

BRIDGING THE GAP BETWEEN MICRO AND MACRO PRACTICE: LARGE SCALE CHANGE AND A UNIFIED MODEL OF NARRATIVE-DECONSTRUCTIVE PRACTICE

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The bifurcated structure of social work education, micro and macro, is often unwarranted and restrictive. This split forces a premature and unnecessarily narrow focus in study and practice. In order to adequately pursue social justice and deal with issues of power and oppression in a clinical context, this bifurcated structure of social work must somehow be unified. A narrative-deconstructive model of practice, nested in the postmodern-poststructuralist paradigm and embodied in the work of White and Epston offers a resolution to this dilemma. The authors provide a conceptual base for understanding this model, highlight those socio-political elements of the model that integrate clinical practice with social change, present examples, and discuss implications for social work education.

RECENT INNOVATIONS in social work practice and social work education have been attributed to a postmodern paradigm (Deitz, 2000; Laird, 1993; Witkin, 1999). Postmodernism suggests that truth, meaning, or structure are not fixed or inherent in a definitive external reality but constructed through evolving dialogues and discourses characterized by a finite history and a socio-cultural identity. A basic element of postmodernism "has been the challenging of assumptions about truth and reality" (Witkin, 1999, p. 5). It has been suggested that this element of postmodernism may be useful in exploring issues of culture, power, oppression, social justice, policy-making, and other issues congruent with social

work values (Chambon, 1994; Kelley, 1995; Lowe, 1991; Swenson, 1998). Others have used elements of postmodern theory in combination with additional theoretical perspectives in an attempt to unite clinical practice with social action (Sachs & Newdom, 1999). It is clear that in order to adequately pursue social justice and deal with issues of power and oppression in a clinical context, the bifurcated structure of social work, commonly known as micro-macro or clinical and social action, must somehow be unified.

In sociology, this relationship between individual human problems and societal issues was considered the only proper subject (Mills, 1959). Turner (1991) notes that the

reconciliation of the "micro/macro question" (p. 626) is crucial if a unified understanding of human agency and collective activity is to be achieved. However, the dilemma of uniting an understanding of individuals and human interaction with an understanding of social structures and institutions has led to a long-standing tension between micro and macro theorizing in sociology (Marshall, 1998). Some contend that an over-reliance on either the macro or micro pole generates inadequate and fragmented positions (Merton, 1949; Mills, 1959). The macro position may be prone to unverifiable abstraction while an exclusively micro orientation might consist of a multiplicity of empirical generalizations lacking any abstraction (Merton, 1949; Mills, 1959). Wiley (1988) has suggested that major elements in this split are attributable to insufficient conceptualizations of the self on the part of macro theorists and scant attention to macro structures on the part of micro theorists. He proposes that a problem with both micro and macro levels of analysis is their reification. This characterization may also apply to social work and social work education.

Conversely, postmodern philosophy suggests that concepts such as micro and macro are *constructed* "binary oppositions" (Best & Kellner, 1991, p. 21), positing artificial boundaries and hierarchies. If this is the case, such distinctions should not limit a postmodern practice or define an educational emphasis. However, practice and education informed by postmodernism appear to have been underutilized in focusing on so-called macro issues. Instead, the primary focus has been at what is commonly considered the micro level. This emphasis has led to challenging the

assumptions constituting the problem narratives of individual clients and families in clinical practice. Unless we are able to adequately connect the problems of clients in oppressed groups to the roots of their oppression and the clients to each other, fundamental change will not occur (VanVoorhis, 1998). Such a reconciliation must also occur in the classroom.

It is our contention that a narrative-deconstructive form of postmodern practice (Kelley, 1995; Lowe, 1991), embodied in the work of Michael White and David Epston (1990), is a self-contained practice model of which the basic goal can be the pursuance of social justice. Particular elements of the methods, contained within, may provide a scaffold for the attainment of social justice comparable to the approaches of the radical educator and activist, Paulo Freire. Furthermore, those methods link clients to others with similar problems in groups that can lead to collective activity, social action, and macro-level change. This specific combination of methods blends elements of micro and macro practice seamlessly into one model. It is the purpose of this paper to provide a brief discussion of postmodernism and to highlight those elements of narrative-deconstructive treatment that can facilitate the integration of clinical practice with social change. The authors provide case examples of the model and offer suggestions for its use in social work education.

Postmodernism and Practice Models

Postmodernism has been characterized as confusing and nebulous (Gellner, 1992). Within postmodern philosophy there are diverse perspectives. As Witkin (1999) notes, it

is not a "unitary theory, but a broad framework for understanding" the activities of human life (p. 5). There is also some confusion regarding the terms postmodernism and poststructuralism. For many the terms are interchangeable. However, the term postmodern is more broadly encompassing and more commonly used (Best & Kellner, 1991; Seidman, 1994). More precisely, poststructuralism refers to a movement originating in France that developed methodologies of radical semiotic analyses which focused on the linguistic, signifiatory constitution of reality and truth (Marshall, 1998). The term poststructural appears to be preferred by those writers often associated with both terms (Best & Kellner, 1991; Marshall, 1998). For the purpose of this paper, the terms will be used interchangeably.

There appear to be "two broad, general orientations" (Rosenau, 1992, p. 15) within poststructuralism which are perhaps more important than the difference between the two terms. One theoretical orientation focuses exclusively on reality as text, and the other attends more to the organization of power through discourse (Rosenau, 1992). In the former, epitomized in the work of Jacques Derrida, organized experience is considered to be purely linguistic, and political issues and social forces are deemed "merely species of naive referential delusions" (Norris, 1987, p. 213). Here the focus is exclusively on the textual nature of truth and reality and the annihilation of structure and certainty (Rosenau, 1992). This orientation is often referred to as "textualism" (Callinicos, 1985, p. 86). In this view all texts are endlessly inter-related with an unlimited multiplicity of mean-

ings, all of which are considered equal (Bauman, 1992; Norris, 1987). This perspective has warranted criticisms of postmodernism as an extreme form of relativism which breeds conceptual chaos and does not account for the asymmetrical dimension of power and knowledge in the real world (Gellner, 1992).

Within the latter orientation, embodied in the work of Michel Foucault (1979), language and discourse are viewed as systems of power relations which are used to elevate and enforce particular ideas and ideologies (Norris, 1987). Here, the focus is more on how even "individual words. . . project power as elements in discourse" (Marshall, 1998, p. 514).

One can find congruence with these two orientations in the array of postmodern treatment methods as well. For example, much of the literature about postmodern methods in social work has been confined to models which have a primarily linguistic focus, such as a solution oriented approach (de Shazer, 1985) and a linguistic systems approach (Anderson & Goolishian, 1988). For some who adopt these approaches, there seems to be a belief that one has only to change the story in order to change the outcome (Parry, 1992). Hence, certain forms of postmodern practice reveal a naivete or chimeric idealism regarding the existence of real constraints (Gellner, 1992). Such methods seem to encourage oppressed clients to change simply by changing their story (Vodde, 2002). Moreover, postmodern practice models anchored exclusively in the story and in a philosophy that never leaves semiotics do not appear equipped to attend to the consequences of power, oppression, and social forces or to the risks

inherent in insurrection narratives (Vodde, 2002). A narrow attention to the re-storying of the client's situation reinforces the illusion of an individual with problems rather than "inviting people to understand the relationship of the problem to other factors; to the politics of oppression" (Freire, 1990, p. 38).

Strategies of deconstruction are inseparable from poststructuralism or postmodernism. Narrowly, deconstruction refers to tearing apart the text or discourse to reveal its contradictions, assumptions, and linguistic illusions (Rosenau, 1992). Deconstruction is a way of critically viewing discourses from a stance of unwillingness to accept the tacit assumptions on which they are based, and then seeking out those "aporias, blindspots or moments of self-contradiction where a text involuntarily betrays the tension between rhetoric and logic" (Norris, 1987, p. 19).

Deconstructive methods and strategies are typically congruent with the postmodern orientation from which they proceed. A solely textual focus would lead one to the deconstruction of the narrative and its assumptions, whereas a focus on the power relations undergirding and comprising the narrative would lead to the challenging of the deeper authority and the social forces which sustain such discourses.

The Narrative-Deconstructive Work of Michael White and David Epston

Like other poststructuralists, White and Epston see reality as socially constructed. They emphasize the narrative quality of experience and the ways in which people organize their lives around the particular meanings they ascribe to experience (Kurtz & Tandy,

1995; White & Epston, 1990). However, their focus is also on the power relations and social forces which constitute such narratives. White and Epston seem to be concerned with the oppressive effect of macro narratives, embodied in dominant discourses and in cultural practices, on "local knowledge" (White, 1989, p. 5) or "lived experience" (p. 20). Theoretically, White and Epston build upon the ideas of Michel Foucault (White & Epston, 1990).

Foucault was interested in the local effects or personal manifestations of large-scale discourses of modernity, such as those epitomized in the human sciences. Among other issues, he explored the de-centralization of power through discourse assimilation at local sites. He saw this assimilation accomplished through the proliferation of disciplines that divide and classify into distinctions such as "the mad and the sane, the sick and the healthy and the criminals and the good boys" (Foucault, 1994, p. 326). He believed such dichotomous distinctions, including micro and macro, were artificial and macro level structures and macro power were nothing more than "the imperialism of modern discourse" (Best & Kellner, 1991, p. 38). In other words, micro-level discourse and self-narratives are the successful deployment and internalization of macro discourses in the form of definitional knowledge and dividing practices. In so doing, "Foucault brought together into a single fold the two poles of the social work profession that are traditionally kept apart, the micro and the macro. . ." (Chambon, 1999, p. 56). Foucault's work challenged both the monolithic formulations of macro theory and the absence of social forces in interactionist micro-theory (Best &

Kellner, 1991). Foucault believed that many of the cultural practices of scientific knowledge resulted in the "objectification of persons for the purposes of subjugation" (White, 1989, p. 22). These practices actually encourage persons to engage in prescribed rituals of social, psychic, and physical mutilation in order to conform to the ideal of normalcy.

However, White and Epston believe that people can become agents of power as well being effects of power. That is, people can reclaim self-definition. They have devised a process that serves the purposes of deconstruction which they refer to as externalizing the problem. According to White (1989), externalizing is a process of questioning that encourages persons "to objectify and at times personify the problems that they experience as oppressive" (p. 5). The goal is to separate the client from the problem in such a way as "to make the problem the problem," rather than the identity of the client (White, 1989, p. 5). For example, a person who presents with the problem, "I am depressed," would be invited into a conversation wherein depression becomes viewed as a force, separate from the client, that has occupied the client and recruited him or her into a depression-saturated view of him or herself as well as into a life performance of this depression-saturated view. Questions such as "How has depression convinced you of your powerlessness?" and "How did you beat depression long enough to come here today?" may be used in the interview. This externally situated focus on depression may allow the client to mobilize counter-forces of strengths, resistance, and exceptions to the depression that

exist within the client. White and Epston employ particular sets of questions, detailed in their work, to bring forth such conversations.

However, externalization does not stop with challenging the assumptions that locate the problem within persons but extends to revealing those social forces whose interests lie in maintaining such personification. Just as Foucault considered the constraining effect of large scale discourses on self-narratives, White and Epston consider the empowering effect of rejecting such self-narratives while exposing their prevailing sources (grand narratives) and challenging the authority of those grand narratives. Hence White and Epston appear to have used Foucault's (1979) analyses of the "practices of power" (p. 76) in order to undo the effects of those practices.

Power and Knowledge; Politics and Therapy

Foucault suggests that knowledge practices embodied in the modern human sciences are devices for managing and maneuvering human populations (Foucault, 1980). In the words of White (1991), "In that it is through these practices that persons shape their lives according to dominant specifications for being, they can be considered techniques of social control" (p. 34). Central to this thesis is the notion of what Foucault (1979) calls "interiorization" (p. 136). The term refers to the ways in which individuals accept these dominant discourses as specifications for being and attempt to submit their life experience to the structures propounded by these discourses while monitoring their own compliance (Foucault, 1980).

Drawing upon Foucault, White (1991) sees individual collaboration in these processes of power and subjugation as rarely a conscious phenomenon. Because these forces are masked as norms and truths, they are experienced as "the way to be." White (1991) refers to this as "The Ruse" (p. 35) and establishes six conditions for its existence:

The source of power is invisible to those who experience it most intensely. Persons are isolated in their experience of subjugation. Persons are subject to the gaze and normalizing judgment. It is impossible for persons to determine when they are the subject of surveillance and scrutiny and when they are not, therefore must assume this to always be the case. Persons are incited to perpetually evaluate themselves, to police themselves and to operate on their bodies and souls to forge them as docile. Power is autonomous to the extent that those participating in the subjugation of others, are, in turn, the instruments of power. (p. 34)

The Ruse is dehumanizing in that it "incites people to embrace their own subjugation" (White, 1991, p. 35). Compliance with these imposed formulations is experienced "as the effect of something like fulfillment or liberation" (p. 35). Inability to attain these prescribed ways of being, as well as any local knowledge that contradicts these truths, is experienced as problematic and deemed pathological. Thus intra-psychic and interpersonal problems are not self-contained, but local manifestations of larger socio-political and cultural constraints or conflicts. Within

this model, a therapeutic response to individual pathology must expose and politicize the methodology of pathology. This is accomplished by revealing the discursive deployment of power that is its source and then challenging its authority (Epston, 1993).

First Order Externalizing, Second Order Externalizing, and a Community of Resistance

Thus the practices of externalizing were also intended by White (1989) and Epston (1993) to gradually expose, name, and challenge those omnipresent and invisible forces of subjugation and oppression that are embodied in the performance of personal problems and that encourage submission. In other words, "the process of externalizing the problem is progressive. It is not a static reframe of the problem" (Tomm, 1989, p. 56).

It is our belief that the difference in the externalizing for many clinicians and a more progressive externalizing is similar to the difference in the concepts of first order and second order change (Watzlawick, Weakland, & Fisch, 1974). Watzlawick et al. (1974) explain the differences in first and second order change respectively: "one that occurs within a given system which itself remains unchanged, and one whose occurrence changes the system itself" (p. 10). First order externalizing focuses on changing the client's relationship with the problem by "making the problem the problem" (White, 1989, p. 5). However, it may do little to alter the worker-client-problem system. Hence the clinician may remain in the role of one who helps the individual defeat the problem. However, second order externalizing, which focuses on

unmasking the social forces that define and maintain the client-problem system, leads the client out of the role of "individual with problem" and into the role of "group member constrained by social forces." As a result, the practitioner is required to modify the role of "one who helps the client defeat the problem" to "one who facilitates the connection to others who resist oppression." It is here that the split between micro and macro begins to dissolve as separate clients migrate to a community of resistance.

This level of externalizing facilitates the building of such a community. White and Epston aid this process by connecting clients to the experiences of other clients through the use of letters, narrative compilations, or direct contact. In his work with those who suffer from anorexia, Epston often begins an initial session with words similar to the following: "Would you like to read what others who previously have been silenced by anorexia have to say about it?" (Epston, 1993). By immediately connecting clients to the stories of others who have struggled against anorexia, the isolation that accompanies pathology-bound oppression may be dissolved. Furthermore, by centering the words of past victims of anorexia, Epston marginalizes his own authority as an expert as well as other expert accounts. Finally, by connecting clients to other clients, the development of a "counterforce" in opposition to the voices of anorexia is facilitated.

Both White and Epston seem to understand that an essential component in empowerment involves de-centering the influence of the traditional therapeutic discourse (White, Hoyt, & Zimmerman, 2000). In helping those

who are oppressed and isolated by their problems to connect with others who are similarly oppressed, they acknowledge the importance of a non-pathologizing community discourse, one that is less susceptible to the traditions of normalizing judgment, in the process of empowerment. By doing so they recognize that it is often not safe for one person to talk back to the forces of oppression. Like Freire, White and Epston seem to believe in a collective attraction to liberation, wherein groups of local individuals may unite and connect with other groups in increasing consolidation of empowerment.

Finally, White and Epston (1990) suggest that new stories must be lived through a "performance of meaning" (p. 32). That is, change occurs through the regular enactment of "counter-practices that engage persons in the de-objectification of themselves, their bodies and each other" (p. 66). In their work, this often takes the form of some collective social action on the part of clients and possibly practitioners. However, White (White, M., 2000) points out that actions of this sort are not something that occur under the direction or influence of the practitioner but through the collective discovery of clients. Such actions appear to flow naturally from client preferences in these new collective practices. White (1997), like Foucault, believes that the relations of power are inescapable. However, the task of the worker is to reverse them in ways that contribute to a "greater diversity of power relations" (p. 233). "Narrative practices seek to provide a context for people to identify their own preferences for life and to evaluate those preferences" (White et al., 2000, p. 113).

The Similarities of Freire, White, and Epston

With the belief in the capacity of humans to reflect directly and critically on their own colonization and to reclaim their lives through "dialogical action" (Freire, 1990, p. 75), White and Epston intersect with the ideas of Paulo Freire. Freire sees narrative as ongoing, transformative, and completely inseparable from action. "There is no word that is not at the same time a praxis" (Freire, 1990, p. 75). This appears similar to White and Epston's (1990) "performance of new meaning" (p. 63). It is this synthesis of reflection and action, the word as praxis, that make Freire's methodology and that of White and Epston at once similar and unique.

Freire (1990), like Foucault, saw that knowledge serves the interests of those in power. Its purpose was not to educate but to dominate, as those who learned "internalized the image of the oppressor and adopted his guidelines" (p. 31). Like White and Epston, Freire identified the objectification of humans as integral in this process (Brigham, 1977). Freire (1990) believed this objectification and prescription could succeed to the extent that there was no dialogue between the dominators and the dominated.

Freire refers to this process as "cultural invasion" (p. 151). As the culture of a group is overtaken, the group comes to adopt the worldview and reality of the invader. Through cultural prescriptions, "they mimic, dress like, speak like, think like, act like and aspire to be like the invader and in doing so become convinced of their own inferiority" (p. 151). The invaded are aware of the duality of their existence and feel estranged from their own

cultural soul, striving harder to rid themselves of this painful anomaly by becoming more like the invaders. All remaining cultural resistance to this invasion is pathologized, often with a paternalistic social service apparatus. "The oppressed are regarded as the pathology of the healthy society which therefore must adjust these incompetent and lazy folk to its own patterns by changing their mentality" (p. 60). One notes similarities in White's concept of The Ruse.

Collective Narrative Praxis

Freire suggests that by looking critically at the contradictions in one's world and what is absent, one begins to take back one's right to define the world. Freire again acknowledges the fundamentally narrative nature of this process when he says "each man wins back his right to say his own word, to name the world" (Shaul, 1990, p. 13). Freire (1990) recognizes that the right to name and re-claim "is not the privilege of a few men, but the right of every man. Consequently, no one can say a true word alone—nor can he say it for another, in a prescriptive act which robs others of their words" (p. 76).

Likewise, White and Epston seem to realize that the re-authoring of lives is not a private matter in which the clinician moves the client to speak. Similar to Freire, they seem to acknowledge that a danger in the clinician-client dyad is the privatization of misery and the perpetuation of the subject-object dichotomy. They recognize that dialogue cannot occur between those who desire to re-author their lives and those who would re-author it for them. Thus, the essence of the therapeutic alliance is to invite clients "to set

their lives in a direction *they* [italics added] prefer" (Tomm, 1989, p. 56). White and Epston acknowledge that the "therapeutic relationship" is never apolitical or value free and is always a potential arm of social control (Kurtz & Tandy, 1995). Hence they seek ultimately to minimize their own influence, first by acknowledging and exposing it and second by attempting to involve others, with similar stories or more knowledgeable about the client's story, who would encourage authentic re-authoring. In Freire's view, it is this collective act of accessible individuals engaging in dialogue (reflection-action) with each other that leads naturally to transforming the world. For Freire, White, and Epston, forcing or inciting clients toward a particular act or collective action is just another form of prescription. However, the three seem to believe that when those whose oppression is similarly rooted begin and continue dialogue, collective action on a larger scale often follows (Freire 1990; White & Epston, 1990). These similarities become more apparent when one inspects examples of such work.

Examples of White and Epston's Model

The following examples of collective client community action and large-scale social change illustrate the integration and actualization of the ideas presented above. In each of the following examples, the sites of practice weave the three strands of narrative-deconstructive work highlighted above: externalizing grand narratives, clients empowering clients through building of community, and the taking of collective action by clients protesting against the effects of oppressive forces in their lives.

Example 1. Anti-Anorexia/Bulimia League

David Epston has become known for his extensive work with women struggling with anorexia and bulimia. He made a decision in his work to focus on the knowledge of anorexia/bulimia that lay within the women with whom he worked. He gave privilege to this indigenous knowledge by transcribing the therapy sessions he conducted and saving these documents for future reference. Contained within these archives were women's ideas about the ways anorexia/bulimia recruited them into its lifestyle and, alternatively, the strategies they used to break free of behaviors and thoughts that the problem had forced on them. As described in Epston, Morris, and Maisel (1995), Epston wrote letters to his clients immediately after each session which included sets of questions inviting them to elaborate their story of struggle against and liberation from anorexia/bulimia and to circulate this story to a wider audience:

Unlike conventional pathologizing stories regarding persons' lives, these conversations, stories, that are in the archive are plotted around 'liberation,' 'resistance,' and 'oppression.' These stories, which can be conveyed through writing, or stored on audiotape or videotape, begin to provide an alternative vocabulary which is a prerequisite for any sense of oppression and any notion of resistance. These stories make available some hope for an anti-anorexic/bulimic future. As Julie has said, 'In a way, the first time I, self-consciously, took the side of outrage, or perhaps self-consciously did anything

at all, was when I listened to the tapes and in some way anorexia was exposed. (p. 73)

Externalizing narratives. From his work with other women, Epston (1993) learned that externalizing the discourses of anorexia involved not only unmasking and making visible the mutilating nature of its practices but the substitution of stories exposing the political character of anorexia in the place of pathologizing stories. The Anti-Anorexia/Bulimia Leagues use an "anti-language for explaining their philosophy and ideological position. In doing so league members act to externalize previously internalized problem discourse" (Madigan & Epston, 1995, p. 266). Anti-language refers to metaphor-laden methods of expression and stylized, polysemic language practices, developed by marginalized groups, which are used to create counter discourses and communities as a form of resistance, a way of developing solidarity and a means of establishing an alternative world view (Halliday, 1976).

Building Community. In his therapy sessions with women, Epston might begin the initial meeting with an invitation to explore the archives of the league with the purpose of beginning to "circulate his client's knowledges to others who were still trapped within the confines of particular problem lifestyles" (Madigan & Epston, 1995, p. 262). The Anti-Anorexia/Bulimia League was formed from the community of people whose documents (therapy transcriptions and correspondence with Epston) became available to others struggling with anorexia/bulimia. The word of David Epston's work began to

spread. In 1994, the Vancouver Anti-Anorexia/Bulimia League was formed when a group of people chose to work together to gather "strength in numbers" (Grieves, 1997, p. 79) against anorexia and bulimia. Those in the group began to discuss their enthusiasm towards more anti-anorexic/bulimic conversations and actions. Anti-anorexia/bulimia seemed to be a major contrast to the dominant ideas of many traditional models of treatment. The idea that anorexia/bulimia may not exist within an individual as an intrinsically disturbed part of oneself loosened up some of the shame that many individuals were experiencing. Anorexia/bulimia was examined in terms of how the problem is manufactured and promoted through the media and popular western culture. As Grieves (1997) explains, anti-anorexia/bulimia ideas provided a vehicle for returning the gaze that had been placed solely upon the individual back to the locations in society where the problem breeds:

The New Zealand League's transcripts were introduced to the anti-anorexia/bulimia group at the hospital in Vancouver and some of the women began responding. The Vancouver League began its action. As the archives increased in circulation more people found a sense of unity and camaraderie in their common experiences, struggles and victories. (p. 80)

Taking Social and Political Action. Initially, meetings of the Vancouver group took the form of discussion on ideas and personal experiences of anti-anorexia/bulimia. The

group's purpose evolved into a common goal: To take stronger action against the forces of anorexia/bulimia. What followed was the provision of a public voice in support of anti-anorexia/bulimia. Through various forums and mediums such as conferences, training sessions, high school classrooms, letter writing, and media interviews, the group began sharing their knowledge. They were spurred by the desire to nudge western culture away from glorifying, misunderstanding, and essentially condoning the existence of anorexia/bulimia. The momentum for these practices came from the pioneering work of the women of the New Zealand Anti-Anorexia/Bulimia League who shared their experiences of public protest. The group in New Zealand was successful in challenging the media networks, including television, to adjust the ways women were portrayed in advertising.

Members of the Vancouver Anti-Anorexia/Bulimia League were concerned that many professional helpers had been trained to view anorexia/bulimia in ways that were constricting of the voices of the clients and that "local," experiential knowledge of members' struggle with, and liberation from, the problem was not readily found in the helping network. What followed were concentrated efforts to publish and speak about anti-anorexia/bulimia through consultations with health professionals, presentations at academic institutions, letter writing, media interviews, and by starting a small magazine that is now called *Revive* (Grieves, 1997, p. 81). In addition, other League activities included public forums that included involvement in Eating Disorders Awareness Week; hosting an artists' forum on the issues surrounding

anorexia/bulimia; candlelight vigils to honor those lives that have been taken by the problem; responding to various media images and representations that were felt to be pro-anorexia/bulimia.

Points of Connection (Grieves, 1997) is a group formed by the Vancouver League as a strategy to "help people break anorexic/bulimic-induced isolation and disconnection" (p. 84). Points of Connection provides a space that shifts the focus from anorexia/bulimia to activities and interests for those people struggling with the effects of the problem.

Example 2. The Feminization of Poverty

Approximately 20 years ago, four colleagues started a community agency in New Zealand called the Family Centre. The type of services offered there came to be known as "Just Therapy" (Waldegrave, 1990, p. 5) for its emphasis on taking into account the gender, cultural, social, and economic context of the people seeking help. Their approach emerged out of a process of reflection on their work, a twice-yearly retreat of five days in which they analyzed their work of the previous six months and set goals for the next six months. It was at one of these retreats that they realized that many families coming to them located the onset of their problem with events that were external to the family; events like unemployment, bad housing or homelessness, racist or sexist experiences (Waldegrave, 1990, p. 6). They realized they were treating their symptoms as though they were the symptoms of family dysfunction. Their analysis informed them they were really not the symptoms of family dysfunction but the symptoms of poverty, of unjust economic planning, of racism and sexism.

A recent research project is the latest example of the transforming nature of the Family Centre's work, that is, from the stories (local knowledge) in the therapist's office, to their translation into hard data describing the oppressive effects of social policy, to the taking of collective political action to effect change. The Women and Poverty Project (Waldegrave, 1998) conducted by the Family Centre's Social Policy Research Unit is an ongoing collaborative effort with the purpose of bringing forth awareness of inefficient health services to families and transforming stories of pain into social policy influence. The research is part of the continuing study of poverty in New Zealand, some of which is reported in the New Zealand Poverty Measurement Project (Stephens & Waldegrave, 2001).

Externalizing Narratives. The voices of women describing the real effects of living in inequality, living with a sense of powerlessness, living in substandard conditions were gathered in a micro study involving focus groups. The study consisted of approximately 80 women (P. King, personal communication, August 1, 2002) who were encouraged to externalize and personify the conditions that led them to their present experience. Unfiltered voices of women described the effects of living in substandard housing and inadequate dental and health care. One woman defers treatment for four years because she is unable to afford to see a dentist, and another hasn't been in eight years. One's mother will not see a doctor until she is literally crawling around on her knees in pain. Another saves up visits by getting treatment for herself and other children when one child has an ap-

pointment in order to save the cost of each visit. There are stories shared of strategies for obtaining prescriptions at no cost and for avoiding the shame of begging for services for themselves and their children (Waldegrave, 1998).

Building Community. Focus groups of women, held in various locations and cities, provided opportunities for connection with other women with similar experiences, thus reducing the felt sense of isolation and powerlessness. The research involved eight focus groups, each comprised of between 8 and 12 women. Four groups were convened in large cities, two in small regional cities, and two in small rural towns. Three groups consisted of single women with dependent children, three of women living in partnerships with men, and two consisted of single women living alone without dependent children (P. King, personal communication, August 1, 2002). The women in these focus groups not only gave depth and understanding to the "data collection," they were, as a result, able to establish a collective voice to their plight.

Social Action and Social Justice. These women and other clients of the Centre involved themselves in public demonstrations and other media activities of protest, drawing attention to the plight of those who are being seriously disadvantaged by government policies and economic decisions. A consciousness was built over time through these actions. This was coupled with the scientific data that demonstrated the ineffectiveness of social programs and an inefficient process of health care delivery (Waldegrave, 1998). In this particular project, the Anglican and Roman Catholic Churches recently announced their

support by initiating public marches denouncing recent government budget cutbacks on services to the underprivileged. The concern of the Family Centre's staff is being able to mainstream these issues. Therapists hear these voices of pain within the isolation of closed doors. The staff no longer want to be the unwitting silencers of these voices, constrained by the politics of therapy (Waldegrave, 1998). The therapeutic community asked the questions that bring out these stories. The aim of this project was to bring awareness to the increasing feminization of poverty that is occurring in western countries.

In each of the above examples, the participants were invited to step out of their roles as clients with problems, therapists, or case-workers. Through the process of externalizing, sources of their problems were located outside of themselves and connected to the roots of their subjugation. In so doing they engaged with others in activities of common interest, including instances of collective action, cause advocacy, and the challenging of confining macro structures. Other examples of such action are available to the reader (White, C., 2000; Abels & Abels, 2001, pp. 122-125).

Implications for Education

Oppression and Liberation

Paulo Freire viewed the traditional educational process as one in which the student is a repository for knowledge deposited by an expert. The student then draws on this knowledge at a later time and is rewarded for its correct deployment (1990). One notes similarities to the idea of interiorization (Foucault, 1979). One social work student described

the process like this: "I understood... the gaze and normalizing judgments. In fact I learned very well how to listen to each professor, how to adapt to their style and how to successfully give back to them their own ideas, theories and approaches. Participating in class meant knowing the right answer" (Hardcastle, 1993, p. 184). Thus traditional educational mechanisms "might encourage participants to surrender their own 'hard won' knowledges and submit to the authority of the teacher/supervisor... and shape their 'life as therapist' according to certain specifications... fashion their lives as recruits" (White, 1990, p. 33).

Teaching as We Practice

Michael White (1990) offers a solution to this dilemma: Invite students "into experiences that parallel the experiences of those people who are the recipients [*sic*]" of this type of practice (p. 27). For some years, the authors have been exploring the use of postmodern techniques, including externalizing, in the service of facilitating the education of social work students (Vodde & Gallant, 1995). In such a scenario, a student, through the use of "relative influence" questions (White, 1989, p. 8) generated by a student partner, may be encouraged to locate exceptions to a deficit saturated evaluation of practice skills, which the student has come to see as dominating his or her practice competency. The authors have found this approach to be immensely helpful in generating a strengths-based assessment of student competency.

Similarly, a form of progressive externalization can be used with students. Individually, students may be encouraged to

externalize constraints to learning or other issues relevant to their experience. In a recent master's-level course, women engaged in externalizing the effects of being a "woman in the south." In the process of progressive externalization, they came to identify male-dominated discourses which dictated proscriptions for this account of womanhood, such as "having to care for men" and "denying personal needs and goals." As they came together in a group, they shared experiences and identified a dominant discourse of "woman" which they felt went beyond geographic locations. Among other things, they identified macro-level mechanisms which imposed penalties for rejecting these proscriptions such as divorce, custody hearings, and income disparities. Additionally, they identified some of the "traditional" discourses of education which constrained "speaking out" or "voicing" concerns. A next step would be to provide the women in this class with an opportunity to continue meeting together in order to identify preferred responses and to pursue collective activities, including opportunities to speak to other women in the program.

Such an exercise parallels the experience of clients and also offers the student the freedom of determining their own preferences while limiting the techniques of power employed in traditional classroom methods (Hardcastle, 1993). More importantly, students, like clients, may become invigorated through the personal experience of generating new ideas and collective heuristic strategies rather than undergoing the impersonal experience of repeating old ideas and imposed change strategies.

Implications for Curriculum

The simplest method of incorporating the narrative-deconstructive model involves integration. This is done through incorporation into an existing course or through the development of a completely dedicated course (Abels & Abels, 2001; Kelley, 1995; Sachs & Newdom, 1999). Both approaches have great utility in that they can be accomplished with relative ease. An integrative approach presents this model and others as offerings in a menu of approaches. Such an approach may contradict other practice models offered in the same course and may be incongruent with material in traditional HBSE and Research courses as well as problematic in a field application (Abels & Abels, 2001).

Ideally, a context for narrative-deconstructive practice must be established through the dissemination of a congruent theoretical base, research methods that fit with the practice model, as well as practicum sites that support this form of practice. Although it is beyond the scope of this paper to articulate a well-developed alternative curriculum, there are implications for the curriculum areas mentioned above.

Implications for HBSE

Others have discussed the development of HBSE courses influenced by constructivism and postmodern ideas (Fleck-Henderson, 1993; Saleebey, 1993). In particular they have focused on that element of postmodern thought that allows one to critically appraise theories, assumptions, and claims to truth. In relation to social work practice, every discourse, be it a specific theory or a broad orientation like human behavior, calls the

practitioner or student into a particular way of being, or a position, with clients. This involves not only a constructed understanding of those clients but an understanding of "how to go on" (Drewery & Windslade, 1997, p. 39) or "the rules of the game" (p. 39). The ideas of Foucault and White have been found particularly useful in revealing these "positions calls" (p. 39) in relation to power differentials and the objectification of clients. Such a form of discourse analysis could be useful in evaluating the position calls of all theories and practice models offered. The purpose would not be the subjugation of all other theories and practice models but an end in which students could, in an informed way, set their own preferences about "how to be" with clients.

Most significant, an element of theory and human behavior stressed within this model is the relationship of micro level behavior to macro level activity. Of particular importance is an understanding of the impact of macro level discourses and social forces on local activity and personal agency; specifically the organization of power and objectification (Foucault, 1994).

Implications for Research

Research congruent with this approach would likely strive to reduce or redress the subject-object disparity in traditional forms of research. Rather than methodologies which stress the "separation of the observer from the observed" (Kaye, 1990, p. 31), research methodology would emphasize collaboration and client participation. Epston (1999) notes that collaborative practices among clients and clinicians unite a research methodology with the "co-production of knowledge by sufferers

and therapists" (p. 142). In such instances, qualitative understanding may be as prominent as quantitative understanding.

Shifts in research emphasis have led to the development of models such as "intervention design and development" (Thomas & Rothman, 1994, p. 5) wherein the research goal is not traditional testing of hypotheses but perhaps problem resolution. The focus of such research is generated collaboratively by those with first-hand experience of the problem such as consumers and local residents. The impetus for such research may not be the generation of new knowledge but consumer needs and demands. If the goal of research is to change the problematic conditions of client groups, then research becomes a form of social action (Witkin, 1993). Nowhere is this more evident than in participatory action research (PAR) which is both collaborative and oriented toward social transformation (Healy, 2001). PAR also is influenced by the ideas of Freire (Healy, 2001). PAR focuses on transforming oppressive macro structures at local sites, advocates egalitarian relationships among all participants, and has the goal of people taking back control of their lives (Healy, 2001). It combines research goals (answering specific research questions) with action goals (empowerment outcomes and forms of social transformation, Healy, 2001; McNicoll, 1999). Action goals may take specific forms such as "social inclusion, local participation and improved service user participation in design and delivery of services" (Healy, 2001, p. 99). These elements are salient in the two case examples above.

Evaluation in this context is no longer confined to the measurement of individual

client outcomes, but combines the measurement of collective client preferences, often in the form of impact assessment on legislation, local policies, agency programs, policies, and procedures. Here, attention is directed away from the boundaries of researcher and subject as well as between practice evaluation and program or larger scale evaluation to the inter-relatedness of the participants and procedures.

Implications for Field

Agencies vary in their commitment to social justice, and field instructors vary in their degree of commitment as well as familiarity with the model (Abels & Abels, 2001). Thus it would be capricious and harmful to encourage student application in an environment that does not support it. It is strongly suggested that prototypical placements be developed for this unified model. It has been the authors' experience that field agencies with a high level of commitment to social justice, such as shelters for the homeless or victims of domestic violence, are more natural venues for this unified model. Likewise, it is helpful for students to have field instructors who are oriented toward the pursuance of social justice and are more familiar with the narrative-deconstructive model. We believe that enacting this model in the field may require a different emphasis in the training of field instructors, perhaps using a progressive externalization methodology with groups of field instructors from promising agencies in order to more specifically identify or problematize issues in facilitating collective client empowerment. This might also aid in building a community of resistance among those field instructors.

Implications for Educators

It is the authors' estimation that the curriculum additions and instructional methods suggested above invite social work educators into a less traditional and more liberatory position with students. A liberatory approach to education is in keeping with the ideas of Freire and the postmodern thought described herein (Roche et al., 1999). It envisions the instructor's position as a dialogic participant, facilitating the migration of students into a community of questioners with a common value base and a distaste for oppressive power differentials. It signals a shift "in viewing knowledge as a product to knowing as a process" (Weick, 1993, p. 18). This distinction demands that ownership of knowledge products, such as micro and macro, become deemphasized and processes connecting such products become central. Perhaps a crucial step in that direction is the development of an ongoing dialogue among those educators of micro and macro courses who wish to dissolve such boundaries.

Allegiance to the model described above demands that the educator unite the very small with the very large; not only in relation to content but pedagogically as well. Specifically, the educator needs to be sensitive to the position calls she or he endorses in micro-encounters with students and how they relate to the larger issues of knowledge and power in relation to both education and practice. "The form that social work curricula and pedagogy take lies in the underlying assumptions we make about social work practice" (Roche et al., 1999, p. 22). Students have noted the confusion that arises from the disparity between instructional methods and espoused

practice (Hardcastle, 1993). If we have expectations that the future practice of our students will facilitate client empowerment, then we must expect our present instructional content and methods to facilitate student empowerment.

Conclusion

Weick (1993) has identified the need in social work education for the existence of a practice approach "which is explicitly value-based rather than method-based" (p. 25). One finds in the narrative-deconstructive practice model an approach that is simultaneously value-based and method-based; an approach that embodies the strengths perspective and extends it further into the realm of social justice. Changes in the practice environment, such as managed care, privatization, and increasing specialization, have placed limits on the degree and type of change clients may undertake. A concern is that narrow clinical models could unintentionally encourage clients to become better prisoners in poorer jails. In the model presented above, clients oppressed by problems relocate those problems at the roots of their oppression. They are aided in connecting with other clients in similar situations and then choose their own course of action. Herein empowerment becomes a naturally occurring process as clients identify external constraints as well as the social roots of their problems and collectively choose and enact alternate preferences.

It is the authors' contention that the compartmentalization of social justice, social action, and larger scale social change in much of social work education has limited its usefulness for those engaged in direct practice.

Historically, social work practice and education have presented constructs regarding multilevel practice in ways that may have inadvertently supported the constructed distinctions between these levels and may actually serve to maintain systems of oppression (Sachs & Newdom, 1999). It is our belief that practice models such as the one presented above are useful in deconstructing those distinctions and integrating social work practice as a unified whole. To that end, the authors have presented an overview of a narrative-deconstructive practice model, exemplified by the work of White and Epston. Specifically, the authors have attempted to focus on those particular elements of the model that unite direct practice with methods of larger social change and the attainment of social justice. It is our belief that social work educators, like other social work practitioners, continue to search for more effective means to incarnate the diverse purposes of social work and social work values in social work practice, wherein fragmentation of education and practice is not a consequence. It is our hope that the elements of practice presented above will be considered as another alternative in the quest for unified practice.

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Accepted: 8/02.

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The authors thank Joan Laird for her encouraging comments and the editor and reviewers of this article for their insightful and helpful suggestions.

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