. She provokes her husband into hurting her and then assumes a hurt, martyrish attitude." Mrs. Black had strong unresolved oedipal conflicts. She liked Mr. Black during their courtship because "he did not touch me". She was never able at any time during the contact with the caseworker to express her feelings about her husband, except that she

was "fond" of him. The caseworker thought that the relationship between Mr. and Mrs. Black was essentially a mother-child relationship with no great affectional tie. The caseworker tried to help Mrs. Black to renounce her hostility toward her husband, thinking that the greatest asset that Mrs. Black possessed in her mother role was consistency and acceptance - feelings which Mr. Black had never experienced in his relationship with his mother, and which he badly needed.

The diagnosis of Mr. Black was formulated on the strength of information given by Mrs. Black and cannot be regarded as entirely accurate. The caseworker noted that "Mr. Black was rejected by an inconsistent mother, and was looking for a mother figure when he married. He possesses a weak ego and super ego and lives impulsively." Yet Mr. Black was able to function quite well at work, and he seemed able to relate to men in a positive way. He was active in clubs and in athletic activities. Mr. Black had a good relationship with his supervisor, who accepted him despite his habits of drinking and gambling which sometimes interfered with his performance at work. The caseworker thought that this relationship seemed to indicate that Mr. Black would respond to a supportive and encouraging person.

2. Outcome: Mrs. Black was able to modify her attitudes and expectations as a result of her contact with the caseworker, and this, together with her increased understanding of her husband, enabled her to change the pattern of behaviour that had

been established between herself and Mr. Black. Her relaxed attitudes and acceptance of Mr. Black resulted in Mr. Black modifying his behaviour.

Analysis of Black Case:

The Black case is a good illustration of the modifications that can be effected in an unhealthy family situation when only one of the partners is willing to be involved in treatment. This is not to suggest that work with one partner can bring about as lasting and effective a change as can treatment that involves both partners. Frequently, however, caseworkers and others concerned with marital counselling are faced with cases where one partner refuses to accept the proffered help, and the caseworker has to recognize this decision and the limitations resulting from it. In some instances, where case-work help has been skillfully extended to one partner and where improvements have been brought about, the other partner will reconsider his decision, particularly if the caseworker periodically renews his offers of help. In these instances, the caseworker should make every effort to make himself available to the "silent" partner and, if contact is initiated, should endeavour to make the partner fully aware of the agency interest in him as well as in his spouse.

This latter point becomes very apparent when the Black case is studied. Mrs. Black requested help from the agency and expressed her desire to "straighten out her marital problems." As will be seen later, Mrs. Black at first regarded her contact with the agency as a means of making her husband conform to a code of behaviour she approved of. She

explained her contact with the agency to her husband in this way, and he, when asked by the worker to come to the office for an interview, refused. Mr. Black saw the worker as an authoritarian person, allied with his wife and demanding of him a modification of his habits of gambling and drinking. The caseworker was aware of Mr. Black's misconception, but apart from writing to Mr. Black and requesting an appointment, did nothing to allay his fears.

Telephone conversations with Mr. Black explaining agency function and attitudes with regard to marital problems might have helped Mr. Black sufficiently to enable him to come to the office for an interview. It should also have been explained to Mr. Black that he could talk to a male worker if he so wished.

When Mrs. Black came to the agency she was an angry, disappointed person. Her marriage had failed to give her the satisfaction and security she had expected, and since she looked upon herself as a hard working, conscientious person, she sincerely felt that the responsibility for the failure of the marriage lay with her husband who drank to excess and gambled away much of his salary. She had little insight into the needs and wishes of her husband, and could not understand why he attempted to gain satisfaction from liquor and gambling. She herself found it difficult to express her anger and resentment, and although she found some satisfaction from looking after the children, she felt cheated and wronged.

The caseworker, following the precept that to be helpful one must begin at the point where the client is, listened to Mrs. Black's

expressions of hostility with attention and sympathy. Only when Mrs. Black had expressed her anger did the caseworker begin to clarify some of Mrs. Black's mistaken impressions. Because of the worker's patience and obvious willingness to listen and be of help, Mrs. Black came to trust the worker, and in the later stages of the treatment process when clarifying material was introduced, Mrs. Black was able to think with the worker. When a positive relationship had been established and Mrs. Black's feelings of hostility towards her husband were expressed and accepted, the caseworker began to help Mrs. Black understand why her husband reacted in certain ways, and how she herself contributed to his behaviour.

It can be seen from the following quotation from the case record that the clarification was not handled in a pedagogical way, but that Mrs. Black's increased insight resulted from a sharing of information and ideas between Mrs. Black and the worker. The quotation is taken from the recording of the tenth interview in which Mrs. Black described an incident where Mr. Black had, as was his custom, exploded with little provocation:

"We examined the incident a bit, as to why he should have such a sudden, angry reaction. We agreed that he was in the habit of doing that, and I wondered if this was the way he reacted toward his mother. She agreed and we then looked at his mother's attitude toward him, and she observed that the mother never gave any of the children a chance, but "bit into them" right away. I suggested that he always expected a critical, negative attitude from his mother, and she agreed. ... Speaking of that incident and after discussing this, she concluded that he was reacting as though to his mother, just expecting her to be like his mother."

With this increased knowledge and understanding Mrs. Black was able to change her customary method of responding to her husband, and found that when treated in a more accepting way, Mr. Black could change his behaviour. The caseworker assisted Mrs. Black to understand her husband's feelings toward his mother, and that these feelings were often transferred to her.

In working with Mrs. Black, the caseworker observed the principles of casework, and the positive results that these observations elicited are worthy of note. When Mrs. Black, for example, talked of obtaining a separation, the caseworker did not question the wisdom of this step. She did, however, point out that separation was a big step, and that before undertaking it, Mrs. Black ought to be fully convinced that it was the best solution. She offered to help Mrs. Black determine the difficulties and the advantages of separation. Mrs. Black accepted this offer promptly, not really knowing whether a separation would be the most satisfactory answer.

The caseworker was careful not to judge Mrs. Black. It would have been a great temptation for the worker to have responded to Mrs. Black's continual criticisms by pointing out that she, too, was to blame for the marital problems besetting her and her husband. The worker neither agreed nor disagreed with Mrs. Black but explained fully to her the non-judgmental aspect of casework - - that we do not sit in judgment upon our clients but try to understand why they act as they do and try to formulate means of helping them. This point was raised when Mrs. Black tried to enlist the agency on her side against her husband. Mrs. Black's understanding of the agency's attitude toward

marital problems helped her eventually to modify her own.

In all the interviews Mrs. Black was treated as an individual who was a worthwhile and important person. The caseworker's recognition that her problems constituted a definite strain upon her, and were hampering the harmonious functioning of the family, was soon apparent to Mrs. Black, and she responded to it.

After the sixth interview with Mrs. Black, the caseworker recorded excellent diagnostic thinking, a summary of which has been given to the outline of the case (See Page 24). No diagnostic formulations were recorded earlier, although the worker had an adequate understanding of much of the situation in the early interviews. This was indicated by her recognition that Mrs. Black needed an opportunity to vent her hostility, and needed to be treated as a worthwhile person who was capable of discharging her responsibilities. It is regrettable that the worker failed to record her early diagnostic thinking. The worker failed, in addition, to record her treatment plan. Because of the soundness of the diagnosis and the fact that Mrs. Black was helped sufficiently by the contact with the agency to modify her own attitudes and expectations, it seems reasonable to assume that the worker did have a treatment plan in mind. Once again it is regrettable that the recording is incomplete.

An effective device for caseworkers to use to aid them in extending realistic and suitable assistance to their clients is that of re-evaluation. In the Black case this device is used in a particularly meaningful way -- it was shared with the client. The review took place in the sixth interview. The worker handled the matter in a

natural and skillful way. She asked Mrs. Black if she felt disappointed in the lack of progress that had taken place. Mrs. Black was by this time secure in her relationship with the worker, and was able to reply truthfully. The worker then pointed out that Mrs. Black had come to the agency with the idea that the situation could only be improved if Mr. Black could change his pattern of behaviour. Mrs. Black then grasped that this was an impossible request - - that Mr. Black could not change by "proxy". From this point on Mrs. Black was able to look at her own behaviour, and how Mr. Black reacted to it.

The relationship between Mrs. Black and the worker was consciously built up by the worker into an extremely positive one. The worker was able to do this because she recognized Mrs. Black's needs and gave Mrs. Black an opportunity to have these needs met. The worker recognized, too, that Mrs. Black's mother had been a rigid and severe person and was, therefore, careful not to allow Mrs. Black to regard her as a controlling or authoritarian figure. She offered a "corrected mother relationship" to Mrs. Black, and gave understanding and approval and encouragement to help Mrs. Black feel more secure as a woman, and to understand and accept her husband as he was.

As mentioned in the case summary there is little recorded about the Black children. Mrs. Black seemed too pre-occupied with her own part in the marital situation to devote much attention to the children. She did not ask for any help from the caseworker to cope with any problems that the children were presenting, although she did need some reassurance that she was caring for them adequately.

The Jeffrey Family - Supportive Assistance for Disturbed Husband:

A. Background of the Family:

1. Background Information: Mr. Jeffrey was born and raised in a small prairie town where his father was a section foreman. His mother died when he was seven years old, following a considerable period of illness. His father did not remarry, and looked after Mr. Jeffrey and an older sister himself. The father drank heavily and left the children alone frequently. Mr. Jeffrey felt that his sister was closer to his father, and that no one cared much what happened to him, or what he did. He played truant from school often, and as a result received only a very cursory education.

Little background information is given in the case record regarding Mrs. Jeffrey. On one occasion when she was contemplating separation, she indicated that she did not want to return to the home of her mother in the East, but no elaboration of this statement is recorded.

2. Presenting Problem: Mr. and Mrs. Jeffrey's first contact with a social work agency occurred shortly after their marriage. Mrs. Jeffrey had been married before and had two children by this marriage. Her first husband was killed in an automobile accident. Mr. and Mrs. Jeffrey applied to their municipal social welfare agency to adopt Mrs. Jeffrey's children, who were ten and nine years old at the time of the marriage. The adoption was completed with a minimum of difficulty. Some two years later Mrs.

Jeffrey contacted the same agency to request "advice to help them with their marital difficulties." The municipal agency attempted to refer the Jeffreys to the Family Service Agency since no financial assistance was required. The latter agency, however, felt that since the Jeffreys were known to the municipal agency it was the appropriate agency to extend help to the Jeffreys and this was finally accepted by the municipal department.

Nearly two years later the Jeffreys were again referred by the municipal agency. Apparently the Jeffreys had been helped by their previous contact with the agency, and contact had been discontinued when Mrs. Jeffrey indicated that their problems were greatly modified. The Family Service Agency agreed to accept the Jeffreys for casework services following the second referral, although the reason for doing so is not too clear. The intake worker recorded in the case record: "I agreed that if the family were non-practising Catholics, and did not wish to use the services of the Catholic agency, that we would agree to accept responsibility for a limited period of time with a view to exploration, but cautioned that if Mr. and Mrs. Jeffrey could not respond to casework help, that we would refer the case back to their agency."

B. Family Strengths and Weaknesses:

1. Ego Strengths of the Partners: When contact with the Jeffreys was first initiated, Mr. Jeffrey seemed very disturbed. He refused to talk to his wife for long periods of time, and to

give her sufficient money to buy food and clothing for the family. He drank occasionally, although his drinking, once a serious problem with him, had decreased since his marriage. He masturbated frequently, and occasionally quite openly in the living room. He also destroyed articles of clothing belonging to his wife, and accused her of appearing in public in an improper fashion. He was impotent in sexual relationships, being able to sustain an erection only when his wife was menstruating. Mrs. Jeffrey was particularly worried about his behaviour toward her daughter, aged 15. Mr. Jeffrey had gone into her bedroom at night, but had not made any advances toward her.

As indicated earlier Mr. Jeffrey had received only a nominal amount of love and affection during his childhood years. The first sign of his lack of emotional nutritions was revealed at the age of six when he began to stutter. It was at this time that Mr. Jeffrey's mother became ill, and his difficulties increased from this time on. During the war Mr. Jeffrey served in the army and was wounded overseas. He sustained a shrapnel wound in his leg, and received a 10% disability pension. During his stay in the army Mr. Jeffrey began to suffer kidney pains, and also experienced a leakage of semen which took place at night without an accompanying erection. Mr. Jeffrey reported that the army doctor he consulted stated that he should get married as a cure for this latter condition.

Despite the problems listed above, Mr. Jeffrey had been able to maintain a good work record, and revealed kindness and affection in his relationships with the children.

The caseworker considered Mrs. Jeffrey to be a capable and fairly mature person who cared for her husband, and was interested in providing a good home for her children. Mrs. Jeffrey was sufficiently strong enough to be able to give her husband a considerable amount of support, although at first she found it difficult to understand that Mr. Jeffrey needed mothering as well as the four children.

2. Willingness to Accept Casework Help: Both Mr. and Mrs. Jeffrey were anxious to improve their marital relationship, and both co-operated with the caseworker throughout the contact with the agency.

3. Economic Environmental Circumstances: Mr. Jeffrey earned an average salary, and the Jeffreys lived in a moderate, but comfortable fashion. There were no economic problems which affected the marital relationship.

4. Family Relationships: Mrs. Jeffrey was concerned that the children would be affected by the marital difficulties, and it seemed from her account that the security of the children was being threatened. However, despite this concern which was manifested in only a few interviews, the children seemed more like shadows in the family rather than real people. No direct casework help was given to the children, although both Mr. and Mrs.

Jeffrey were helped to understand certain behavioural patterns of the children.

C. Casework Process:

1. Diagnosis and Treatment Planning: During the time that Mr. Jeffrey was in contact with the agency, he was examined by a psychiatrist at Shaughnessy Military Hospital. The psychiatrist described Mr. Jeffrey as a "dependant person, inadequate in emotional depth .. and a simple, immature person with chronic maladjustment." Mr. Jeffrey himself had some superficial insight into the nature of his problems. He noticed that his kidney pains became worse when he felt left out or ignored. He stated on one occasion that, in marrying a widow with two children he had assumed more responsibility than he was able to manage. The caseworker did not record a diagnosis of either Mr. or Mrs. Jeffrey. It is, however, evident from the tone of the recording that the worker had an adequate understanding of the needs of Mr. and Mrs. Jeffrey, and also that he attempted to meet these needs in a planned fashion. He recognized that Mr. Jeffrey needed a great amount of support if he was to function as a husband and father. The caseworker gave this support at first, and then in working with Mrs. Jeffrey enabled her to understand and to meet this need.

2. Outcome: The caseworker recorded in his closing summary that: "the family seem to be functioning more satisfactorily. Mrs. Jeffrey felt that she could understand her husband somewhat better, and could compensate for his limitations. It was

not felt by the worker that Mr. Jeffrey could not, or in the future, use more than a supportive and somewhat clarifying contact". In addition, the caseworker thought that "out of this contact with Shaughnessy Military Hospital and with the support received from this agency, the relationship between Mr. Jeffrey and his wife had improved. She seemed able to reach out to him when he felt guilty about his actions. He felt that she had a greater interest in him, and as a result the problem around impotence seems to have greatly improved."

Analysis of Jeffrey Case:

The Jeffrey case shows how a severely disturbed person can benefit from an essentially supportive casework contact. The caseworker was not frightened by Mr. Jeffrey's behaviour, but looked for and found positive aspects of Mr. Jeffrey's personality, and concentrated upon these. In his article "Distinguishing Between Psychotherapy and Casework" Dr. Jules Coleman discusses this point:

"I wonder in how many cases a label of schizophrenia or psychopathic personality may have discouraged the extending of available casework help to persons with situational anxieties who were reaching out for emotional support and understanding assistance with the same kind of problems for which help would have been given generously and without question if the ugliness of the diagnosis had not intruded itself to obscure the actual reality." 1

The caseworker tested Mr. Jeffrey's ability to respond to casework help and finding that he could relate to a person interested in him

1 Coleman, Jules, "Distinguishing Between Psychotherapy and Casework, Journal of Social Casework, June 1949, Page 247.

made deliberate and constructive use of a supportive relationship. At every opportunity the caseworker pointed out to Mr. Jeffrey that, despite his anxieties and problems, he had continued to hold a job and provide sustenance for his family, and the caseworker praised him for this ability. The caseworker also showed his appreciation of Mr. Jeffrey's interest in and love for his children, and his desire to improve the marital relationship.

With the backing of a secure relationship with the caseworker, Mr. Jeffrey was able to tell of his feelings of inadequacy and of his problems in regard to sex. The caseworker learned that Mr. Jeffrey had become impotent when his wife criticised him for masturbating. The caseworker did not probe into Mr. Jeffrey's problem with masturbation, but accepted it as something that a person might turn to, when beset by worries and problems. Mr. Jeffrey felt guilty about his pattern of masturbation, especially as his wife, not understanding why he did this, had criticised him many times. He needed the security of knowing that despite this, someone could be interested in him. Given this security he could marshal his energies in the direction of overcoming his fears and problems in sexual behaviour.

To assist him in evaluating Mr. Jeffrey's personality, the caseworker suggested that Mr. Jeffrey be examined at Shaughnessy Military Hospital, and Mr. Jeffrey agreed. The caseworker wanted to have a psychiatric opinion regarding the extent of Mr. Jeffrey's personality strengths, and also to find out if there was any organic reason for Mr. Jeffrey's backaches. It appears that the psychiatrist, who saw

Mr. Jeffrey, corroborated the caseworker's thinking.

The principles of casework were well observed in work with Mr. Jeffrey. In particular, the worker's acceptance of Mr. Jeffrey as a worthwhile person was basic to the help given to Mr. Jeffrey. The one fault of the casework with Mr. Jeffrey is that the caseworker's diagnosis and treatment plan was not recorded. The caseworker must have possessed an adequate understanding of Mr. Jeffrey in order to extend such appropriate help, but nevertheless this understanding should have been recorded.

The caseworker indicates that Mrs. Jeffrey was a fairly mature person, and the casework help extended to her was directed to helping her to understand the needs of her husband. Once again, no diagnosis or treatment plan was recorded. The approach to treatment with Mrs. Jeffrey offered more clarification and counselling, and less consideration of her own problems. Her understanding and desire to work in co-operation with the caseworker was elicited to assist Mr. Jeffrey in effecting a more satisfactory adjustment. Through an examination of Mr. Jeffrey's background, Mrs. Jeffrey was helped to see that her husband received very little affection as a child, and that this lack was mainly responsible for his adult maladjustments. Specifically, Mrs. Jeffrey was helped to understand and accept her husband's pattern of masturbation, and to see the connection between her criticism and the resulting impotency. With her increased understanding, Mrs. Jeffrey was able to meet some of her husband's affectional needs, and to treat him as a person of worth and importance. She was able, too,

to stop criticising him and the problem around Mr. Jeffrey's impotency gradually decreased.

This kind of help would have been impossible if Mrs. Jeffrey had not been fond of her husband and genuinely interested in improving the relationship that existed between them, and if she had not been a fairly well adjusted individual with few personality problems.

The casework help given to the Jeffreys was mainly supportive, especially with Mr. Jeffrey who needed this type of help in order to progress to a more mature level of functioning. Some clarification was attempted with Mr. Jeffrey. Intellectually he was able to understand some of the problems confronting him. He was able, for instance, to realize that the lack of affection he had received as a child made him feel insecure and unwanted. The caseworker, however, doubted that Mr. Jeffrey's ego was strong enough for him to be involved in a more intensive treatment situation. Indeed, this was not essential, as with the supportive help given by the caseworker and Mrs. Jeffrey, Mr. Jeffrey was able to attain a happier level of adjustment. If Mr. Jeffrey had not had the wholehearted support of his wife, he would have needed more intensive, perhaps psychiatric, treatment. The help extended to Mrs. Jeffrey included clarification, counselling and support, recognition of the difficulties she was facing, and appreciation of her desire to effect a change in the marital situation. She was helped to understand the problems confronting herself and Mr. Jeffrey, and how she could assist with these problems.

The Francis Family - Casework Help on a Family Centered Basis:

A. Background of the Family:

1. Background Information: Both Mr. and Mrs. Francis were raised in families where regimentation and conformity were required, and little affection was given to the children. Mrs. Francis, who was one of nine children, described her father as being demanding and overbearing, and a heavy drinker. He beat his wife frequently, and expected outright obedience from the children. Mrs. Francis' feelings toward her mother are not clearly revealed in the case record, but it seems that she was a compulsive person whose ability to give affection was limited.

At the age of fourteen, Mrs. Francis fell in love with a man much older than herself, and subsequently became pregnant. Her father forbade marriage and her boyfriend died before the baby was born. Mrs. Francis remained at home with her child for three years, and then moved to the Coast to live with an older sister. Her father died when she was seventeen. Mrs. Francis placed her child in a boarding home, and at one time contemplated placement through the Children's Aid Society, but did not follow through with the plans. She met Mr. Francis when she was twenty-five, and married him after sexual intercourse had resulted in pregnancy. Mrs. Francis stated that the early years of the marriage were happy ones. She indicated that their four children, who were born in rapid succession, so occupied their time that they had no time to consider themselves.

Mr. Francis was subjected to an equally unsatisfactory environment as a child. His mother was an excessively compulsive person who subjected the family to rituals, and gave little affection. She was a strong person with many masculine characteristics in her personality, and she wore male clothing and cut her hair short. Mr. Francis' father was a gentle person who liked to cook, but he stressed the importance of the male role in his son, seemingly aware of his own lack of success in this area. Mr. Francis indicated that his mother was the dominant person in the family, and he expressed considerable hostility toward her. The case record does not state the number of the children in Mr. Francis' family.

2. Presenting Problem: A clergyman referred the Francis' to the Family Service Agency and he stated that there was a "twisted emotional situation in the family." Mr. Francis claimed to be in love with his step-daughter, who although married and expecting a child, was living with the Francis'. The clergyman described Mrs. Francis as being nervous and lacking strength, but being desirous of resolving the family problems. Mr. Francis had refused to talk to the clergyman, but had stated that he would see a marriage counsellor.

B. Family Strengths and Weaknesses:

1. Ego Strengths of the Partners: The caseworker felt that both Mr. and Mrs. Francis possessed weak egos. He was therefore, careful to gear the casework help to assist them to deal with

the present reality situation, and not to involve Mr. and Mrs. Francis in too much consideration of the past. Yet in many ways the Francis' were capable people. Mr. Francis had compiled a good work record, and earned enough to ensure his family of an adequate living. Mrs. Francis was an able house keeper, and budgetted wisely for the needs of the family. Both were fond of the children and wished to provide a stable and happy environment for the children.

2. Willingness to Accept Casework Help: Mr. and Mrs. Francis were concerned about the problems that had arisen in the home, and wanted to resolve them. Both revealed a positive attitude toward the agency. Mr. Francis expressed their feelings when he stated at the conclusion of his first interview that he saw "help from the agency being focussed toward helping them to achieve a happier home life."

3. Economic-Environmental Circumstances: The Francis' were an average family in this respect, and no economic or environmental problems were revealed during the contact with the agency.

4. Family Relationships: Mrs. Francis' illegitimate daughter, Kathleen, was a person of major importance in the case. Mr. Francis believed himself to be in love with Kathleen, and he had unconsciously attributed to Kathleen all the qualities he felt a good mother person should have. Consciously Mr. Francis felt that he and Kathleen were interested in the same

things - in good music and in plays. Mr. Francis was also attracted by Kathleen's physical appearance, and he acknowledged this quite openly. Mr. Francis stated during one interview that at the time when Mrs. Francis was away from the home for two weeks he and Kathleen and the other children got along perfectly.

Kathleen had an unsettled life as a child. Her mother was unable to accept her and give her the love that a child needs and she had no father or steady father substitute. Kathleen was placed in many different boarding homes. The Child Guidance Clinic, where she was examined at the time when her mother was contemplating placement through the Children's Aid Society, described her as an "immature, dependent child with a need for recognition, and experiencing difficulty in her feelings regarding her mother". Kathleen was only a mediocre student in school and had a low I.Q. She left school while in Grade VII, and soon after leaving school became involved in some rather serious delinquencies. She was an extremely attractive girl, and was physically well developed at the age of 13. She was committed to the Girl's Industrial School where she remained for six months and was then discharged to a supervised foster home. Kathleen disappeared shortly after her placement and was absent for over a year. She returned home married and expecting a baby. Kathleen's husband was an immature fellow with little desire to incur the responsibilities of a married man. Their married life was stormy, marked by frequent violent quarrels, and the husband

was once jailed for assault. Kathleen spent most of her time at the home of Mr. and Mrs. Francis, returning to her husband for brief periods. At Mrs. Francis' request the caseworker talked to Kathleen, and finding her interested in maintaining contact with a social worker, arranged for a female caseworker at the agency to work with Kathleen. The contact with Kathleen is not noted in the Francis case record, but it is known that Kathleen kept in regular touch with her caseworker over a long period of time. At one point Kathleen left her mother's home to live with her husband on a ranch in Alberta, but soon returned and expressed her intention of obtaining a divorce.

During the early part of the contact with the Francis', the other children are mentioned only infrequently. The caseworker did record some difficulties experienced with the other daughter, who suffered from pleurisy, but the recording is scanty and it is not clear what help, if any, was given. Both Mr. and Mrs.

Francis were concerned about the children; Mrs. Francis, because she feared that the other children would develop as Kathleen had done, and Mr. Francis because he was worried that the children would receive the kind of care that he had received when his parents experienced difficulties in their marital relationship. Both realized that as their relationship improved the children would feel more secure and would receive more affection.

The precipitating factor in the case being re-opened the second time, was the children. Mrs. Francis felt that her husband was openly favouring the oldest boy and was concerned about the effect

this was having on the others. Mr. Francis thought that this boy had been neglected earlier because of their concern with Kathleen, and he was endeavouring to make this up to the boy. The caseworker was able, in this contact, to help the Francis' with the care of the children, and Mr. Francis was able to modify his display of affection toward the older boy. None of the children except Kathleen were given any direct casework help.

C. Casework Process:

1. Diagnosis and Treatment Planning: The caseworker thought that Mr. Francis had carried over a strong negative transference feeling from his mother to his wife. He identified himself with the children, and was concerned that they should not receive the same treatment he did as a child. Mr. Francis married his wife because of her pregnancy resulting from pre marital intercourse. The worker thought that prior to meeting his wife, Mr. Francis had had little experience with women, whereas Mrs. Francis was quite at ease in relationships with men. Mr. Francis stated that his wife made it quite clear to him that he could have sexual relationships with her, and he thought that she was determined to find a husband. The worker judged that Mr. Francis had been attracted to his wife in the mother-son pattern, and that he was searching for a good mother. After marriage he cast Kathleen in the role of the good mother, and, because of his wife's compulsive house cleaning, he began to see more and more of his mother in her.

The caseworker felt that Mr. Francis' ego was unable to deal realistically with problems in relationship with his wife, Kathleen and the other children, and noted Mr. Francis' tendency to withdraw from the family situation by sleeping late on weekends. Mr. Francis stated that he experienced mood swings, and was in a period of depression when he married Mrs. Francis. The caseworker recorded that "there are some notably sick things beneath the surface in his personality," and was careful not to involve Mr. Francis too deeply in treatment. The caseworker's diagnostic thinking regarding Mrs. Francis was equally as detailed and carefully thought out as the above material. The caseworker recorded: "to Mrs. Francis Kathleen is a living embodiment of her wrong doing and of hostility to her father. She feels guilty about her rejection of Kathleen, and the loss of Kathleen's father during pregnancy seems to have bound Mrs. Francis' feelings to him in such a way that mourning cannot ease the identifying ties. This man was the good father person to whom she could show affection. Expression of guilt over hostility to this man would seem to be a major factor in the treatment of Mrs. Francis". The caseworker noted that Mrs. Francis had unconsciously contributed to a similar situation regarding Kathleen and her husband, and the quasi incestuous relationship between Kathleen and Mr. Francis reminded her of her relationship to Kathleen's father. The caseworker noted Mrs. Francis' tendency to hysterical symptoms, for example, her numbness, and her predisposition to mood

swings. Mrs. Francis brought out that she was a religious person, and that her faith in God had helped her when she was in difficulties. Mrs. Francis had become a member of the Salvation Army through an association with an older woman, whom the caseworker felt was a mother substitute for her. At the time she met Mr. Francis, her contact with the Salvation Army had been dissolved, and she did not disclose the reasons.

The treatment plans were not recorded, but it is evident from the recording that the caseworker carefully thought out the treatment needed to assist Mr. and Mrs. Francis. Mr. Francis was helped to understand his feelings toward women, and in particular to examine his feelings toward his wife and Kathleen. Mrs. Francis was helped to become a good mother to Kathleen, and to resolve the guilt which she felt because of her past neglect of Kathleen.

2. Outcome: With the help of the caseworker Mr. and Mrs. Francis were able to effect a fairly satisfactory resolution to their difficulties. The Francis case record does not contain any reference to Kathleen after she was seen by another caseworker.

Analysis of Francis Case:

This study revealed a most carefully thought out casework plan of help. The caseworker in the Francis case made an accurate diagnosis and formulated treatment plans based upon his diagnostic thinking. The help which was given was directly related to the needs of the Francis' and they were able to use the help constructively.

Mr. Francis' primary needs were to have a feminine wife who would be totally different from his mother, to know that his children were

receiving good care both for their physical and emotional needs, and to be appreciated himself as a worthwhile person. Mr. Francis felt that his wife had married him only to get security and social status, and he remarked on more than one occasion that she thought more of the house than she did of him and the children. Because of his wife's compulsive house cleaning she reminded him of his mother whom he disliked so intensely. He feared that his wife would become a second edition of his mother and give the children the same kind of care he received as a child. The caseworker reviewed these needs with Mr. Francis and stressed that "his wife was not his mother and could not be so judged." He also gave Mr. Francis the recognition that he needed so desperately - that he was capable of adequately filling the role of the male provider. Mr. Francis' interest in and love for the children was recognized and expressed by the caseworker as a positive factor.

It seemed at first, because of Mr. Francis' excessive interest in his step-daughter, that he was more in need of treatment than his wife. The opposite proved to be true, and it is to the caseworker's credit that he was able to recognize this. Mrs. Francis did love her husband, but she was prevented from expressing this because of her unresolved feelings toward Kathleen's father. She dreamed about this man constantly, but had not been able to discuss these dreams with anyone. She told the caseworker of her dreams, and through a discussion of her feelings toward her former lover she was able to see the reason for her idolization of this man. In the first place she

realized that, because of her feeling that her husband did not love her, she turned increasingly to think of Kathleen's father, and secondly, she became aware that because of her resentment toward her father she had attributed all male virtues to Kathleen's father. At one point Mrs. Francis wondered if she needed psychiatric help because of her constant dreams, but as she talked to the caseworker and became conscious of the underlying factors, the dreams gradually diminished.

Mrs. Francis was helped by the caseworker to understand her husband's need for a feminine wife, and she was able to gradually achieve more femininity in her husband's eyes. She bought a new red party dress when her husband announced they would celebrate a wedding anniversary by going out, and was amply rewarded by the praise her husband gave her.

Mrs. Francis' feelings toward Kathleen occupied a major place in the treatment process. Kathleen, as has already been noted, was a living embodiment of her wrong doing, and in addition Mrs. Francis felt guilty about her rejection of Kathleen. When Mr. Francis stated that he was in love with Kathleen, this constituted a real threat to Mrs. Francis. This statement of Mr. Francis' took place when Kathleen was thirteen - at the time she was in Grade VII. Mrs. Francis was helped to become a good mother to Kathleen and this was possible only when Mrs. Francis understood her feelings toward Kathleen. The caseworker was careful not to touch upon unconscious material, and concentrated upon material of which Mrs. Francis was consciously aware but which she did not fully understand. It is not stated fully in the recording how

the caseworker helped Mrs. Francis in this area, the worker contenting himself with noting such general statements as have been made above.

The writer surmises that Mrs. Francis was helped to treat Kathleen as a person of real importance despite the difficulties that Kathleen was experiencing in her marriage. Mrs. Francis, during the period of Kathleen's stormy marriage, helped Kathleen by providing her with a home when her problems became too great for her to cope with.

The casework help given to the Francis' was both supportive and clarifying, with some of the help given to Mrs. Francis bordering on insight. The basic element was, however, the support given by the caseworker to both of the Francis'. At the point of intake both were feeling insecure and threatened. It was the reassurance that the caseworker gave that both were capable of functioning well and of overcoming the difficulties that faced them, as well as a relationship of security and trust in the caseworker, that enabled them to use the clarifying material constructively, and achieve a mutually satisfying adjustment.

The principle of the worker maintaining a non judgmental attitude was basic to the help given to both Mr. and Mrs. Francis. Both were immensely helped by the caseworker's recognition of them as worthwhile people. This recognition was particularly important to Mrs. Francis, who felt guilty about her rejection of Kathleen, and who was worried that the other children would develop similar problems.

Study of the three cases contained in this chapter reveals many points of considerable importance.

The Black case is important in that it shows that sound diagnostic thinking and treatment planning based on the diagnosis, plus careful observation of the casework principles can materially help a client to achieve more mature functioning. The caseworker recognized that Mrs. Black needed the security of a good mother relationship in which she could express her dissatisfaction with her marriage without any fear of criticism. In this relationship, Mrs. Black was able to modify the standards she had learned from her compulsive and perfectionistic mother. In addition, the Black case points out that caseworkers must make every effort to help such clients as Mr. Black to accept the services of the agency. Mr. Black's misconception of the agency's outlook prevented him from accepting the worker's offer of help, and nothing was done to assist him to correct this misunderstanding. It must have been extremely threatening for him to know that his wife was being helped, and to feel that no one was sufficiently interested in him to extend similar services.

The practical application of the concept of family-centered casework is revealed in the Francis case. Not only was help given to the Francis' to assist them in caring for their children, but the oldest girl was interviewed by the caseworker, and was then seen on a long-term basis by another caseworker. The Francis case is important too, as it demonstrates the value of extending the type of casework help described by Dr. Hollis as "psychological support". This is true

also of the Jeffrey case. In both these cases, the majority of the casework is centered around giving recognition, and building upon the strengths that the clients possess to enable them to function in a more mature fashion.

The caseworkers helped the clients to clarify their feelings and attitudes. Mrs. Jeffrey and Mrs. Black were helped to understand and meet the emotional needs of their husband. Mr. Francis was helped to recognize that the hostility which he felt towards his mother was affecting the relationship with his wife. Mrs. Francis was helped to understand how her adolescent idealization of her first boyfriend was preventing her from loving her husband.

CHAPTER III

CASEWORK HELP DIRECTED TOWARD DISSOLVEMENT OF THE MARRIAGE

In the cases examined in this chapter none of the partners were united in desiring reintegration of their marriage. Two clients, Mr. Spooner and Mrs. Elliot, had decided to separate from their spouses before contact with the agency was initiated. In the third case, Mr. Rolston left his wife toward the end of the agency contact. These cases appear to be marital conflict cases in the sense that Mr. Berkowitz has used this term.

The Spooner Family - Supportive and Clarifying Help for a Dependent Wife:

A. Background of the Family:

1. Background Information: Mrs. Spooner, a young woman of twenty-five, remembered her childhood years as being unhappy ones. She was rejected by her mother in favour of a younger brother who, according to Mrs. Spooner, was able to get anything he wanted from his mother by coaxing and pleading. Mrs. Spooner felt insecure and was unsure of her mother's love for her. She resorted to defiance in order to gain her own way. She had a more secure relationship with her father, but he was unable to express his feelings of affection because of his wife's domination of the home. In an attempt to bolster his feelings of inadequacy, Mrs. Spooner's father cursed frequently, washed seldom and drank heavily. Mrs. Spooner felt that these habits had thwarted the development of any relationship between herself and her father.

As a child Mrs. Spooner was extremely self-conscious about her physical condition. Because of an over-active thyroid gland she was quite heavy. Remarks concerning her size caused her to withdraw and diminished her self-confidence.

A similar pattern prevailed in Mr. Spooner's home. He, too, had a dominating mother who rejected him, and a quiet, passive father. There was a strong bond of affection between Mr. Spooner and his father, and there was a marked regression on Mr. Spooner's ability to function as a husband and a father when Mr. Spooner Sr. died. Mr. Spooner left his wife and family in Vancouver and returned to the family farm on the prairies, and stayed there for some time looking after the family farm. He sent little money to his wife and gave no indication of returning to Vancouver. Finally Mrs. Spooner went to the farm and persuaded him to return with her.

2. Presenting Problem: Mr. Spooner came to the agency requesting help with the marital problems that were besetting him and his wife. Mr. Spooner revealed in the intake interview that he saw agency help being focussed on helping them to work through the problems of separation, and in particular to assist Mrs. Spooner to accept the fact that separation was the only possible answer to their problems.

Mr. Spooner described his wife as a person who needed much assurance as to her worth and importance. He felt that he could not meet this need. It was evident to the caseworker that Mr.

Spooner desired to escape from the responsibilities of marriage, and that he was experiencing little or no feeling of failure or disappointment at the breakdown of his marriage.

B. Family Strengths and Weaknesses:

1. Ego Strengths of the Partners: The contact with Mr. Spooner, five interviews in all, was too short to allow any guess to be hazarded as to the strength of his ego. The caseworker did not attempt to make a diagnosis of him. The recording indicated that he was an immature person. Mr. Spooner himself seemed to have few illusions as to his ability to function as a husband and a father and in the first interview he requested that the caseworker help them to work through the problems of separation.

A psychiatrist, who examined Mrs. Spooner, thought from the information at his disposal that Mr. Spooner was schizophrenic and that there was no hope for any satisfaction for either of the partners in the marriage.

Mrs. Spooner, with the help of the caseworker, was able to discharge her responsibilities toward the children and meet some of their emotional needs. At the end of the contact with the agency, which lasted two years and two months, she still had unresolved oedipal conflicts, and strong, though certainly lessened, feelings of hostility toward her mother. Mrs. Spooner possessed certain strengths which enabled her to respond to the casework help, she was of high average intelligence and she was able to perform capably and efficiently in a job situation. She

had received some emotional nutrition as a child, and was desirous of caring for her children as best she could.

2. Willingness to Use Casework Help: Mr. Spooner was not interested in obtaining help for himself. He wished to escape from the responsibilities that marriage entailed, and he believed that once a separation was effected his problems would be solved. Mrs. Spooner, however, was willing, and indeed she strongly desired to obtain help for herself. She continued to respond to the casework help even when the interviews proved to be painful. She was willing to expose herself to pain in order to become a more mature person.

3. Economic - Environmental Circumstances: Mr. Spooner, according to his wife, had always been an inconsistent worker, and frequently failed to supply the family with enough sustenance. Following the separation, Mr. Spooner gave money to his wife only at infrequent intervals. Mrs. Spooner's parents and the agency assisted Mrs. Spooner financially until she located a job.

4. Family Relationships: Mr. and Mrs. Spooner had two children, the youngest being born after they had separated. Following Mr. Spooner's decision to leave his family, Mrs. Spooner moved to the home of her parents, and continued to live there until after the birth of her daughter, Susan. Mrs. Spooner proved to be incapable of looking after the children at this time and the psychiatrist recommended that the children be placed on a temporary basis, so that Mrs. Spooner could find a job and gain

some inner stability.

The caseworker contacted the local Children's Aid Society and the children were placed in a foster home. After two placements Mrs. Spooner decided to place her son with her parents, and shortly after Susan was also moved to her parental home. Mrs. Spooner kept in touch with the children during the placements by visiting on weekends, and when they were moved to her parents' home she took a suite nearby and ate her meals with the children. This plan proved to be satisfactory and was still in effect when the case was closed.

Mr. Spooner showed little affection toward the children and seemed to be unconcerned about the care they received after the separation. He did not contribute financially towards their care except for a few spasmodic payments. He tried to persuade Mrs. Spooner to undergo an abortion when she was expecting the second child, but she refused.

C. The Casework Process:

1. Diagnosis and Treatment Plan: An adequate diagnosis of Mrs. Spooner was recorded after interviews had been held with both Mr. and Mrs. Spooner. The worker stated:

"It is my impression that Mrs. Spooner is very dependent, perhaps because of deprivations in her childhood. Marriage to Mr. Spooner had appeared to offer her emotional security, but he could not meet her needs because of his own immaturity. It looks doubtful whether these two people can meet each other's needs sufficiently to derive any satisfaction from the marital relationship."

This tentative diagnosis, which later proved to be true in substance, was added to as more information regarding the Spooners was learned. Two months after the case was opened it was discussed at a case conference, and a social work consultant brought out further material of diagnostic importance. "Mrs. Spooner's guilt appears to be generalized and probably dates back to hostility to her mother.... There are still some vestiges of infantile needs and she fears losing her husband." A definite treatment plan had not been evolved up to this point (the conference with the case consultant). The caseworker seemed to have concentrated on helping Mrs. Spooner to explore her feelings, and to assist with fairly serious environmental problems caused by Mr. Spooner's decision to leave. Mrs. Spooner was helped with budgeting for the family's needs, and some financial assistance was given to her when Mr. Spooner failed to support his family. The treatment plan recognized the severity of Mrs. Spooner's personality conflicts and weaknesses and was, therefore, geared to long range treatment. The case consultant thought that Mrs. Spooner had marked ambivalent feelings toward her husband, and recommended that Mrs. Spooner be given an opportunity to express these feelings. Otherwise "she will withdraw from casework treatment because the worker will not seem to have understood how she is really feeling." The plan also called for an exploration of Mrs. Spooner's feeling toward her father, not on a preconscious or unconscious

level, but on a fully conscious basis. Mrs. Spooner's easily recalled feelings about her father's uncouth behaviour were influencing her attitudes toward other men, and she needed to understand that "... some of her reactions to him are because of the rigidity of a child in the latency or adolescent period." The plan stressed that "Mrs. Spooner needs all the help that can be given to build up a sense of her own value."

At this conference the consultant pointed out that the caseworker had up to this point tended to concentrate on Mrs. Spooner, and that the worker had been identified too closely with her. The consultant thought that Mr. Spooner needed more opportunity to express himself, "... as he must be finding some satisfaction in the marriage, and this needs to be explored further."

2. Outcome: There is no indication in the case record as to how Mr. Spooner functioned after the separation. Certainly he was not involved in caseworker treatment to assist him in resolving some of his problems.

Mrs. Spooner was helped by the caseworker to find satisfactory employment for herself, and from her work she derived a sense of worth and the very definite satisfaction of providing for herself and the children. Some of her personality conflicts were not resolved by the casework help she received, and, indeed, they could not have been, because of the extent and depth of these problems. Mrs. Spooner was interviewed four times by a psychiatrist following a period of depression. She was aware

that her problems surrounding sex could only be treated by a psychiatrist. However, bolstered by the casework support, strengthened by her feelings of accomplishment at work, and content that adequate plans had been made for the children, Mrs. Spooner was able to lead a reasonably happy life. Mrs. Spooner discontinued contact with the agency when she decided to take a job in the Interior. Her stated reason for the move was that it meant a promotion, but the caseworker felt it represented an escape from her responsibilities, and a desire to live again the life of a single person. After a year in the Interior, Mrs. Spooner returned and contacted the worker briefly. She seemed much surer of herself and was contemplating marriage to a man she had met recently. Her plans for the children in relation to this marriage are not mentioned in the case record.

Analysis of Spooner Case:

Because of the difference in the quality and quantity of casework done with Mr. and Mrs. Spooner, the analysis of the casework help extended will be divided.

Mr. Spooner:

The failure of the caseworker to focus equally on the two partners is a serious fault in the casework help. The social casework approach to marital conflict holds that the problems are directly attributable to the personality configurations that both partners bring to the marriage. This was true of the Spooner case.

The caseworker's over-identification with Mrs. Spooner resulted in the severing of contact with Mr. Spooner. It should be noted that the writer does not believe that the marriage could have been "saved" if contact with Mr. Spooner had been continued. Both the caseworker and the psychiatrist thought that Mr. and Mrs. Spooner were completely unsuited to each other, and that because of the complete inability of each to meet the dependency needs of the other, the marriage was foredoomed to failure. However, if help had been given to Mr. Spooner, the separation might have proved to be a constructive experience for him, just as it was for Mrs. Spooner. In addition, Mrs. Spooner obtained the impression that the caseworker was not interested in Mr. Spooner, and since she was, she was not able to express all her feelings regarding Mr. Spooner.

The shortness of the contact with Mr. Spooner makes it difficult to analyse the casework help given to him. In the beginning four interviews the caseworker focussed well on Mr. Spooner, and was able to give him encouragement to express his feelings regarding his marriage. Particularly important was the use of the non-judgmental attitude by the caseworker. Mr. Spooner, although his desire to escape from the responsibilities incurred by the marriage was greater than his sense of failure, had experienced some guilt particularly as a result of criticism from Mrs. Spooner's parents. The caseworker recognized that Mr. Spooner was incapable of functioning as a father and a husband, but did not blame him for this failure.

In the subsequent interviews held at long intervals the caseworker treated Mr. Spooner as a person not important in his own right,

but only as a contributor of money, and as someone who influenced Mrs. Spooner's behaviour. Talking to Mr. Spooner shortly after the attempted suicide on the part of Mrs. Spooner, the caseworker record: "... I talked to him on the assumption that he was as interested as I was in doing everything possible to relieve pressures on Mrs. Spooner, and discussed the need for regular support on this basis." There was little recognition of Mr. Spooner's needs, and little or no expression of interest in helping him. On two occasions it is recorded that in conversations with Mrs. Spooner the caseworker learned that Mr. Spooner had spoken of coming to the agency and was interested in resuming contact. Yet the worker made no attempt to get in touch with Mr. Spooner so offering him the security of knowing that someone was interested and wanted to help. This over-identification becomes even more tragic when it is realized that at a case conference with a social work consultant, the identification with Mrs. Spooner had been pointed out to the worker. The case consultant thought that Mr. Spooner was looking for a father figure. Mr. Spooner's own father, with whom he had a close relationship, had died recently, and since his death Mr. Spooner's ability to function as an adult had decreased noticeably. The possibility of a transfer to a male worker is not mentioned, and it is not known if Mr. Spooner knew this was possible. The case consultant thought, too, that Mr. Spooner must have found some satisfaction in the marriage, and recommended that an attempt be made to explore his positive feelings toward his wife and his marriage. This was not done because of the termination of contact with Mr. Spooner.

The psychiatrist, who interviewed Mrs. Spooner, thought from her description of her husband that he had definite schizoid tendencies. He was narcissistic and was unable to meet the needs of his wife and children. He wanted Mrs. Spooner to release Susan for adoption, and though she refused to do this, her need to keep her marriage intact was so great that she attempted to abort on two or three occasions.

Mr. Spooner received very little help from the worker. When the separation took place he was relieved of his responsibilities, and it seems to the writer at this time he might have been able to consider his contribution to the difficulties that had occurred in the marriage. This would have been an appropriate time to determine if Mr. Spooner was sufficiently interested in obtaining help - for himself and his marital problems to involve himself in a treatment situation. It seems doubtful that casework help would have been able to assist Mr. Spooner to achieve full maturity, but in conjunction with psychiatric assistance a partial resolution of Mr. Spooner's difficulties, and an attainment of a more mature attitude might have been accomplished.

Mrs. Spooner:

In contrast to the casework help given to Mr. Spooner, the assistance extended to Mrs. Spooner was of a very high calibre. An adequate diagnosis was recorded after interviews had been held with both partners and this was quoted on page fifty-eight.

The treatment plan was not recorded in full, but it is clear from an examination of the casework process that the caseworker formulated definite plans to assist Mrs. Spooner to achieve a more satisfactory adjustment. The worker used clarification to help Mrs. Spooner to see how her feelings toward her parents, which had been formed in childhood,

were affecting her present attitude, particularly toward her husband. Mrs. Spooner was encouraged to move towards obtaining a job where she could receive some satisfaction. The worker was confident in supporting Mrs. Spooner in this step, as Mrs. Spooner had worked for eight years before her marriage.

Perhaps the most important single item in the casework help was the consistent support given by the worker especially during the period immediately after the separation. The support was deliberately combined with very skillful use of the principles of casework. By treating Mrs. Spooner as a person of worth and importance, as a person who could give to others, the worker consciously utilized the transference situation to give Mrs. Spooner a warm and comfortable feeling of security and to strengthen her ability to function independently.

Even at a time when Mrs. Spooner became extremely hostile to the worker the latter did not retaliate, but accepted Mrs. Spooner's hostility. Mrs. Spooner claimed "... that she did not think she would be in her present predicament had it not been for Dr. W. and myself". She stated that she did not think it would help to continue seeing the worker, and that it was necessary that she do things for herself. The worker rejoined with: "...I assured her that she was free to do as she wished, but reminded her of my interest in her and my desire to do anything possible to help her." This attitude and the comfortably expressed wish to help was of such importance to Mrs. Spooner that by the end of the same day she had called again requesting her regular appointment be kept for her.

As can be seen from the above quotation the caseworker was able to allow Mrs. Spooner to exercise her right to decide for herself whether to continue treatment. Observation of the other principles of casework

was equally good, except that the worker over-identified with Mrs. Spooner so that objectivity was lost. However, although the focus on the case as a whole was poor, the caseworker was generally able to appraise realistically the situation and give help.

The caseworker revealed an ability to effectively utilize community resources. The assistance of the Children's Aid Society was obtained so that the children could be placed in a foster home in order to free Mrs. Spooner for employment. Psychiatric interviews were secured for Mrs. Spooner in an attempt to help her gain some insight into her own feelings and attitudes.

In addition, the caseworker was able to help Mrs. Spooner understand the needs of the children and the problems in behaviour that they presented. Mrs. Spooner was confused about sex development and the interest of the children in sexual matters, and was worried how to give the children an adequate sex education. Naturally, her own conflicts in this area intensified the difficulties she faced with the children. The caseworker was able to assist Mrs. Spooner with these problems, and to assure her that much of the behaviour that the children were presenting was quite normal.

The children were not given any direct casework help, and it is not clear from the case record if they were in need of any. Mrs. Spooner's decision to place the children with her parents would seem to be a wise one and motivated chiefly by concern for them. Mrs. Spooner had been concerned about the care that the children had received in the previous placements, and the matter of visiting them had been a troublesome one. She felt sure that her parents would provide the children with good care, and by taking a suite nearby she was able to visit frequently. After several months had elapsed since her placing the children with her parents, she decided to go to the Interior. When she returned in a year's time her plan was

remarriage. There is the possibility of her having used her children to try to force care from her parents which she herself did not receive. It does seem clear that she was unable, alone, to assume a parental role.

Interviews were held with Mrs. Spooner's father and mother at their request. They were puzzled by her periods of depression, as they thought she should be thankful that her marital troubles were over. The caseworker was able to interpret to them some of the conflicts that Mrs. Spooner was experiencing, and in particular, her ambivalent feelings about the break-up of her marriage. The interviews helped Mrs. Spooner's father and mother to become more aware of her feelings, and they were able to refrain from criticising her when she felt depressed.

Mrs. Spooner experienced difficulties while living with her parents. On one occasion when her father became extremely angry with her and struck her, she immediately hit back. The caseworker helped Mrs. Spooner realize the significance of this episode - that she had grown up and was capable of looking after her own interests.

Although Mrs. Spooner was helped by her contact with the caseworker, she still retained at the end her strong conflict regarding sex and motherhood. The writer assumes that the worker did not explore these unconscious feelings with her, and was right in refraining from discussion and interpretation. But it is possible that further psychiatric help might have assisted Mrs. Spooner. The fact that she was again contemplating marriage when she returned from the Interior might mean that she was experiencing difficulty in controlling her sexual drives, and was seeking the security of the marriage relationship. However, if her second husband was a strong person who could meet Mrs. Spooner's emotional needs, the marriage could very well be a successful one.

The Rolston Family - Environmental Help for a Dependent, Immature Couple:

A. Background of the Family:

1. Background Information: Mrs. Rolston was an illegitimate child. Her mother, who actually never married, lived for a number of years with a man much older than herself, who deserted her at frequent intervals. For the most part the family was supported by a Social Assistance grant. The mother was known to be illiterate and of low mentality. She threatened to commit suicide often when their circumstances were at a low ebb, and this, combined with the lack of a permanent and adequate father figure and many moves, resulted in an unsatisfactory home environment for Mrs. Rolston and her older sister.

At the age of eleven Mrs. Rolston was given a psychological examination. She was found to have a mental age of 9.4 and an I.Q. of 80. She received all her schooling in a special class. However, she participated well in school activities. She sang in the school choir, and played all sports. After leaving school at the age of fifteen, she worked spasmodically as a waitress and theatre usherette.

Little information regarding Mr. Rolston is presented in the case record. There seems to have been a good relationship between him and his parents, as they assisted him financially on occasions and looked after the children. No mention is made of Mr. Rolston's adjustment as a child. He lived in rural

communities as a boy, and prior to enlisting in the army he worked as a trapper. He did not like, and was unsuited to, life in urban communities. His record in the army was a poor one, but although the caseworker tried to obtain definite information from the Department of Veteran's Affairs, he was unsuccessful. The Department claimed that the information was extremely confidential and could not be released without Mr. Rolston's written permission. There is no indication in the case record whether the caseworker tried to obtain Mr. Rolston's consent.

2. Presenting Problem: Mrs. Rolston contacted the agency twice during the time her husband was in the army. She requested financial help to assist her with confinement expenses. Financial assistance was given the first time, and on the second occasion Mrs. Rolston was referred to the local office of the Provincial Department of Social Welfare, as she had moved out of the city limits.

A year after the second request for assistance Mr. and Mrs. Rolston were referred by a municipal social welfare department for help with marital and housing problems. Mrs. Rolston had entered Crease Clinic as a voluntary patient a short while previously and had been discharged after three weeks. The doctor felt that she was not psychotic, but under strain could be driven into a schizophrenic state. After her discharge, Mrs. Rolston attempted to find work, leaving the children alone. Infuriated by this, Mr. Rolston locked her out, and refused to

permit her back in the home. Mrs. Rolston laid a charge of non-support against her husband, but withdrew this when a mutually satisfactory agreement was arrived at between Mr. Rolston and herself. The children were played privately, and Mr. Rolston agreed to support them. Mrs. Rolston was to find a job, and both were to work toward re-establishing a home. This agreement was drawn up by a lawyer, and the agency's contact with the Rolstons during this period was short and limited. The Rolstons maintained a hostile and unco-operative attitude toward each other, and were unable to accept the agency's offer of assistance.

Some months after the above agreement had been reached Mrs. Rolston telephoned the agency and requested help in arranging for her two sons to go to camp. This was the beginning of a two-year period during which the agency remained in close contact with the Rolstons.

B. Family Strengths and Weaknesses:

1. Ego Strengths of the Partners: The caseworker did not attempt to ascertain the strengths of the Rolstons. Because of Mrs. Rolston's mental dullness and her emotional instability, which revealed itself in her impulsive pattern of living, and in her inability to care for the children, the caseworkers felt that her ego was poorly integrated, and that she was incapable of participating in a treatment plan. This opinion may have been an accurate one, yet the writer wonders how Mrs. Rolston was able to manage on her own during the early years

of her marriage, and do so in a fairly adequate fashion. It is difficult to find strengths in Mrs. Rolston's personality because of the essentially negative tone of the case recording, but certainly Mrs. Rolston's love for her husband constituted a positive factor. Her intelligence, while dull-normal, was not sufficiently low enough to prohibit her from understanding or co-operating with the caseworker to effect improvements in the family situation.

Mr. Rolston was deeply concerned about the children. Because he doubted his wife's ability to look after them adequately, he tried to establish his own shoe repair business, so that he could be at home. Unfortunately Mr. Rolston had little idea how to run a business, and actually had no capacity to learn. His attempts ended in failure, and the family lived a marginal existence. Mr. Rolston appeared to have a low opinion of his wife, and often stated his feelings of contempt for her. Yet he stayed with Mrs. Rolston for five years, and must have found some satisfaction in the marriage; however, the nature of these satisfactions are not clear.

2. Willingness to Accept Casework Help: Mr. Rolston expressed his willingness to accept the help of the caseworkers. In reality, however, he opposed them, thinking that he was not worthy of help. He believed that he and his wife should be able to look after themselves and the children without outside help. Only toward the end of the contact did Mr. Rolston participate with the caseworkers.

Mrs. Rolston seemed to have little conception of the nature of casework help. She saw the caseworkers helping with environmental problems, and frequently requested financial assistance. Mrs. Rolston did not participate in planning for the family, and as was noted above, the caseworkers seemed to feel that she was not capable of participation.

3. Economic - Environmental Circumstances: The problems besetting the Rolston family ran the gamut from severe personality problems to serious environmental handicaps. The former have already been described in some detail. Among the latter group of problems was the limited income available to the family. Mr. Rolston's business ventures were doomed to failure. He had only limited capital and could not afford to buy the necessary equipment. In addition, the businesses that he could secure were in poor locations. Added to these handicaps was the fact that Mr. Rolston did not have the potential necessary to learn how to run a business. There is no indication in the case record whether the workers discussed with Mr. Rolston the possibility of the family returning to a rural area where he might have functioned more comfortably. The small income resulted in the Rolstons having very inadequate housing, and Mrs. Rolston seemed at the time of the agency contact to be incapable of keeping the house in even a semblance of order. Her knowledge of other domestic skills was equally limited, and the children were fed and clothed in a

very inadequate fashion.

4. Family Relationships: Because of the poor care that the children received, one child was examined at the Children's Hospital, where he was found to be suffering from malnutrition. A caseworker arranged for a public health nurse to visit the Rolstons occasionally to check on the health of the children. The caseworkers felt that Mr. Rolston looked after the children as well as he could, and that he was also a capable disciplinarian. He was fond of the children, and while he would resist taking help for himself, he would allow it to be given in the form of clothing for the children. Mrs. Rolston seemed to exhibit little feeling for the children. She would often leave them alone for long periods, and seemed to have little conception of their needs.

C. Casework Process:

1. Diagnosis and Treatment Planning: No psycho-social diagnosis was made of the Rolstons and their adjustment to one another. It was evident from the recording that the caseworkers felt that Mrs. Rolston was not capable of participating in planning for the family needs. The caseworkers considered her to be mentally retarded, and this opinion was substantiated by psychological examinations. Yet no attempt was made by the caseworkers to assess the personality strengths of Mrs. Rolston, nor was she involved in a treatment situation.

Mr. Rolston is depicted as a conscientious and sincere person possessing limited intelligence. In a social history prepared for the Out-Patient's Department at the Vancouver General Hospital where Mrs. Rolston had a sterilizing operation performed, the caseworker noted of Mr. Rolston that "... his income is inadequate for the family, and emotionally and intellectually we consider him unable to cope with the family situation." From the Department of Veteran's Affairs it was learned that Mr. Rolston had little schooling, and was not able to manage a business of his own.

2. Outcome: Mr. Rolston decided to leave his wife and to place the children with a sister on the prairies. Mrs. Rolston, after much persuasion by Mr. Rolston, agreed to this plan. Mr. Rolston moved to the prairies, obtained a job, and lived with the children. After the separation there was no further contact with Mrs. Rolston, although she continued to contact the municipal agency periodically for financial assistance. There is no mention if casework services were made available to her by the family agency. Probably the municipal agency assumed responsibility for these services.

Analysis of Rolston Case:

Two of the essential components of casework help are diagnosis and treatment planning. The Rolston case was chosen for examination because it seemed to be based more on "muddling through" rather than on diagnostic understanding and planned treatment. In the Rolston case

no diagnosis of Mr. and Mrs. Rolston, and of the needs of the family as a whole, was ever recorded; and no plan was formulated to help the Rolstons attempt to overcome their difficulties or, if this was impossible, to reach some mutually satisfactory solution. It is probable that the caseworkers did possess a fairly adequate understanding of the Rolston family, but it is regrettable that their knowledge was not recorded. The casework help extended to the Rolstons was unfocussed and was not directly related to the over all needs of the family.

It is difficult to determine why the "muddling through" approach was adopted with the Rolstons. Perhaps it was because of the number and the complexity of the problems which existed in the Rolston family. Inadequate finances, poor housing, Mrs. Rolston's almost total lack of ego strength, and the intensity of the strife in the home combined to present a rather hopeless picture. The first caseworker tried to assist the Rolstons with environmental problems and see that the children were not too badly neglected. This beginning pattern was continued by the following workers, and no attempt was made to assist the Rolstons to use their strengths toward possible solutions.

The "stop gap" type of casework is difficult to avoid. It requires little thought, and particularly when case loads are heavy, caseworkers are often pressured into handling their work loads in this fashion. Because visits are short, many can be made and impressive statistics result. It is only when the individual worker and the agency takes stock and attempts to find out how many clients

have actually benefitted from caseworker services that a correct evaluation can be arrived at. The importance of continual re-evaluation of cases and case loads cannot be over-estimated. By reviewing critically workers can see interviews as an integrated whole, and not merely as a series of unrelated and disjointed episodes. In addition, significant facts recorded, but forgotten, are brought to light, and original diagnoses and treatment plans can be revised if material revealed in interviews subsequent to the diagnostic ones indicate that some alteration is necessary.

Without doubt there were few positive factors in the Rolston family. Yet some did exist: for example Mr. Rolston's love for the children, and his stated willingness to accept agency help. Mrs. Rolston did demonstrate ability to care for the children during the early years of marriage, and the workers failed to understand why this ability had deteriorated. There was no effort made to help Mr. Rolston with his constant derogation of his wife, and there is no evidence to indicate that the workers attempted to ascertain whether Mr. and Mrs. Rolston had any positive feelings for each other, and to build on these. There was no examination of what had attracted each to the other initially, and no understanding of the fact that both Mr. and Mrs. Rolston attempted to bolster their weak egos by belittling the other. There was a definite tendency on the part of the caseworkers to assume that nothing could be done to help the Rolstons improve the relationship between them. There was also reluctance to work with the Rolstons toward any over all solution to their problems, whether towards separation or maintaining their union.

It seems from a close examination of the case record that the assumption of the caseworkers that Mrs. Rolston could not participate in a treatment situation may have been justified. Mrs. Rolston's ability to understand was limited. For example, she believed that it was the social worker's responsibility to arrange for her operation at the Vancouver General Hospital, and this was explained to her many times before she fully understood. In addition, Mrs. Rolston seemed emotionally unstable. She was impulsive, and would often leave the children alone to attend some frivolous errand of her own. The question arises whether Mrs. Rolston would have been able to respond to a warmly supportive relationship with the caseworker.

All the workers who worked with the Rolston family agreed that Mr. Rolston possessed a certain amount of ego strength, but these strengths were never assessed, in the recording, and his stated desire to receive help from the agency never involved. On three occasions Mr. Rolston stated that he would be glad to receive the help of the agency, yet in reality he resisted the attempts of the caseworkers to give assistance. His reason for this resistance was that he "felt ashamed" that a social worker was calling on them. Mr. Rolston felt that the workers considered him to be inferior and unworthy, and although this may not have been an accurate appraisal of the worker's attitudes, it held much significance for Mr. Rolston, and to the end of the contact with the agency he resisted the casework help because of his feelings of inadequacy and shame. One of the casework principles

that of the non-judgmental attitude, may have been violated here. Certainly much needed supportive help was not given to Mr. Rolston. If the caseworkers had explained to Mr. Rolston the nature of case-work help, and in particular the fact that they saw and held in high regard his efforts to help his family, he would have been able to use constructively the help that the caseworkers wanted to give.

The principle of self-determination was well observed in the Rolston case. The wishes of Mr. and Mrs. Rolston were respected by the caseworkers. For example, when Mrs. Rolston refused to consider a home-maker being placed to help her with the household duties and care of the children, the caseworker abided by this decision. Again, when Mr. Rolston turned down the offer of a grant from D.V.A., the caseworker respected his wishes. The question arises if both Mr. and Mrs. Rolston had been given more ego support, and even if their need and the service had been clarified with them, whether they might have been enabled to use the assistance offered. The principle of self-determination is an important one. It can be used helpfully by the caseworker and the client's right to decide, where legally possible, must be respected. Acceptance of the client's right of self-determination does not, however, mean the re-inforcing of decisions made by the client which will result in the continuing of the client's problems and dependency. The caseworker can give support to the client's strengths so that he may feel able to use services and be entitled through his personal worth to receive them. The caseworker has the responsibility, too, of clearly outlining to a client why he feels a particular decision is not a wise one.

With respect to the principles of objectivity and individuality there is little to be said. The caseworkers were able at all times to maintain an objective focus, though not on a long range basis, and to regard the Rolstons as individuals, though not as individuals having personal worth.

No direct help was given to the children insofar as casework help and treatment is concerned. The caseworkers were, however, concerned about the care that the children received, and endeavoured to improve conditions. A referral was made to the local public health unit. As a result the children were all examined at the Children's Hospital, and treatment was prescribed for one. In addition, clothes were secured for the children, and during Mrs. Rolston's absence from the home while in hospital, a home maker was placed to look after the children. When Mr. Rolston decided to leave his wife, the children were placed on a temporary basis through the Children's Aid Society, and later released to Mr. Rolston when he had finalized plans for their future care.

The casework help in the Rolston case was geared to assist the Rolstons to improve their environment. As had been noted there was a distinct lack of supportive casework.

The Elliot Family - Supportive and Clarifying Help for a Disturbed Husband.

A. Background of the Family:

1. Background Information: Mr. Elliot came from a large family, he and his twin brother being second in a family of seven. His mother suffered a post partum psychosis after the birth of her seventh child, and committed suicide. At that time Mr. Elliot was seven years of age. Two years later his father remarried. Mr. Elliot told of his mother having kicked him on the day of her death, and his confused and guilty feelings regarding his mother's death were perpetuated by the fact that it was a closed subject in the family. Mr. Elliot's step-mother rejected him, and he recalls the day of his father's marriage to her as the blackest day of his life.

The relationship between Mr. Elliot and his father was a weak one, based on the father's appreciation of Mr. Elliot's high intelligence and academic record. There seems to have been little true affection between them. Mr. Elliot had positive feelings toward his twin brother, whom he described as being a "good head"; the twin became a pilot during the war and was killed. Mr. Elliot also joined the airforce, but did not succeed in becoming a pilot. Mrs. Elliot stated that she felt her husband was disappointed with his failure to keep up with his twin brother.

There is little background information regarding Mrs. Elliot in the case record. The worker states: "... the impression of Mrs. Elliot has been that she herself is an emotionally limited

person, and this is related to a childhood with a warm but very controlling father and an ineffectual mother." No supporting evidence of this statement is given.

2. Presenting Problem: Mr. Elliot initiated contact with the agency, stating that his wife wished to leave him. He was opposed to this step, and had contacted the agency in the hope that the marital problems might be resolved.

B. Family Strengths and Weaknesses:

1. Ego Strengths of the Partners: Mr. Elliot had few ego strengths, but he was willing to become involved in a treatment situation. His first concern was to save his marriage, and this prompted him to seek help. When his wife left him, however, taking the children with her, Mr. Elliot, with the help of the caseworker, was able to survive the breakdown of his marriage. Mr. Elliot's own high intelligence constituted a definite strength. It enabled him to function comfortably in a job situation, and to earn enough to support his family. Mrs. Elliot was a capable person, but she was not interested in either working to improve the marital relationship, or in seeking help for herself. The relationship between her and the male caseworker was an inadequate one, and this doubtless contributed to her lack of participation. This point will be discussed in greater detail in the case analysis.

2. Willingness to Use Casework Help: As indicated above, Mr. Elliot was anxious to resolve some of the problems besetting him. He accepted the offer of casework help, and demonstrated

ability to use it constructively.

Mrs. Elliot revealed no interest in using the proffered casework help. She, like Mr. Spooner, thought that separation was the answer to her problems. The caseworker was not able to penetrate the air of unconcern and self-confidence which Mrs. Elliot always affected during interviews.

3. Economic - Environmental Circumstances: None. Mr. Elliot earned an average salary which was sufficient to provide his family with sustenance.

4. Family Relationships: Mr. Elliot exhibited considerable hostility to his wife's parents. He claimed that they disliked him, and had tried to prevent their daughter from marrying him. It was learned from Mrs. Elliot that they had little contact with her parents, and Mr. Elliot's hostility to them seems to have been caused by his mistrust of his own parents, and also by displaced feelings from his wife.

The children are not accorded places of importance in the record. It appears that both Mr. and Mrs. Elliot were concerned with their own problems to the exclusion of everything else. Certainly this is true of Mr. Elliot with whom most of the agency contact took place.

C. Casework Process:

1. Diagnosis and Treatment Planning: "Because of the very inadequate parental figures and the lack of affection Mr. Elliot had received as a child, he is insecure and all too aware of his own shortcomings and inadequacies. He feels extremely threatened in all relationships with women, and is

dependent upon his wife." This diagnosis was arrived at by the caseworker and a social work case consultant. The consultant thought that Mr. Elliot had homosexual tendencies probably caused by early sex play with his twin, and that he felt guilty about the deaths of his mother and brother. The consultant thought, too, that Mr. Elliot revealed manic depressive tendencies, and could be precipitated into a psychotic state. Mr. Elliot had at one time been a voluntary patient in Crease Clinic as the result of a period of depression. It was decided that the worker should not attempt to uncover too much early historical material which would be painful for Mr. Elliot to recall. Because of his homosexual tendencies Mr. Elliot was afraid of a deep relationship with a male caseworker. The worker had to prove to Mr. Elliot that he could not be seduced before Mr. Elliot would be able to fully accept him.

The treatment plan, again a joint effort by the caseworker and the consultant, called for the support of Mr. Elliot's strengths - for example his intelligence, his ability to provide for the family, and his good work record. The worker tried to increase Mr. Elliot's sense of worth, and tried to help him derive satisfaction from his role of husband and father.

Mrs. Elliot had only limited capacity or desire to understand and accept her husband. She had married him because he seemed to represent security and stability. The caseworker thought that she had been "quite calculating in sizing up Mr. Elliot as a

potential husband." When the security she had expected was not forthcoming, Mrs. Elliot made up her mind to leave her husband. She felt that she could not accept a weak husband. She established a relationship with a successful businessman, who was separated from his wife, and who promised to marry her if she would obtain a divorce. Mrs. Elliot was judged to be a competent person by the caseworker, but he felt, too, that she was a hostile, aggressive person with many masculine characteristics in her personality make-up.

Mrs. Elliot was not involved in any treatment planning, principally because of her own wishes.

2. Outcome: Mr. and Mrs. Elliot did separate midway in Mr. Elliot's contact with the agency. Following this Mrs. Elliot discontinued contact completely, although casework help was offered to her. The focus of the treatment after the separation was to help Mr. Elliot accept the fact that his wife had left him, but that this did not mean that he was a total failure as a man, a father or a husband. Mr. and Mrs. Elliot subsequently obtained a divorce.

As Mr. Elliot became more secure in his relationship with the worker, and revealed clearly the depth and extent of his emotional deprivation it became apparent to the caseworker that only psychotherapy could effectively help Mr. Elliot. This proved to be a difficult goal to achieve, as Mr. Elliot had at one time been a voluntary patient in Crease Clinic and had resisted the treatment programme. Since that time, he had been very dubious about the value of psychiatric help. Much skillful

casework help was given before Mr. Elliot could bring himself to contact a psychiatrist.

Analysis of Elliot Case:

The Elliot case reveals again an unfortunate concentration on one partner, and not on the family as a whole. For purposes of examination the casework help extended to the Elliots will be divided. The help given to Mr. Elliot was of an extremely high calibre and will be considered first. The caseworker, with the aid of a case consultant, was able to make an accurate diagnosis of Mr. Elliot, and to give treatment geared to Mr. Elliot's needs. Help was given to Mr. Elliot in the form of support in areas where he felt inadequate. As a result of the caseworker's support Mr. Elliot moved from periods of feeling worthless to periods of omnipotence, but was gradually able to settle down into a sound appraisal of his abilities and feelings. The relationship with the caseworker helped Mr. Elliot to survive the breakdown of his marriage which occurred midway in his contact with the agency. The relationship was deliberately constructed by the caseworker to assure Mr. Elliot that a deep relationship with a man would not end in homosexual activity. This assisted Mr. Elliot in his day-to-day relationships with fellow employees, thereby making his social adjustment more satisfactory, and decreasing his dependency upon his wife.

The caseworker also made deliberate use of the principle of the non-judgmental attitude. Mr. Elliot felt the responsibility for the failure of the marriage lay entirely with him, and his wife reinforced this feeling. In the recording of one interview, the caseworker noted that "at each opportunity I endeavoured to stress the

the non-judgmental aspect of my work", and succeeded in conveying to Mr. Elliot that he did not blame him or consider him a failure. This attitude, combined with the support given by the caseworker, enabled Mr. Elliot to regard himself as a worthwhile person, and to place some of the responsibility for the marital difficulties on his wife.

As recommended in the treatment plan, the caseworker was careful not to uncover too much early material, but some clarification was given. Mr. Elliot was most concerned about his mother's suicide, and attached blame to himself for his mother's death. The caseworker explained that post partum suicides are not uncommon, particularly when mothers have a large number of children close together. This explanation, which was given often and in some detail, helped Mr. Elliot considerably. The caseworker and Mr. Elliot also talked about his step-mother, and the hostility that Mr. Elliot felt towards her. The caseworker did not go into the reasons for Mr. Elliot's attitude towards his step-mother, but did help Mr. Elliot to understand that he was projecting hostility, which he felt toward his step-mother, to other women. After leaving his own home, Mr. Elliot moved for a time to the home of his step-mother, and was able to re-evaluate his feelings toward her. He changed his former impression of her as an ogre, and appreciated the help and care she gave. This move, combined with the casework clarification which was taking place at the same time, resulted in Mr. Elliot taking on a much healthier attitude toward women in general.

The referral to a psychiatrist, which ended the casework contact with Mr. Elliot, was a delicate matter. As noted earlier, Mr. Elliot had been a voluntary patient in Crease Clinic. While he realized that

he had not co-operated with the doctors, he left with the feeling that they had done very little to help him. In his contact with the caseworker, because of the pressure he was under from the marital situation, he had co-operated well, and had derived much from his interviews. He found the contact with the agency was satisfying, and he was reluctant to end the contact or to initiate treatment with a psychiatrist. The worker pointed out that the roots of his problems were grounded in the unconscious material, and that a social worker could not deal with this material. The caseworker stated that he felt Mr. Elliot could continue to function fairly well without psychiatric help, but that psychotherapy was indicated if he wished to move to a more adequate level of adjustment. The caseworker gave considerable support to Mr. Elliot in this area and eventually Mr. Elliot was able to secure an appointment with a psychiatrist. Although the caseworker, with Mr. Elliot's permission, forwarded a summary of Mr. Elliot's contact with the agency to the psychiatrist, no follow-up was made to determine whether Mr. Elliot was helped by the psychiatrist.

The contact with Mrs. Elliot was quite short - three interviews in all. Mrs. Elliot revealed some interest in improving the relationship which existed between herself and her husband by accepting the caseworker's offer of help, but she was unwilling to involve herself in a treatment situation. She blamed Mr. Elliot for the difficulties that had arisen in their marriage, and thought that he could not provide her with the stable and secure life she wanted. Yet the caseworker failed to explore the positive factors that existed in the marriage, and whether it would be possible for her to gain more

satisfaction from her marriage. The caseworker did not consider Mrs. Elliot as a person who was contributing to and suffering from the problems that she, her husband, and the children were facing; and did not help her explore how best she could meet the situation.

This point is an extremely interesting and important one. It has already been stressed that all social workers recognize the client's right to make decisions for himself, but the client's need to have necessary information, and the chance to think through his decisions, needs to be emphasized, too. The caseworker cannot and should not oppose the client's decisions, but he should support the client's strengths, and, where it is not damaging, help the client clarify the reasons for his decisions. Mrs. Elliot's decision to leave her husband might have been the appropriate one for her to make - because of the worker's lack of knowledge of Mrs. Elliot, he was not in a position to know. The caseworker's errors in this case were, therefore, the failure to make a psycho-social diagnosis of Mrs. Elliot, and secondly, the failure to help her to understand the marital situation as it applied to her.

It should be recognized that the task of achieving the above was a difficult one in view of Mrs. Elliot's attitude. Perhaps, indeed, it was an impossible one. The most distressing fact is that, from the recording, it is not possible to learn if the caseworker considered it at all. It seems likely that, because of the omission from the recording in an otherwise fully detailed case record, the worker simply took Mrs. Elliot's assessment of the situation as being accurate, and did not attempt to involve her in the treatment of the

marital problems.

It is probable that it was an error for the same caseworker to work with both Mr. and Mrs. Elliot. In fact, the caseworker did consider this, and offered Mrs. Elliot the opportunity to see another worker. Unfortunately this offer was made when Mrs. Elliot's mind was fully made up. The Elliot case appears to constitute one of "marital conflict" in the sense that Sidney Berkowitz has used this term, because of the depth of Mr. Elliot's emotional problems, and possibly, too, because of the extent of Mrs. Elliot's inadequacies in feminine identification. In the same article already mentioned, Mr. Berkowitz states:

"If it is marital conflict then it seems that the degree of hostility and anxiety present in the relationship and the nature of the problems of each partner make it exceedingly difficult, if not impossible, for one caseworker to treat both. Each requires a good deal of help. The establishment of a positive relationship to the caseworker is severely inhibited if both partners are continuously competing for the worker's attention as well as being constantly pre-occupied with fears and suspicions of the caseworker's identification." 1

Mr. Berkowitz goes on to stress that: "the importance of correct diagnosis in the early stages so as to be clear whether we are dealing with a problem in marriage as against a marital conflict cannot be overstressed." 2 Mr. Berkowitz' point seems to be an important one in regard to the Elliot case. A definite conclusion as to how much

1 Berkowitz, Sidney, "An Approach to the Treatment of Marital Discord", Journal of Social Casework, November 1948. Page 5.

2 Ibid, Page 6

success would have been achieved, if another caseworker had been assigned to work with Mrs. Elliot, cannot be made. The writer feels, however, that a more focussed and a fuller effort would have been made to help the Elliots if separate caseworkers had been assigned.

The analyses of the Spooner, Rolston and Elliot cases provide several points which are of importance to this study. The casework help extended to Mrs. Spooner and Mr. Elliot illustrates that when psycho-social diagnoses are made, and treatment based upon the diagnosis is given in accordance with casework principles, casework help can be effective. The work with these two clients reveals, too, the value of ego supportive therapy. Mr. Elliot and Mrs. Spooner were both helped to achieve more mature functioning by the caseworker, and the supportive help given by the caseworkers was a major factor in the casework help. The importance of "psychological support," as defined by Hollis, will be more fully discussed in the fourth chapter.

In both the Spooner and Elliot cases the caseworkers failed to explore the positive factors that existed in the marital relationship itself. The Spooner case shows that when the caseworker over-identifies with one partner a shift in focus results - instead of the marital problems being treated, the individual personality problems of one partner become the focus of the casework help. In the Elliot case, a similar shift in focus occurred when the caseworker was unable to establish a positive relationship with Mrs. Elliot. Both Mr. Spooner and Mrs. Elliot were dubious about accepting the help of the caseworkers, and neither were involved in treatment. It is interesting to note that the caseworker in the Spooner case was a woman, and in the Elliot case a man. A question must be raised as to the outcome

of the Spooner and Elliot cases, if two caseworkers had been assigned, and if the sex of the worker was taken into account. These questions, of whether the same or separate caseworkers should be assigned to help the partners, and the sex of these workers, are vital ones.

The Rolston case shows that without diagnosis and treatment planning focussed help cannot be given. The caseworkers helped the Rolstons with environmental problems, but did not attempt to assist them to find satisfaction within their marriage, or to explore with them whether separation would be the best solution to the problems that were besetting them. Mr. Rolston eventually decided to separate from his wife, but this decision was arrived at without any assistance from the caseworkers. The casework contact with Mrs. Rolston was discontinued when Mr. Rolston and the children left the city. The case record does not state whether Mrs. Rolston was offered further casework services at this time, when her self-confidence would be particularly threatened. A referral was made on Mrs. Rolston's behalf to the municipal agency, as it was thought that Mrs. Rolston would be unable to support herself, and would be in need of financial assistance.

The lack of "psychological support" is evident throughout the Rolston case. Both Mr. and Mrs. Rolston possessed weak egos, and their ability to function as husband and wife, and as parents, was limited. Yet there is no indication that the caseworkers gave any support to the Rolstons to assist them to cope with the marital problems, and it would seem that both were badly in need of recognition and ego support. Some support was given to Mr. Rolston following his decision to separate. This enabled him to follow through with his decision, and to plan adequately for the children.

Although the casework help extended to Mr. Elliot was of a high calibre, the worker did not follow up Mr. Elliot's progress after the discontinuation of the casework contact. It is not known whether Mr. Elliot was able to keep his appointment with the psychiatrist and whether this meant continued psychiatric help. If he was not able to involve himself in psycho-therapy further casework interviews might have assisted him to do so.

In all these cases, the workers recognized the right of the client to decide for himself, yet decisions to separate were made without any exploration of the negative and positive factors that existed in the marriages. The writer believes that since the Spooners, Elliots, and Rolstons were involved in marital conflict, two caseworkers should have been assigned. If Mr. Rolston, Mr. Spooner, and Mrs. Elliot, after having been involved in treatment, had decided to separate, their decisions would have been made after an adequate appraisal of the positive and negative factors existing in the marriage. In addition, they might have been assisted to resolve some of their personal problems; and their future lives, either as single or as married people, might have been more constructive and contented.

CHAPTER IV

THE STRENGTHS AND LIMITATIONS OF THE CASEWORK APPROACH TO MARITAL COUNSELLING

If social casework is to be effective as an approach to marital counselling the concepts of study, diagnosis, treatment planning and implementation must be observed and recorded. In the work with Mrs. Spooner, Mr. Elliot, the Jeffreys and the Francis', the caseworkers formulated sound diagnoses, and through their knowledge of the clients' personalities the workers were able to extend appropriate treatment. Mrs. Spooner had a definite need to feel wanted and to be successful, because during her childhood years she had felt unimportant. She had not succeeded as a wife and mother, and the caseworker helped her to regain a role in which she felt comfortable and of value. Bolstered by this, she was able to make plans for the care of her children, and to meet some of their affectional needs. Mr. Elliot was assisted to realize that all the blame for the dissolution of his marriage did not lie with him, and that with his intelligence and his willingness to accept help, he could achieve more maturity. The Jeffreys were helped to understand the needs of each other, and to find ways of meeting these needs. Mrs. Jeffrey had not known that her husband felt insecure as a husband and father and was unsure of his own worth. With her increased knowledge and her desire to resolve the conflicts in their marriage, Mrs. Jeffrey was able to help her husband feel more comfortable in his role, and to give him considerable reassurance as to his importance to her and the children. The caseworker in the Francis case enabled Mrs. Francis

to clarify her feelings toward her previous lover and toward her father. She had felt tied to her first lover but had been unable to express her strong feelings which were an adolescent idolizing of him, and this in turn had prevented her from recognizing the affection she felt toward her husband. Mr. Francis was assisted to understand that he had come to identify his wife with his mother whom he disliked intensely, and that he had subconsciously attributed all the positive feminine qualities to his step-daughter Kathleen.

On the other hand, the clients who were not helped by the casework contact, Mr. Spooner, Mrs. Elliot, and the Rolstons, were not diagnosed, nor involved in treatment. Some discussion regarding these clients is contained later in this chapter.

Even when the concepts of study, diagnosis and treatment are observed there would seem to be limitations to the casework approach as it has evolved up to the present time. The matter of involving both partners in treatment is extremely important and the case analyses indicate that it has been neglected. Sidney Berkowitz has stated that in cases of marital conflict two caseworkers should be assigned. The cases studied in this paper indicate that this is a valid contention. Mr. Berkowitz believes that it is essential that the caseworker decide early in the contact whether the case constitutes one of marital conflict or of a problem in marriage, and that this should govern the question of one or two workers being assigned. At the present time, the policy of the Vancouver Family Service Agency is that one caseworker works with both husband and wife, whether the problem is marital conflict or disturbance. The basis for the agency's policy is the thinking that one caseworker is able to see the needs of

the family as a whole, and can assess not only the husband and wife, but also the relationship existing between them. The differentiation between marital conflict and marital disturbance is not, however, made. The agency policy would seem to be a valid one in cases of marital disturbance, or even slight conflict, providing that both partners can accept the caseworker as a helping person. The Jeffreys and the Francis', despite the problems that were hampering a satisfactory marital relationship, wanted to preserve their marriage, and both husband and wife agreed that some assistance was needed. In cases of severe marital conflict, however, it is often impossible for both partners to relate positively to the same worker, and if both husband and wife are to be helped two caseworkers should be assigned. Mr. Spooner and Mr. Black thought that the caseworker was interested only in their wives, and in view of the extent of their guilt feelings regarding their failure to function adequately as a husband and father, it is doubtful if they could have related to the caseworker who was working with their wives.

If both partners are to be involved in treatment the timing of the caseworker's contact with the second partner must be carefully considered. At the present time the caseworkers of the Vancouver Family Service Agency initiate contact as soon as possible. This policy enables the caseworker to obtain a clear picture of the marital relationship, and, in addition, the second partner does not feel neglected or unimportant. However, definite disadvantages occur as a result of this policy. Commenting upon this point Mrs. Morton

writes:

"The caseworker is not yet sure of the ability of the first partner to use the casework service; there has not yet been time to formulate a diagnostic picture of the first client's difficulties. The first client may, without the support of a relationship with the caseworker, be insecure enough or unconsciously motivated to distort the facts presented to the caseworker, in regard to her own contribution to the marriage difficulties. If the spouse is introduced too soon, and the element of rivalry introduced, she may well find it difficult, if not impossible to do so". 1

The difficulties which occur in the timing of the involvement of the second partner are found primarily in marital conflict cases where the partners, because of their unmet dependency needs, are unable to share a caseworker. In marital disturbance cases the partners are both able to regard the caseworker as a helping person, and are sufficiently mature to relate positively to the same caseworker. It seems reasonable to suggest that the difficulties outlined above would not occur if two caseworkers were assigned to help the partners in marital conflict cases. Each partner would then feel secure in a relationship he did not have to share with his spouse, and the caseworker would be able to concentrate upon securing a diagnostic picture of, and building a secure treatment relationship with one person.

A valuable contribution to the fields of social casework and of marital counselling could be made by a study which carefully examined the involvement of the second partner in marital conflict cases. Particular attention could be paid to the timing of the involve-

1 Morton, Betty, The Psychodynamics and Treatment of the Male Partner in Marital Conflict Cases, Master of Social Work Thesis, UBC, Page 129.

ment to determine the positive and negative results of early contact with the second partner. It would be extremely helpful to know definitely if the relationship between the first partner and the caseworker was weakened when the same caseworker initiated contact with the second partner at an early stage.

One of the basic precepts of social caseworker is that the worker should begin where the client is, and should proceed at the client's pace. This precept is of great importance, for if the client is to progress and achieve a more adequate level of functioning, he must participate in the treatment process and often he can do so only as his ego is strengthened. He must grow in understanding of his feelings and motivations or make direct changes because of his stronger ego and the worker's acceptance and understanding. The observation of "starting where the client is and proceeding at his pace" does not mean that the caseworker works only with the knowledge that the client possesses. Obviously to be of help the caseworker must know the needs of the client and seek to assist the client to have these needs fulfilled. In marital counselling, in addition to diagnosing the husband and wife, the marital relationship itself should be studied. Robert Gomberg has stated that:

"Family diagnosis and family oriented treatment by definition throw the spotlight on the interaction between the significant members of a family - in a marital problem on the relationship between husband and wife. ... Relationship should be viewed as a vital phenomenon, crucial to marital diagnosis and, therefore, vital to treatment" 1

1 Gomberg, Robert, "Present Status of Treatment Programs", contained in Neurotic Interaction in Marriage, New York, 1956, Page 269.

Study of the interaction between husband and wife enables the caseworker to assess the positive and negative aspects of the marital relationship, and to know whether the partners can gain more satisfaction from their marriage - enough to ensure a happier life. This is a basis for working with the client at his own speed, and it enables the caseworker to explore with the client the possibilities for gratifications that exist in the marriage. Regina Flesch comments:

"The worker can elucidate those positive elements that the client himself has not consciously recognized. This in itself may ease some frustration since it permits conscious affirmation of hitherto unconscious ties." 1

The marital relationship, in the cases studies, tended to be a neglected issue. Particularly in the Spooner, Elliot, and Rolston cases the workers did not attempt to study the relationship existing between husband and wife. Because of their resulting lack of knowledge, the workers were unable to help the clients understand the negative and positive aspects of their marriage. In the Spooner and Elliot cases the workers extended help to Mrs. Spooner and Mr. Elliot, and the marital conflict, per se, was not the focus of the casework help. Environmental help only was given to the Rolstons, and the caseworkers made no attempt to involve the Rolstons in treatment of their marital problems. Yet there were positive factors in all these cases. All the clients, fathers and mothers both, revealed love for their children, and were concerned about them. This is indicative of a certain amount of personality strength. The male clients, with the

1 Flesch, Regina, "Treatment Goals and Techniques in Marital Discord", Journal of Social Casework, December, 1949, Page 16.

exception of Mr. Rolston, were able to maintain steady work records and to provide adequately for their families. The mothers, at one time or another, demonstrated ability to care for the children and were fairly capable house keepers.

It is unfortunate that, because of the limited contact with Mr. Spooner and Mrs. Elliot, a full assessment of the marital relationship between Mr. and Mrs. Spooner, and Mr. and Mrs. Elliot, cannot be made. Both Mr. Spooner and Mrs. Elliot were reluctant to involve themselves with the caseworker, feeling that the worker was an ally of their spouse and not really interested in them. They both thought that dissolution of the marriage was the only answer to their problems. The information regarding Mr. Spooner indicates that he was an immature individual unable to meet the responsibilities of a husband and father, and he showed little interest in trying to improve his functioning. The psychiatrist and the caseworker thought that, in view of his immaturity and narcissistic personality and the great affectional needs of Mrs. Spooner, they were totally unsuited to one another.

Mrs. Elliot, while demonstrating some maturity by her action in caring for the children following the separation from her husband, seemed also to be a person of limited strength. She was not interested in helping her husband, and thought that her own wishes could be fulfilled only by separation and subsequent remarriage. She seemed determined to gratify her own desires, and did not consider the effect of her decision on her husband or the children.

A caseworker has the responsibility to explore with the client the positive aspects of the marriage. With a full understanding of

the marital relationship and the possibilities that exist for future improvement, the client can make a decision in accordance with his feelings and the realities of the situation. Assisted by the caseworker to an understanding of his own needs and of his part in the marriage, the client is in a position to judge whether or not separation is the best answer. If the question of remarriage occurs, the client is then able to evaluate the potential relationship, and to determine if his needs would be satisfied in the new marriage.

Exploration of the positive factors also helps the client, even though he has decided to separate from his wife. The feelings of failure and guilt which were evident with Mrs. Spooner and Mr. Elliot might have been lessened if they had been helped to remember gains for themselves and their families as well as unhappiness.

The Rolstons might have gained enough satisfaction from their marriage if suitable casework help had been extended. Mrs. Rolston had demonstrated ability to care for the children during the early years of the marriage. Her ability to function as a mother deteriorated when Mr. Rolston returned home after serving in the forces. Mr. Rolston felt uncomfortable and insecure living in an urban area, and he was unable to find suitable employment. In order to bolster his ego he constantly belittled his wife, and her resulting deterioration was most marked. If the Rolstons had received sufficient support from the caseworkers, Mr. Rolston would not have needed to resort to this method of maintaining some feeling of ego strength, and the Rolstons might have been materially helped. Mr. Rolston's need to obtain suitable employment preferably in a rural area would seem to offer a significant opportunity to help him.

In all the cases examined, except the Francis case, the children are mentioned only infrequently in the recording. The case analyses indicate that the parents were too concerned about their own problems and inadequate adjustment to worry about the children. At times the parents commented upon the behaviour of the children and seemed to realize that their preoccupation with their own problems caused them either to neglect or be impatient with the children. The caseworkers were able to help the parents when concern regarding the children's behaviour was expressed. Mrs. Black, at one point, was worried because her children would often refuse to obey her. The caseworker helped her to see that the children were copying their parents, for there was a distinct lack of co-operation between Mrs. Black and her husband. Mr. and Mrs. Black were then able to refrain from arguing when the children were present. Mrs. Spooner was assisted by the caseworker to understand some of the aspects of child development. This occurred when Robert Spooner began to masturbate and to show an interest in urination. Mr. Francis was helped to modify his preferential treatment of the oldest boy whom, he felt, had been neglected in the early years of the marriage. In the Elliot and Jeffrey cases little is recorded about the children, and in the Rolston case the casework help given to the children was directed toward improving their physical health.

Only one child, Kathleen Francis, was directly involved in treatment. Kathleen, because of the attitude of Mr. Francis toward her, and because of Mrs. Francis' guilt about her rejection of Kathleen, was a key person in the Francis family. Much of the casework help was

directed toward helping Mr. Francis clarify his feelings toward Kathleen, and toward helping Mrs. Francis resolve her guilt feelings. Kathleen, too, because of her unsatisfactory marriage was in need of casework help and the caseworker indicated interest in her, and offered assistance which she was able to accept. Kathleen was the only teenager in the cases studied. All the other children were under the age of ten, and if their personalities had been damaged because of inadequate and quarrelling parent figures, this was not brought to the worker as a problem by either parent.

The question naturally arises whether help might have been given to the children after the parents had been helped by the casework contact. It would have been impossible for any help to have been given to the children until the parents had been helped sufficiently for them to be able to consider the children. At this point, however, the caseworkers could have attempted to ascertain if the children were in need of any help. This was not done in any of the cases studied, except the Francis case. Indeed, the case recordings do not indicate whether the caseworkers knew if the children were in need of any help. It does, however, seem probable in view of the very limited ability of Mrs. Spooner, Mrs. Elliot, Mr. Jeffrey, the Rolstons and the Francis', to provide adequate emotional nutrition, a normal home and parental guidance for their children, that the children might have been in need of some therapeutic assistance. The caseworkers did not attempt to learn whether the emotional maturation of the children was normal. Although the primary responsibility of the caseworkers was to help the marital partners,

opportunities to do preventitive work with the children should not have been overlooked. If some of the children were in need of help, the caseworker could have worked with them himself, referred the children to the Child Guidance Clinic, or to another worker in the agency.

In the analyses of the Rolston and Black cases it was noted that re-evaluation can be extremely helpful to both worker and client. The concept of diagnosis is a fluid one, and by continually re-evaluating the caseworker is able to change the diagnosis, if material revealed by the client after the initial diagnosis has been made indicates that some alteration is necessary. The caseworkers in the Black and Elliot cases did critically examine past interviews in the light of new material. The caseworker in the Elliot case had thought that Mr. Elliot possessed a weak superego, and later recognized that Mr. Elliot's superego was not a weak, but a rigid crippling one. This change in the diagnostic appraisal of Mr. Elliot was important to the treatment. Instead of reinforcing Mr. Elliot's superego, the caseworker tried to help Mr. Elliot to relax his rigid attitudes and conceptions, particularly in the area of sex. The caseworker in the Black case found that Mrs. Black's ego was stronger than she had first supposed, and she was, therefore, able to suggest ways that Mrs. Black could employ to effect improvement in the marital situation. In addition, this alteration in the diagnosis indicated that the caseworker need not give as much ego support as she had formerly felt necessary.

No re-evaluation was done in the Rolston case. Had the caseworkers examined past interviews, they might have found some strengths

with which to work. Mr. Rolston's concern for the children and his desire to be an adequate father and provider were strengths in this family which the caseworkers neglected to use. Mrs. Rolston's ability to care for the children during the time when Mr. Rolston was in the army was forgotten by the caseworkers.

The caseworker in the Black case shared the re-evaluation with Mrs. Black, and, as has been pointed out, this proved to be of definite value to Mrs. Black.

The study of the six cases presented in the preceding chapters did, however, reveal that the casework approach to marital counselling has definite strengths. The most significant fact provided by the case analyses is the effectiveness of ego supportive casework. It seems to be one of the growing pains of social casework that "we tend to identify the giving of insight with effective therapy," and "we underestimate what may be achieved through supportive therapy."¹ Social workers, being knowledgeable in the area of human behaviour, need to realize how threatening it is for people to acknowledge that their marriage has not been successful, and to request help so that some satisfactory solution to the existing problems can be found. As the cultural anthropologists have pointed out, the Western culture has instilled in us the idea that when married "we all live happily ever after." The very real challenges and problems posed by marriage remain unknown until married life itself is experienced. When a husband and wife experience difficulties in their marriage they often

¹ Flesch, Regina, "Treatment Goals and Techniques in Marital Discord", Journal of Social Casework, December 1949, Page 15.

consider themselves to be "failures" and "socially unacceptable."

Mrs. Flesch has written:

"In marital rifts each partner accurately senses the other's ambivalence and each loses confidence in the other. Yet each partner also feels his own ambivalence and also loses confidence in himself, in his sexual adequacy and particularly in his ability to love and be loved. ... When the ego weakens, the individual can contribute less to the marriage and must require more from it". 1

The value of supportive therapy can be seen clearly from an examination of the Francis and Jeffrey cases, and with Mrs. Spooner and Mr. Elliot. In these cases the caseworker, at each opportunity, stressed the fact that, despite the difficulties the client was facing, he was endeavoring to fulfill his role as adequately as possible. With Mr. Elliot, Mr. Francis, and Mr. Jeffrey the caseworkers emphasized that the ability to provide for one's family was indicative of strength, especially when one was beset by problems at home. The caseworkers pointed out, too, that a realistic admission of the difficulties hampering an adequate marital relationship coupled with a desire to improve the relationship was a positive factor. The love and concern for their children revealed by Mrs. Spooner, Mr. Elliot, Mrs. Black and Mr. and Mrs. Francis, and the Jeffreys was also recognized by the caseworkers with these clients as an indication of strength and maturity. This proved to be extremely helpful to the client. Bolstered by the caseworker's appraisal of them as worthwhile people with strength and potential

1 Flesch, Regina, "The Problem of Diagnosis in Marital Discord", Journal of Social Casework, November, 1949, Page 25.

for future improvement, Mr. Elliot was able to survive the breakdown of his marriage, and the Francis' and the Jeffreys were able to mobilize themselves to resolve the difficulties that were besetting them. The caseworkers, after finding the strengths that the clients possessed, consciously emphasized the existence of these strengths as much as possible, and expressed their belief that with these strengths a satisfactory solution to the marital problems could be found.

A positive relationship between caseworker and client is necessary if ego supportive therapy is undertaken. Dr. Hollis states:

"When psychological support is the predominant treatment method it rests upon a warm, good parent type of relationship. Because the worker is primarily permissive and giving, positive feelings rather than negative transference components are characteristically placed upon the worker. ... The emphasis in psychological support is not on the development of understanding by the client, but rather on reinforcing his ego strengths through guidance and release of tension and through re-assurance... In general, psychological support is useful in decreasing tension and guilt, increasing self-confidence, encouraging healthy functioning or a way of functioning that maintains the client's equilibrium and in helping him to build up compensatory strengths and satisfaction." 1

By experiencing this "warm good parent-type of relationship" clients, who have received little support and encouragement from their parents, are assisted to regard themselves as worthwhile people. They are able, too, to relinquish immature attitudes, and through identification with the caseworker develop greater sureness and maturity. Mr. Elliot was able to modify his hostile attitude towards women through his contact with the caseworker, and Mrs. Black and Mrs. Jeffrey were helped to modify their high standards so that they would not feel

1 Hollis, Florence, "The Techniques of Casework", Journal of Social Casework, June, 1949. Page 238.

disappointed by their husbands so often. Mr. Jeffrey was enabled to look upon himself as a person important to his wife and to the children, and Mrs. Spooner was helped to understand that the dissolution of her marriage did not mean that she was a complete failure. The client can indeed grow and mature by experiencing this type of relationship.

None of the cases analysed revealed a use of insight therapy in the sense that Dr. Hollis has used this term. In several cases, however, clarification of near conscious feelings and motivating attitudes was attempted and proved to be of help to the client. Mr. Elliot was assisted to understand how his hatred of his step-mother and guilt feelings in regard to his mother had led to hostile feelings toward women in general, and his wife in particular. Mr. Francis was assisted to realize that the resentment caused by his mother's compulsive and masculine behaviour was creating friction between him and his wife, to whom he had been attracted because of his unfilled need for motherly affection.

The casework principles would seem to constitute a definite strength in the casework approach to marital counselling. In particular, the use of the non-judgmental attitude, especially when combined with ego supportive therapy, and resting on a relationship of confidence is of immense assistance to clients. The case analyses reveal clearly that the client must feel convinced that the caseworker regards him as a person of real importance and integrity before he can accept the help of the caseworker. This was demonstrated in the work done with Mr. Elliot, Mr. Jeffrey, Mrs. Spooner, Mr. and Mrs. Francis and Mrs. Black. All these clients felt that the difficulties they were facing

in their marriages caused them to be socially inferior and unacceptable. In these instances the caseworkers were able to accept the clients as people of definite worth and succeeded in communicating this feeling of true acceptance to their clients. The importance of this casework principle cannot be sufficiently stressed. It is basic to the casework process.

The caseworker can show his acceptance of the client by the observation of the principle of self-determination. The client who feels himself to be incapable of making further decisions because of his failure to create a mutually satisfactory marital relationship, can be helped when he realizes that the caseworker, whom he considers an expert in this area, feels confident that he will be able to make sound decisions in the future. This was demonstrated in the Black and Elliot cases when the client directly asked the caseworker what he (and she) should do. The caseworker expressed the opinion that the client was capable of making the necessary decision, but in addition stated that he would be glad to assist the client to arrive at a decision. The caseworker, of course, cannot assist the client to make a decision which is not in accord with the reality situation. In such a case he has the responsibility to help the client examine the factors involved, and if necessary to explain why he feels a particular decision is not a wise one.

The cases studied have shown that, with the exception of the Rolston case, the workers were able to regard their clients as individuals, and to recognize that the behaviour of the clients was meaningful.

In all of the cases examined the caseworkers revealed a keen awareness of the crippling effects of physical and environmental problems. Mrs. Spooner was helped considerably by the placing of her two children; Mr. Elliot was assisted to gain the psychiatric help he needed in order to completely resolve his personality conflicts and Mr. and Mrs. Rolston were aided by the placement of a homemaker, by the visit of the district nurse, and by the referral of one of the children to the Children's Hospital. The caseworkers indicated that they realized the value of community resources to their clients. The knowledge of, and skill in using community resources constitutes a definite strength of the casework approach to marital counselling.

The cases contained in this study were extremely difficult ones, and the marital difficulties had been caused by emotional problems. Cases in which environmental or physical problems were responsible for the breakdown of the marital relationship are entirely neglected by this study. Yet many such cases come to the attention of a family service agency, and a study focussed upon the casework process in these cases would be extremely helpful to family caseworkers. It would be interesting to see if the strengths and limitations of the casework approach to marital counselling which have been revealed in this study would be duplicated in a thesis dealing with cases of marital disturbance caused primarily by physical or environmental phenomena.

Social casework can be an effective form of marital counselling if the principles and concepts of social casework are fully observed.

In particular, the use of casework principles and the extending of ego supportive therapy are of definite value to the clients, and both constitute strengths in the casework approach to marital counselling. The cases studied indicate that a greater use of this method of casework treatment is needed. All the clients were in need of ego support, and in the cases where this was not given (Mr. Spooner, Mrs. Elliot, and the Rolstons), the clients were not able to involve themselves with the caseworker. Certain aspects of social casework as it relates to marital counselling need further study. The question of whether one or two caseworkers should be assigned is of great importance. A basis for decisions might be the differentiation made by Sidney Berkowitz between marital conflict and marital problems. Caseworkers should also attempt to discover whether the children of clients are in need of help, and should take the responsibility of offering this help if it is indicated, although agency function is somewhat restrictive in this area. Certainly, however, the possibility of a referral to the Child Guidance Clinic or to a Children's Agency could be considered.

Whether casework help leads to separation or to re-integration of the marriage, social casework can materially help those experiencing marital conflict. As Katherine McElroy has pointed out "family agencies are challenged to interpret their services as available and useful to individuals before and after marriage. ... This is a crucial period for the family agency to establish its position as a therapeutic agency¹ in the community." The family agency, too, needs to critically examine

1 McElroy, Katherine, "Marriage Counselling", Journal of Social Casework, June, 1947, Page 46.

its policies, particularly in the areas mentioned above, so that the casework approach to marital counselling can be made more effective and helpful.

Schedule 1. Facesheet Information for Cases Presented in Chapter II.

Cases	Black	Jeffrey	Francis
Christian Names	Adam Eve	Horace Jane	Wallis Hazel
Ages	27 25	32 35	31 29
Children	Ann b. 12.12.41 Betty b. 15.7.45 Gwen b. 25.5.48	¹ Harry b. 21.7.39 Joyce ² b. 14.8.40 Doug b. 23.11.50 Ian b. 24.10.51	³ Kathleen b. 1938 Barrie B. 1948 Marilyn B. 1949 George b. 1950 Fred b. 1952
Religion	Protestant	Protestant Roman Cath- olic - non practising	Protestant
Occupation	Butcher Housewife	Railroad Employee Housewife	Truck Driver Housewife
Intake Date	January 14, 1942	May 4, 1953	October 17, 1955
Length of Continuous Contact	8 months	12 months	11 months
Number of Interviews	- 12	10 15	8 16
Sex of Worker	Female	Male	Male

1. and 2.

Harry and Joyce were born during Mrs. Jeffrey's first marriage. Their father was killed in an auto accident, but the date of the accident is not contained in the case record. Mr. Jeffrey legally adopted the children after his marriage to Mrs. Jeffrey.

3.

Kathleen was an illegitimate child.

Schedule 2. Facesheet Information for Cases Presented in Chapter II.

Cases	Spooner	Rolston	Elliot
Christian Names	Thomas Marie	Allan Jane	Barrie Millie
Ages	35 29	31 19	not stated not stated
Children	Robert b. 1949 Susan b. 1951	John b. Aug. 1945 Harry b. July 1946 Bill b. Aug. 1947	Jill b. 1944 Judy b. 1945
Religion	Protestant	Protestant	Protestant
Occupation	Mill Worker Housewife and Bookkeeper	Shoe-repair Worker Housewife	Customs Official Housewife and Theatre Usherette
Intake Date	April 10, 1951	May 12, 1945	November 11, 1953
Length of Continuous Contact	2 months 2 years	2 years	18 months
Number of Interviews	5 45	5 3 Joint - 20	3 22
Sex of Worker	Female	Female	Male

BIBLIOGRAPHY

- Austen, Lucille. "Trends in Differential Treatment in Social Casework",
Journal of Social Casework, June, 1949.
- Berkowitz, Sidney. "An Approach to the Treatment of Marital Discord",
Journal of Social Casework, November, 1948.
- Bowers, Swithun. "The Nature and Definition of Social Casework",
Journal of Social Casework, October, 1949.
- Calnan, Wilfred. "The Effectiveness of Family Casework, Master of
Social Work Thesis, University of British Columbia, 1948.
- Coleman, Jules. "Distinguishing Between Psychotherapy and Casework",
Journal of Social Casework, June, 1949.
- Eisenstein, Victor - Editor. Neurotic Interaction in Marriage,
New York, Basic Books, 1956.
- Flesch, Regina. "The Problem of Diagnosis in Marital Discord",
Journal of Social Casework, November, 1949.
- "Treatment Goals and Techniques in Marital Discord",
Journal of Social Casework, December, 1948.
- Foster, Robert. "Marriage Counselling in a Psychiatric Setting",
Journal of Marriage and Family Living, February, 1953.
- French, David. An Approach to Measuring the Results in Social Work,
New York, Columbia University Press, 1952.
- Garrett, Annette. "Historical Survey of the Evolution of Casework",
Journal of Social Casework, June, 1949.
- Goldstein, Sidney. Marriage and Family Counselling, New York,
McGraw Hill, 1945.
- Gomberg, Robert. "Present Status of Treatment Programs", Neurotic
Interaction in Marriage, New York, Basic Books, 1956.
- and Levinson, Frances. Diagnosis and Process in Family
Counselling, New York, Family Service Association of
America, 1951.
- Gunn, Elizabeth. Address to the Annual Meeting of the Family Service
Society of St. Louis, January 8, 1947.

Hamilton, Gordon. Theory and Practice of Social Casework, New York, University of Columbia Press, 1954.

Hollis, Florence. "The Techniques of Casework", Journal of Social Casework, June, 1949.

Women in Marital Conflict, New York, Family Service Association of America, 1947.

Landis, Judson and Mary. Building a Successful Marriage, New York Prentice Hall, 1948.

McElroy, Katherine. "Marriage Counselling", Journal of Social Casework, June, 1947.

Morton, Betty. The Psychodynamics and Treatment of the Male Partner in Marital Conflict Cases, Master of Social Work Thesis, University of British Columbia, 1957.

Sack, Patricia. "Establishing the Diagnosis in Marital Problems", Journal of Social Casework, May, 1949.

Schmidl, Fritz. "On Contact with the Second Partner in Marital Counselling", Journal of Social Casework, January, 1949.

Report of the Committee on Methods and Scope of the Family Service Association of America, Scope and Methods of the Family Service Agency, New York, Family Service Association of America, 1953.

Simcox, Beatrice. "Diagnostic Process in Marital Problems", Journal of Social Casework, October, 1947.

Waelder, Elsie. "Casework with Marital Problems", Journal of Social Casework, May, 1947.