

***SOCIAL POLICY***

***AND***

***SOCIAL WORK***

***IN TRANSITION***

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**SPECIAL ISSUE:**

## ***Transition through perspectives of social policy and social work***

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### **EDITORIAL**

#### ***Welcome***

Welcome to the Journal of Social Policy and Social Work in Transition. We are very excited by the launch of this new journal and the opportunity it will give for increased knowledge about social work and social policy in eastern Europe and, we hope, to help to shape the development and direction of these disciplines.

First, we would like to acknowledge the support from the European Union Tempus programme. This journal is one of six major projects of a larger programme (details of which are presented in the article by Lucas) to develop, support and sustain social work education across six European countries.

Why have we established this journal and what are our hopes? In short, why do we need this journal? Perhaps we can begin to answer these questions by first considering the journal's roots. It has a dual parentage - Georgia and Ukraine, each equal partners in the journal's genesis. These two countries share an experience of transition from one social system to another, with all the consequent social, economic

and geo-political stresses. They share the experience of many decades of life within the union of soviets and of the subsequent breakdown of those particular certainties, including an inheritance of an uncertain relationship with their common neighbour, Russia. The repercussions of the momentous events of the early 1990s continue to ripple down the years with tremendous consequences, giving birth to the social work profession in these countries and impacting on the development of social policy.

In addition to the experiences that unite Georgia and Ukraine there are, of course, also considerable differences - in size and population, and also in their histories since the soviet system collapsed. In terms of social work, Ukraine developed its first educational programmes in the mid-1990s, whilst it was a full ten years later before Georgia's first social work programme. However, both countries have sizeable communities that are ambivalent or hostile to the changes, who see themselves dispossessed as a result - be they generational (older people), ethnic (such as Russian communities in Ukraine) or regional communities (such as Abkhazia). This dissent provides social policy makers and social workers with tremendous challenges, as do the more subtle differences of opinion as to what the post-soviet settlement should look like.

So, the journal's local focus is on the development of social policy and social work in these two countries at a time of immense change. However, the journal aims to attract the attention of a wider audience - both to speak to that large stage and also to publish articles from the wider world. In addition to our aim of supporting the development of Georgian and Ukrainian social work and social policy, the journal is open to articles from a wide variety of contributors, not just from other countries in eastern Europe, but also beyond. As we will explore below, the notion of transition has considerable resonance outside Georgia, Ukraine and eastern Europe.

## **Transition**

A journal needs an intellectual location as well as a geographical one. The cornerstone of the journal is the idea and reality of *transition*. 'Transition' has become the short-hand, catch-all word for the experience of the period of enormous change that arose when the realities of the cold war and the east-west hostilities broke down. This was not just a question of regime change, but the ending of a deep and long-standing ideological conflict and the transition from one system of thought and social organisation to another. Transition is a process not an event. It is continuing and, although we know what we are moving from (the collapse of the soviet system) we are not clear about what we are transitioning towards. Managing the uncertainty of these changes, and the uncertainty that surrounds the future, makes social policy and social work all the more important at this time.

Transition is something we all experience as individuals; for example, the profound transition from childhood to adulthood. It is a notion that we are, therefore, personally acquainted with. Although the word has become closely associated with the period since the collapse of the soviet system in eastern Europe and Russia, it is a concept that we can transfer across borders and time. For example as a profession, social work is in a profound state of transition in the United Kingdom; in precisely the same period of time as the political transition in eastern Europe, social work has made a transition in the UK from a generalist practice in departments dedicated to social work (Social Services Departments) to a much more fragmented and highly specialised profession in which most social workers are now employed in settings in which social work is not the primary activity.

Of course, the scale of these various transitions varies considerably, but the *idea* of transition is one that has a

very broad application and we invite contributors from far and wide to present their own perspectives on transition. It is the guiding principle of the journal and, by considering the notion of transition in many different contexts, we aim to understand it better and to use this understanding to influence transitions positively.

## **Language**

We have laid out our stall as a journal and we have expressed a desire to appeal to authors and commentators not just from Georgia, Ukraine and eastern Europe, but also from the wider world stage. We have seen that transition has resonance in many different contexts, such as South Africa, but also in countries like the United Kingdom that outwardly appear to exemplify continuity and yet, nevertheless, are experiencing radical and continuing change in the idea of 'social work', and where ideas of social policy are continually contested.

In order that all of these voices can be heard and understood we need a *lingua franca* and, in the early twenty-first century, that means the medium of the English language. We recognise that this privileges those who speak English as a first language and those who are fluent in English, but the Editorial Board see this as an inevitable consequence of the need to be able to communicate amongst as wide an audience as possible. As a journal we will do all that we can, within reason, to assist those for whom English does not come easily and yet who have important messages that they wish to communicate via the pages of this journal. UK and US versions of English will both be used depending on the preference of the author of any particular article.



## SOCIAL POLICY AND SOCIAL WORK IN TRANSITION

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### Mission Statement

This journal is dedicated to issues in social policy and social work that reflect transition processes and other broad reflections of social phenomena. The journal's 'home base' is eastern Europe, though articles from a wide range of countries is encouraged as part of our mission to articulate international and cross-national issues in social policy and social work.

The journal is sponsored by the European Union Tempus Programme, as part of a programme of projects entitled 'Advancing the Three Cycle Social Work Education System in Six European Countries' (ACES). This programme has launched the journal with the aim of creating a self-sustaining journal beyond the completion of the programme in 2012.

We aim to publish a broad range of articles that cover research, academic development of social policy and social work, and best practices in service provision and other applied issues. Our guiding principle is that of the significance of transition, with particular reference to the impact of transition on social phenomena in eastern Europe.

## IN THIS FIRST ISSUE

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The theme of this first issue is, indeed, transition through different perspectives on social policy and social work. We have five articles in this first issue of the journal.

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**LUCAS** presents the work of a European Union- funded programme, Advancing the three-cycle system of social work education in six European countries ('ACES') which has provided the funding for this new journal. She introduces the six projects within the programme, the

overall aims and hopes for ACES and progress so far. In particular, the programme is set in the wider context of technical aid programmes and the relationships between partners who have considerably different histories and social paradigms.

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**KACHKACHISHVILI** reports on significant research into the impact of the assistance provided to children and households with children in Georgia. He presents the details of the various schemes that have been created with the aim of ameliorating the situations in which these children and their families find themselves. Poverty is not a new phenomenon in Georgia, but the transitional period from soviet to post-soviet times has exacerbated the problem. The article reports on the findings from interviews with a cross-section of recipients of the various aid schemes to help us understand how or whether

they are working and what problems there might be with the schemes. The article introduces us to wide-ranging problems with the schemes, in terms of their stated aims, and in particular the devastating impact of the lack of employment opportunities as a major cause of the poverty which undermines these families' abilities to cope. The development of day centre facilities is a shining light in the general shadows of these findings, with a recommendation that policy-makers extend the provision of day centres for childcare throughout Georgia.

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**LEINO** discusses transitions in meanings, using the concept of solidarity as an example. She traces the meaning of the word from soviet to present times and presents the findings from a fascinating study she conducted with students at Tallinn

University, Estonia. In particular, Leino asserts that to show solidarity one has to have empathy and she stresses the importance of personal narratives in helping people to come to their own understanding of a term like 'solidarity' and also social

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construction of these narratives, especially the transitions that occur from generation to generation, and particularly when there have been

massive social changes, so that one generation grew up in a socialist system and the next with a neo-liberal one.

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**ZAVIRŠEK** explores the process of creating a joint international doctoral programme (*indosow*, International Doctoral Studies in Social Work), describing it as ‘an exciting journey as well as a long and difficult negotiating process.’ She notes how the mindset that emphasises the exclusiveness of university sectors in some countries, such as Germany, results in social work’s marginalisation outside of academia; also, where there is a charity-based definition of social work closely identified with Christian ideology there is perhaps an ideology

that views ‘helping the needy’ as more important than academic training and critical research. Zaviršek highlights the tension between the need to lift social work’s profile (by embedding the third cycle of education, PhDs, in universities) and the risks of making social work more academic and, therefore, loosening the professional and practice perspectives. She makes a plea for social work doctoral research to be motivated by a desire of social change, social justice and lessening inequalities and discrimination.

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**SEMIGINA** considers the impact of HIV-AIDS in relation to transition to post-soviet societies, specifically the Ukraine. She presents the findings from a study which has been conducted in Kyiv, Odessa and L’viv. The research identifies impediments to local and national coordination of efforts as well as the obstacles that people face at a personal and organisational level - mainly stigma and discrimination. The activities of the Global Fund are evaluated as beneficial, not just in the field

of HIV-AIDS but also towards the development of civil society more generally. Nevertheless, there are problems because the present health care system in Ukraine has not undergone the necessary transition from a soviet-style to one that is expected to be more response to and built around the people who use it. Semigina concludes with important recommendations for recipients of funding, government and service providers.

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On behalf of my co-editors and the full editorial board, I hope you enjoy this first issue of the journal and look forward to receiving your contributions to future issues (please see the Calls for Papers included in this issue).

**MARK DOEL**  
co-Editor

# INTRODUCING THE EDITORIAL BOARD

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## Editors

**Professor MARK DOEL**, PhD, MA (Oxon), CQSW, Research Professor of Social Work, Sheffield Hallam University (UK), co-Editor. Mark Doel is a registered social worker with 20 years' practice experience in the UK and the US. His research expertise is in qualitative methods and his spheres of interest are practice education, social work practice interventions and methods (especially groupwork), the involvement of service

users, and international social work. He is widely published and his latest book is *Social Work Placements: a travellers' guide*, (Routledge (London)). Professor Doel is co-Director of the MSW at Tbilisi State University, he co-edits *Groupwork* journal (Whiting and Birch) and he is the Project Director for the EU-Tempus project, *Advancing the three-cycle system of social work education in six European countries* (ACES).

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**Professor IAGO KACHKACHISHVILI**, PhD, Professor of Sociology, Head of the Department of Sociology and Social Work, Faculty of Social and Political Sciences, Tbilisi State University (Georgia), co-Editor. Iago Kachkachishvili leads courses on Contemporary and Post-modern Social Theories as well as Methods of Social Research. He conducts various research projects concerning the problems of education policy, ethnicity, social protection and inclusion,

HIV/AIDS, safe sex and reproductive health. Iago Kachkachishvili has been involved in the development of social work education in Georgia since 2005 and is in charge of administering social work study programme at TSU. He is the Project Coordinator for an EU-Tempus project in Georgia, *Advancing the three-cycle system of social work education in six European countries* (ACES). He is also the Head of the NGO 'Institute of Social Studies and Analysis' (ISSA).

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**Dr TETYANA SEMIGINA**, PhD, MSW, Associate Professor, School of Social Work, National University 'Kyiv-Mohyla Academy' (Ukraine), co-Editor. Tetyana Semigina teaches courses on Community Work, History and Philosophy of Social Work,

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Family, Deviant Behavior, Statistics, and Sociology of Death and Dying. He taught abroad in Hungary, Croatia and Ukraine. He received Fulbright Fellowships twice and served as a CEP lecturer once. He lectured for three years in the Social Work program at UKMA in Kyiv.

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**Professor NADIYA KABACHENKO**, PhD, Head of the School of Social Work, National University of Kyiv-Mohyla Academy. Her spheres of interest are social work with homeless people, gerontological social work

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**Professor GIEDRE KVIESKIENE**, PhD, Professor of Education in Vilnius Pedagogical University (Lithuania). Giedrė Kviškienė is an expert in social policy, with a focus on child welfare and positive socialization. Her research interests relate in particular to crime prevention and rehabilitation. She is the Project Coordinator for an EU-Tempus project in Lithuania, *Advancing the three-cycle system of social work education in six European countries* (ACES). Prof Kviškienė was the member of the

European Consul program, based on research on policies and practices teaching sociocultural diversity (2006-2009). She is also the Director of the Social Communication Institute in Vilnius Pedagogical University and Lithuanian CIVITAS International coordinator in the “CIVITAS INTERNATIONAL” world network. She is a member of a Socrates project, *New Modules of Activism in European Social Work* and creator of a module on Cultural Diversity and Migration.

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**Professor LAURI LEPPIK**, PhD, Professor of Social Policy, Tallinn University (Estonia), Lauri Leppik is an expert in social policy, with focus on social security policy. His research interests relate in particular to the adequacy and sustainability of social security schemes, disability policy and European social policy. He is a

member of the European Committee of Social Rights, a committee of independent experts to supervise the application of the European Social Charter. He is also a Director of the Institute of Social Work at Tallinn University and a Head of the Social Work PhD program at the Institute.

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**Dr BOGDAN LEŠNIK**, Associate Professor at the Faculty of Social Work, University of Ljubljana, Dean of the Faculty, and Editor of journal 'Socialno delo'. His particular expertise is psychoanalysis (he is also the President of the Psychoanalytical Society of Slovenia) and group analysis. His latest publication is *Founda-*

*tions of Psychoanalysis: Notes to the Concepts* (Založba I\*cf., Ljubljana). Bogdan Lešnik's fields of interest include epistemology and social work in emergency situations. He is also involved in several international academic and developmental projects.

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**Professor JONATHAN PARKER** is the Associate Dean of Social and Community Work and Director of the Centre for Social Work and Social Policy at Bournemouth University. He moved to Bournemouth in 2006 after 11 years at the University of Hull where he was one of the founders and director of the Family Assessment and Support Unit, a practice placement agency attached to the University, and latterly Head of Department of Social Work. Jonathan has practised in a wide variety of Social Work posts with people with Learning Disabilities, as a hospital Social Worker, in a generic field work team

before specialising with people with dementia and as an Approved Social Worker (mental health). Jonathan's research projects focus on practice learning, workforce planning, theories and methods in Social Work, and dementia care. He is currently conducting cross cultural research on learning and practice with colleagues in Southeast Asia. He has published widely, including sixteen books and numerous academic papers. Jonathan is the co-editor of the highly successful series of Social Work text books *Transforming Social Work Practice* and editor of the *Journal of Practice Teaching and Learning*.

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**Professor DARJA ZAVIRŠEK**, PhD, Professor of social work and the Chair of the Department for research of social justice and inclusion at the University of Ljubljana, Faculty of Social Work and the chair of the Indosow - International Doctoral Studies in Social Work. Since 2002 she is honorary professor of the University of Applied Sciences Alice Salomon, Berlin. She has established the Eastern European Sub-Regional Association of the Eastern European Schools of Social Work as part of the IASSW. She serves the IASSW since 2003, currently as the member at large and the chair of the International Small

Projects Committee. She writes on gender, disability, ethnicity and history of social work and was the co-editor of the following book in the last years: Sustainable Development in Social Work: the Case of a Regional Network in the Balkans (2005), History of Social Work. Between social movements and political systems (2006), Women and Citizenship in Central and Eastern Europe (2006), Ethnicity in Eastern Europe: A Challenge for Social Work Education (2007). Currently she is researching social parenthood in different societies.

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***THE ‘ACES’<sup>1</sup> PROGRAMME: SUPPORTING THE  
CONTINUED DEVELOPMENT OF SOCIAL WORK  
EDUCATION IN GEORGIA AND UKRAINE***

**Abstract**

This article describes the history and design of the ACES project in the context of the development of social work education and the profession in Georgia and Ukraine. It discusses the impact of the different histories and the responses from the relevant Ministries to the development of the profession. The different definitions of social work are noted. The article also looks at the impact of the structure of Tempus funding and the delegation of responsibilities to partner institutions. It illustrates why it is impossible to transfer learning from one country to another and why they have to be adapted to suit each specific situation to be of any value.

**Key words:**

social work education; international social work; Bologna; higher education; regionalisation

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<sup>1</sup> Advancing the three-cycle system in social work education in six European countries.



## **The ACES programme**

Social work education is developing fast in Georgia and Ukraine. In January 2009 a new programme, entitled ACES began, with the primary objective of developing a social work PhD programme in both countries. In addition the project will be working on the regionalisation of social work education, the development of a common module on International Social Work, the establishment of a peer-reviewed journal, and the development of a jointly accredited Masters in social work studies programme.

ACES (Advancing the three cycle system in social work education in six European Countries) is funded by the EU TEMPUS programme which is designed to support the development of higher education. In particular, the programme supports the implementation of the Bologna process - thus the focus of the ACES programme on PhD programmes (both universities have Bachelors and Masters level courses) and on regionalisation. This will complete what is known as the 'Three Cycle System' of higher education.

The growth of the EU has meant that the consortia running these projects have also had to expand from the previous minimum of three partners to a new minimum of 5. This creates the potential for some very complex relationships and requires clarity as to whether all the partners involved have similar roles and responsibilities. The ACES project design was based on two assumptions. The first that all the partners would have an equal share of responsibility and consequently a share of the budget, notwithstanding the specific responsibilities of the lead partner, Sheffield Hallam University (UK). So, responsibility for the six programme objectives is delegated through the creation of six Project Working Groups, with one partner institution leading each of the groups. The second assumption was that involving all six institutions in all the programme activities

would make for an over-complex design, thus each Project Working Group involves three of the potential six partners. The six partners meet at the Programme Management Team meeting twice a year to review the activities and ensure the quality of the work developed. The programme also builds on a history of institutional relationships between the six partner Universities. This history of working together successfully is a key factor in the success of these projects, as time does not have to be spent on building relationships and establishing trust, and energy can be focussed on achieving the programme objectives. This complex partnership requires a considerable degree of trust and flexibility from all concerned and this history of previous working relationships is one way of building that in at the beginning. As Doel and Penn (2007) note 'true exchange of learning requires a receptiveness by all partners to learn from unplanned situations, to re-cast what might be considered culturally insensitive or misaligned activities as opportunities for mutual learning'. This project design and implementation strategy is based on those assumptions and all the project management meetings are structured in a way that should support this receptivity and flexibility.'

The partners are: Sheffield Hallam University (SHU), UK (lead partner); the Tbilisi State University (TSU), Georgia; National University "Kiev Mohyla Academy" (UKMA), Ukraine; University of Ljubljana (ULS), Slovenia; Tallinn University (TUE), Estonia; and Vilnius Pedagogical University (VPU), Lithuania. The team from Sheffield Hallam have worked with the team from Ljubljana in Ukraine and Georgia, and they have an existing Erasmus partnership with Lithuania, so students are on placements in both countries. Tbilisi State University and Tallinn have established an institutional partnership through joint summer schools and other activities. Some of the team members have established professional relationships and some of the institutions have historical relationships. Because of the scale of this project - six major objectives to be achieved and six countries involved - there are a number of individual team members from each

institution and this serves to strengthen the consortium and to increase the range of skills and experience available across all the objectives.

Healy (2001) notes that there seem to be three patterns in the development of social work:

'Social work evolving in the United States and much of Europe as an indigenous response to the conditions of late 19th -century life, and social work being introduced into countries in Asia and Africa by American and European experts to address the problems of "underdevelopment" A third.... Is the introduction or reintroduction, of modern social work in the countries of the former Soviet Union and Eastern bloc, including Russia, the nations of Eastern Europe, China and Vietnam; this process has also involved substantial foreign influence'.

The ACES project sits within this third pattern supporting the development of social work education with input from four other countries in Europe, though at least in Georgia the state seems to be recognising the need for this profession to address the 'conditions of life' in times of economic transition, though it is impossible to know if the government would have invested in the development of this education without international support.

### **The development of social work education in Ukraine and Georgia to date**

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The process of development in Ukraine and Georgia has been quite different. The first School of Social Work in Ukraine was opened at the National University "Kiev Mohyla Academy" in 1995 (also funded by a Tempus project) and by 2009 there are over 20 different social work courses in different institutions across the country. There is no common national agreement about what should be included in social work curricula and so

the syllabi differ quite radically. The majority offer language teaching and many include courses like social business and marketing as well as more conventional social work subjects. There is a growing social work literature in Ukrainian and many have access to the resources available in Russian as well. There are few jobs for social workers in the state sector and few with any modern social work education are employed in the relevant Ministries, as champions of professional social work. One of the consequences of this is that the Ministry of Labour and Social Policy seems to view social work as little more than what in the UK would be called domiciliary care. While this service is clearly of immense value to those who receive it (mainly older people and those with disabilities living at home), it does not encompass the range of services that social work can offer and does not require a university level education of its practitioners.

The School of Social Work took a decision early in its development to work more closely with NGO's (non-governmental organisations) and focus on the development of the skills of the staff working in that sector. This was a response to the lack of interest shown at the time by the Ministry of Education and Science, as well as Ministry of Health, Ministry of Labour and Social Policy, Ministry in Affairs of Family, Youth and Sport in the development of social work as a profession. As a consequence a wide range of services are now provided from within the NGO sector by staff, many of whom have some basic social work training. Many of the graduates from UKMA are employed in INGO's (international NGOs) and many have left social work altogether and are employed in human resources, marketing and other professions. There are no national standards pertaining to social work education and no state recognition of the profession. Social work is in the list of professions but the meaning is seen to be that of domiciliary care rather than the international definition social work.

The Ministry of Education and Science is requiring all universities to go through a re-accreditation process of both Bachelors and

Masters level social work courses and this may have some impact on the situation. The concern is that the impact will be negative in the sense that the term social work will be linked solely to domiciliary care and the full professional role will not be acknowledged and the need for academic education undermined. The ACES programme team is supporting the establishment of a Task Force which will work with the Ministry to ensure that social work education is properly defined and recognised.

Academic social work education in Georgia began in 2004 with the implementation of the ESWEG Project (Establishing Social Work Education in Georgia), also funded by Tempus and implemented by a consortium led by Sheffield Hallam University in partnership with Ljubljana and Tbilisi Universities and the Georgian Association of Social Workers (GASW). This programme carried on the work initiated by many local and international NGOs who had been offering social work skills training in a variety of contexts and it reflected the need felt by NGOs to employ social workers. The project also benefited immensely from the OSI (Open Society Institute) programme supporting people to spend two years in the US completing an MSW. By the time the ACES programme began, some 12 people had completed this education and all had returned to Georgia. All of the participants in this OSI programme are now actively involved in GASW, in the development of social work as a profession in Georgia and in the implementation of these two projects and teaching at the Department of social work. The focus of the ESWEG and later the ACES programme has been on institutionalising education programmes within the University, and the profession within the relevant Ministries. Social work has been in the domain of the Ministry of Education, as they have been responsible for the programme de-institutionalising children's services, closing the boarding schools and residential homes, but it has just recently, (2009) moved back into the Ministry of Health Employment and Social Welfare. A task of the team involved in the ACES programme is

to support GASW in ensuring that the profession of social work is recognised and that standards for education and regulation are accepted nationally. To date the government has been sympathetic to the development of the new profession and supported the introduction of Family Centres across the country, where professional social workers are employed. However, recent events seem to suggest that this commitment is shifting and they too may be looking at de-professionalising social work through developing staff involved in domiciliary care and those known as 'social agents', whose current responsibilities are to assess people's entitlement to pensions and benefits. There is a suggestion that this role might be developed to include working with families.

Doel and Penn (2007) note that social work education in Russia went through a similarly rapid growth. While it has had a relatively brief existence with the first courses being established only in 1995, within 12 years there were some 150 across the country. In contrast the growth of social work education in Poland for example followed quite a different pattern. Pawelek (2006/7) noted that the first Study Centre for social work was established at the Polish Free University in Warsaw in 1925 that it was treated as a 'superficial activity' during the communist times and then in 1966 the first Social Work schools were established. Bujnowicz (2000) noted that between 1966 and 2000 some 15 schools of social work were established in Poland. During this time the political context was unstable, the name of the college changed four times and the Ministry to which it was attached changed twice. She goes on to state that it was not 'until colleges educating social workers were taken over by the Ministry of Work and Social Policy, (in 1993,) that legal foundations were laid for designing and implanting a modern teaching programme for the social work profession'. (p131). As in Ukraine and Lithuania there are unclear boundaries between social work and social pedagogy, Indeed in the ACES project the Lithuanian partner is the Vilnius Pedagogical University. It is not in the remit of this

article to delve into the debate about the relationship between these two professions, merely to recognise that there is one.

The recognition of social work as a profession differs widely between all the six countries in this partnership as is indicated by these different histories. Healey (2001) suggests that this has been problematic since the birth of social work as a profession and across the world.

## **Definitions of social work**

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The International Federation of Social Workers definition of social work, adopted in 2000, is:

*'The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well being. Utilising theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.'* (IFSW website 2009).

The Georgian Association of Social Work (GASW) adopted the following definition in 2006;

*'Social work is a profession, that assists/supports the elevation of the social functioning of individuals, groups and society and aims at the development of an environment that enables the full realisation of the potential of individuals, groups and sociality.'* (GASW, 2006, personal communication Oct 2009).

Law of Ukraine 'On social work with children and youth' contains the following definition:

*'Social work is 'the activities aimed to create social conditions for vital activities, harmonious all-round development of children*

*and youth, protection of their constitutional rights, freedoms and legitimate interests, satisfaction of their cultural and spiritual needs’.*

*www.rada.gov.ua*

There is no parallel definition for working with adults in Ukraine as this is yet to be properly recognised as a professional activity.

Pawelek (2006/2007) quotes Wodz’s research suggesting that the definition used in Poland ‘assumes that it is a specific kind of profession whose basic task refer to overcoming negative effects of the free market economy and flaws of democratic institutions as well as results of the weakening of community bonds based on the principles of solidarity and reciprocation of services and benefits’.

It is notable that none of these national definitions contain the notion of social justice or encourage social action or empowerment as an integral part of social work. Equally, none formally recognise the theoretical, scientific basis of the body of knowledge underpinning the profession.

Lorenz (1994) when looking at the development of social work across a changing Europe suggests that social work has to ‘start from the person as an active, creative subject if change in the direction of stability and identity is to be achieved, both in the individual person and in the wider society’ (p.174).

Whatever the difference illustrated by this range of definitions the ACES project is committed to the development of social work education that as Midgley (2001) suggests ‘respects the differences and develops indigenous forms of social work practice that address local cultural, economic and social realities” (p32). Thus curricula for each course will be developed and taught by local colleagues, with input from other team members only on a special ‘invited lecturer’ basis. The development of



the International Social Work Module, described in more detail below will be a collective activity and will use case materials developed by each partner in the consortium.

## **PhD in social work**

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The development of a PhD programme in social work is important for two reasons. First, in Georgia, staff can only be recruited to teach on either the Bachelors or the Masters programme if they are registered on, or have completed, a PhD. Thus, if the Department and the curriculum are to become sustainable and shift from a reliance on international teaching there must be a stream of local academics with a PhD in social work who can join the faculty as the programmes grow in popularity.

Secondly, social work research forms the basis of many social policy developments both in the field of service provision and in the development of the academic base of the profession. It is recognised that the Soviet education system did not encourage qualitative research and the skills for both this and the wider range of quantitative research methods were not well developed. The PhD programme will therefore support the development of a scientific knowledge base on which social work can grow in each country and will also increase the academic standing of the profession.

The ACES programme is offering TSU input from TUE which has its own PhD, as well as being involved in a number of international research networks. ULS will be working with UKMA to support the development of the PhD programme as part of the new Post Graduate School in that University. Ljubljana has extensive experience as part of an international PhD network and also offers an internal programme. There will be additional training in

qualitative methods as well as social work research and analysis for students and staff of both universities. SHU will be offering additional input in terms of supervision and mentoring of PhD students once they are recruited to the new programmes.

There are already a number of known applicants for each programme so we do not anticipate problems with filling the allocated places for the first couple of years. Once the PhD and the profession become more established and more students have completed Masters programmes locally the demand is likely only to grow for these places. The significant issue for the students taking part is whether the programme will be accessible to those already working or whether it can only be a full-time academic programme. In UKMA it is clear that the only route initially will be as a full-time student and it is likely that the same will be true in Georgia.

## **Regionalisation of social work education**

The Bologna process encourages the development of higher education away from the capital cities and so the ACES programme is working to support the introduction of a Masters in Social Work in Uzhhorod in western Ukraine and the introduction of new Certificate programme in Batumi State University in western Georgia. It is critically important that people across these countries have access to good quality professional social work education if the profession is to develop nationally and citizens' rights are to be protected effectively. Thus the introduction of educational programme in centres away from the capital is an important step in this development.

The University in Uzhhorod already has a thriving Bachelors level social work programme, which has been established since the late 90's; again with the support of Tempus funding, and they have a good social laboratory and other resources. Under the

soviet system they were running a Postgraduate Specialisation in social work and this will form the basis of the new Masters programme. UKMA has been running a Masters programme since 1995 and, along with input from VPU and ULS, the team in Uzhhorod will be well resourced to develop and teach a new high quality curriculum that will be comparable to European courses.

In Georgia there is no social work education beyond that now offered by Tbilisi State University and a Masters level programme in Chavchavadze University. When the ESWEQ programme opened it was clear that there are many people working in NGOs and INGOs, and some in the state services, who are practising as social workers and wanted some kind of theoretical education to back up the skills they had developed. As part of that initial programme the team developed a Certificate in Social Work which was designed to meet these needs, to provide an interim qualification which honoured the input of people already working and filled the gap whilst the first cohort of professionally trained social workers came on stream. The first group of Bachelors social workers will graduate in 2012 and the Certificate will then either be phased out or will become more of a vocational qualification for those unable to complete a university level qualification. Demand for this course has been far larger than predicted and the Government has introduced a new group of staff, social agents, who are also eligible for such training.

Equally, there has been a huge demand for staff with these skills from the Georgian probation service and the Ministry of Justice, as well as organisations like the Ombudsman. The Certificate is awarded by the University and recognised as a qualification by the Ministry of Education. The Georgian state has also invested heavily in the de-institutionalisation of child care services and the development of a child welfare system. Thus, there were staff who had received training in social work with children and families, courtesy of Everychild, and are employed in Family

Centres established in several regions of Georgia. There was no equivalent training for working with other client groups and so these staff were encouraged to join the Certificate programme to ensure their qualification was recognised more widely. Students travelled from all over Georgia to participate in this part-time course and so it was decided to support the development of a regional centre for social work education with Batumi University in the West of the country; TSU will then be the main centre for the east of the country. With the support of input from UKMA and VPU the team at TSU are focussing on developing the capacity of staff at Batumi to enable them to deliver the first Certificate programme in 2011.

### **Journal of Social Policy and Social Work in Transition**

The development of a PhD programme to an extent relies on the opportunity for publishing research outcomes nationally and internationally. Thus the ACES programme decided to support the initiation of a new peer-reviewed journal with a particular focus on social policy and social work in transition. All the consortium partners involved are represented on the Editorial Board with the addition of colleagues from outside to ensure a breadth of expertise. The journal will be published in Georgia, it will be available in all the six partner countries. There will be two issues a year, with a view to developing theme-based issues.

### **A common module in International Social Work**

The original plan was that a module in International social work (ISW) would be developed that could be taught in all six partner universities, with the possibility of students and staff travelling between the partners to participate in the learning and teaching process. However, resources were not sufficient to enable this to happen fully and when the Project Working Group

began to look at the practicalities of implementing this idea it became apparent that the differences in internal accreditation and validation systems meant this would not be feasible. The solution will be to develop a common core, or capsule, for a module that can then be developed to suit each institution's internal validation systems.

The core module will focus around a case study - "International Street" - where sections will be contributed by each partner institution. The module will then be available electronically and the aspiration is that students will be able to develop 'buddies' in other partner institutions and share learning across the countries in that way.

### **Jointly accredited Masters programme**

The Rector of TSU consistently indicated to the team involved in the ESWEG project that he would welcome a jointly accredited Masters programme in Social Work. SHU considered this request seriously and came to the view that it would be possible, though not necessarily straightforward. The resources to support this activity were built into the new ACES programme and work is progressing towards a joint validation in 2010. There are benefits of a jointly accredited degree to both institutions involved as well as to the students who will receive the award and it is an indication of both Universities' commitment to a long-term partnership beyond the limits of the Tempus funding.

### **Cross-cutting themes**

The EU is also interested in the development of Quality Assurance (QA) across all the educational developments it supports, the active involvement of students, and a focus on the learning outcomes approach. The ACES programme is integrating

all these requirements into each of the project objectives. All the partner institutions have internal QA systems established and all the curricula developed will have to be accepted within those systems. Students will be involved in a number of ways, including in the courses themselves and in assessing them, through presentations at conferences and seminars, through focus groups looking at the programme overall and through the implementation of the ISW modules. All the courses that have been developed integrate the learning outcomes approach and all the curricula will identify outcomes for students as well as inputs.

## **Conclusions**

The ACES programme is an ambitious design encompassing six partner institutions which each have responsibility for one of the six programme objectives. The programme has started well and the management team are confident that all the objectives will be achieved within the three year time frame of the Tempus funding. A key factor in the success of the project is the fact that there are institutional relationships between all of the six partners and established professional relationships between many of the team members involved. This means that the project has been able to focus on achieving the project objectives rather than on the initial development of trust and open systems of communication. The different context and understanding of the role and function of social work both in Ukraine and Georgia, as well as the other four consortium countries, means there is much to learn from each other and that nothing can be easily adapted between countries. Input therefore is on the level of principles and theories that can then be adapted to the particular situation in each country. This is exemplified clearly by the development of the ISW module where there will be a common core but the practical details will differ significantly.

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**RESEARCH INTO THE IMPACT OF THE  
ASSISTANCE PROVIDED TO CHILDREN AND  
HOUSEHOLDS WITH CHILDREN  
IN GEORGIA**

**Abstract**

This paper seeks to identify what specific contributions the different kinds of assistance provided to children and households with children are making towards the development of a full-fledged gate-keeping system in Georgia that guides effective and efficient targeting of services aiming to ensure that the most appropriate services are provided to those who meet specified eligibility criteria. In particular, the paper discusses whether these assistances have succeeded in establishing good practices in child welfare and protection, whose effect can be demonstrated and scaled-up. It is based on analytical interviews conducted in February 2008.

**Key words**

prevention of infant abandonment; deinstitutionalisation; welfare indicators; poverty reduction; beneficiaries.

**Acronyms**

GEL – Georgian lari<sup>1</sup> (currency)  
MoLHSA - Ministry of Labour, Health and Social Affairs  
PIAD - Prevention of Infant Abandonment and De-  
institutionalisation  
PRP- Poverty Reduction Program  
UNICEF - The United Nations Children’s Fund  
WFP- World Food Program

<sup>1</sup> 1 GEL approximately equals 0.45 euro.



## Introduction

The 2009 World Bank Poverty Assessment found that 23.7% of the Georgian population was poor, based on calculated consumption poverty (WB, April 2009). This assessment is based on the 2007 Living Standards Measurement Survey (LSMS) and uses consumption per adult equivalent (PAE) as a basis for poverty measurement.

A Situation Analysis of Children in Georgia made by UNICEF in September 2009 stresses: 'Poverty among children was found to be significantly higher than the national average. The consumption-based total poverty rate among children was 28% rather than 23.7% of the general population... Poverty is an important basic cause of vulnerability among children, sometimes resulting in marginalization or even death... Through an inverted trickle-down effect poverty may expose children to poor health, malnutrition, poor cognitive development, nonschooling, violence, abuse and neglect, family disintegration, abandonment, a life on the streets or in conflict with the law. As a consequence, child poverty may impact the child's future life chances as an adult and may repeat itself in the next generation'. (UNICEF, 2009, pp. 16-17, 19).

The **purpose** of the given research is to determine the impact of the assistance provided in Georgia to children and households with children. It attempts to answer the following question: To what extent does this kind of assistance contribute to children's welfare and help avoid different kinds of risk (primarily, placement in children's institutions)?

## **Methodology**

Qualitative sociological research was conducted using the method of *Semi-structured In-depth Interviewing*.

6 target groups of beneficiary households were examined:

1. Households covered by the State Program for Prevention of Infant Abandonment and for Deinstitutionalisation of Children (*PIAD program*)<sup>1</sup>;
2. Beneficiaries of the World Food Program (WFP);
3. Beneficiaries of the so-called “family assistance” (people with disabilities and full orphans);
4. Recipients of disability pension;
5. Households receiving poverty alleviation assistance;
6. Recipients of the assistance for the children in the institutions.<sup>2</sup>

These groups often overlap; as a result, 30 sub-groups as beneficiaries of different programs can be differentiated.

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<sup>1</sup> In 2001-08 years The Ministry of Education and Science of Georgia was implementing a Program for Prevention of Infant Abandonment and for Deinstitutionalization of Children under State Care or Deprived of Parental Care. Since 2009 this program has moved to the Ministry of Labor, Health and Social Affairs of Georgia. The main goal of the Program is to fulfill the right of the child to grow up with his/her family. To achieve this goal, the Program aims at:

- Prevention of inflow of children into childcare institutions and child abandonment;
- Reintegration of children currently in residential institutions into biological families;
- Foster arrangements for children in need of short or long-term care in foster families.

<sup>2</sup> Family assistance, disability pension, poverty alleviation assistance and assistance to institutionalized children are provided by the MoLHSA of Georgia.

Six databases to select respondents for in-depth interviews were used. These coincided with the target groups given above. All the six bases contained the data on over 300,000 households. Some of the households were simultaneously included in two or more databases.

At the first stage of sample formation, databases were compared with each other to define the number of benefits received by households (or determine the number of databases in which they were included).

The principles applied during household selection were the following:

- Households were to be selected from all the databases;
- Selected households included the recipients of one benefit as well as the recipients of two, three or four benefits;
- Families were to be selected from all the regions;
- Within every region a part of the households represented the rural population and the other part, the urban population.

**40 households** were selected from the databases. (For each selected household, several additional households of the same group were selected from the same settlement. In case the selected household from the main list refused to participate in the interview, it was replaced by one of the households from the additional list).

Households represented 9 regions of Georgia: Central (Tbilisi), West Georgia (Adjara, Guria, Imereti, Samegrelo), East Georgia (Kakheti, Mtskheta-Mtianeti, Shida Kartli), South Georgia (Kvemo Kartli).

Data **analysis** was basically of a descriptive character. However, other methods like interpretation and conceptualization were also used.

## **The factors determining the child's placement in the institution**

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In-depth interviews revealed different factors determining or favoring the child's placement in the institution:

1. Difficulties related to the child's healthy nutrition;
2. Singleness of the child's caregiver (mother, grandmother, etc) which might have different reasons (spouse's imprisonment, spouse's death, divorce, having a child outside marriage, family conflict, etc);
3. Having an "illegal" child, that determines its placement in the institution. Another related reason could be a lack of psychological readiness for becoming a mother;
4. Busy job (fear of losing the job);
5. Unemployment;
6. Unavailability of a stable place of dwelling (house, flat);
7. Inaccessibility of the child's medical treatment (children get free treatment in the institutions);
8. Having a disabled child; inability to look after the child in home conditions;
9. Family conflict (conflict between husband and wife, grandmother and grandchildren, daughter-in-law and mother-in-law, etc);
10. Non-existence of school in the settlement and a long distance between the secondary school and the place of dwelling; consequently, a risk of not being able to receive secondary education.
11. Unavailability of school items (especially manuals).

These factors are usually encountered in *combination* and jointly create a synergic effect of social insecurity, which damages the child in the first place. The placement of the child in the institution is considered to be a more or less effective solution.

Therefore, the neutralization of the above factors eliminates the

risk of placing a child in the institution or reduces this kind of risk. This raises the following question: Which factor has to be eliminated to receive the most desirable effect? The identification of such a factor depends on the context. Consequently, in every individual case different factors might be identified.

However, there are still three main conditions fundamental for the child's upbringing in the family environment. These are *ensuring proper nutrition, medical treatment and secondary education*.

Research shows that several *restraining factors* operate in the society. They work against the child's placement in the institution and, in certain cases, eliminate (sometimes temporarily) this kind of risk. These factors are the following:

- Many parents believe that even in the case of hardship, by placing the child in the institution they doom him to a miserable existence. They think that the family environment is irreplaceable;
- Public opinion. Society stigmatizes the parents who place their child in the institution. Such parents are perceived as bad people, as people with deficient personality. Placement of the child in the institution is perceived as deviant behavior. This activates inner censorship in the parents who are going to place their child in the childcare institution.
- Intervention from close relatives (primary social group) and their objection to the child's placement in the institution. (However, the opposite case is also observed).

There is another trend which is worth mentioning in this context: the families whose members (at least one member) have been brought up in boarding school find it easier to place their child in the institution. In general, the childcare institution, as such, is more acceptable for those individuals, who have had a similar precedent in their own experience.

## **The child's welfare indicators**

Respondents identified the *indicators* which determine the welfare standards, eliminating different risks including the child's placement in the institution:

1. ***Having one's own place of dwelling.***  
This means that the family needs to have its own house (apartment), a guaranteed dwelling. At the same time, the child needs to have its own room or, at least, some private space in the room. The dwelling needs to have at least two rooms and has to satisfy minimum living conditions (no plaster falling off the walls, no leakage of water from the roof, dry rooms, etc);
2. ***Basic furniture*** (necessarily including a TV, at least black and white);
3. ***A bathroom*** with the possibility of heating water with gas, wood or electricity;
4. ***Water and electricity supply*** (at least according to the fixed schedule);
5. ***Nutrition*** - at least twice a day (but three times a day in case of young babies). Breakfast - necessarily includes butter or other dairy products; dinner – includes meat at least once a week; fruit;
6. ***Heating*** - at least in one room (using any source of energy);
7. ***Seasonal clothes*** (maybe second hand);
8. ***Medicine and medical service*** (as needed);
9. ***Permanent contact with school:*** possibility of going to school every day; school manuals (at least, used), note books, etc;
10. ***Possibility of satisfying creativity needs*** (music, dancing, sports, craft, etc);

11. **Possibility of entertainment** (toys, etc);
12. **Books for children;**
13. **Peaceful, conflict and stress-free family environment.**

*Note: in the case of disabled children, the above indicators are supplemented by different services that help the child with socialization and adjustment.*

**Typical diet** of needy families with children:

*“Basically potatoes, pasta and onions. That’s it. Sugar; tea, sometimes butters. The child likes halva. When I bring it home I also try a bit, but then I think; “Let him eat it all.” When I receive salary, I buy chicken legs. He likes them. This I can afford once a month, but otherwise we have soup, borsch, stewed cabbage... We can’t afford meat. One kilogram costs 7-8 GEL. How can I afford it?”*

Mother of a child covered by PIAD program.

**Desirable diet:**

*“It needs to be like this: The parents should be able to cook food for their child every day. It is not necessary to give them meat in the morning, but you should give them, at least, butter and tea before you take them to the kindergarten. When you bring the child back home you should give them some food, some soup and sometimes meat”.*

Mother of a child covered by PIAD program

## Impact of the assistance provided to children and families with children

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### **1. Assistance provided within the framework of the state program for the Prevention of Infant Abandonment and Deinstitutionalisation (PIAD)**

Nature of assistance:

- Monetary assistance of 60 GEL per month. This amount may be doubled in the case of disabled children.<sup>1</sup>
- Part of the policy is the provision of services to the families through *Day Care Centers* either as a replacement of monetary assistance or in parallel with the latter. The center looks after children during the day (nutrition, clothing, teaching, medical service, vocational circles, entertainment);
- In some cases, reintegration implies the provision of in-kind assistance (provision of rice, buckwheat, pasta, oil, condensed milk, sugar) along with monetary aid. The overall value of in-kind assistance is about 25-30 GEL. In-kind assistance has been limited nowadays, but there is a possibility of increasing monetary assistance.
- An alternative to monetary assistance is the procurement of livestock (cows, pigs) for rural population. This initiative is financed by Word Vision.

What is this assistance used for? For the purchase of *food and medicine*, mainly.

In almost all the cases, families enroll into the program at the initiative and with the help of social workers.

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<sup>1</sup> Since January 2008 monthly monetary assistance has constituted 130 GEL.



Difficulties and problems related to the given assistance:

1. Assistance is not paid once a month, as provided for by the schedule. It is sometimes paid with delays and arrears accumulate for several months.
2. It is a short-term assistance (payment lasts 6 months or 1 year). There is a possibility of repetitive enrollment into the program, but this happens only in special cases (e.g. a disabled child in the family). But even then the payment is intermittent and can be renewed only after a certain period of time. There is no practice implying continual payment, unlimited in time.

*“6 months is very little. What can be changed in 6 months? It should last longer, for at least two years, so that the family sees some improvement and does not take its child to such a place”.*

Mother of a child covered by the PIAD Program

3. Is not enough to buy clothes, medicine, household items, etc.
4. Is especially inadequate in winter time, when people have to buy wood, etc., for heating.
5. Assistance received might be used to cover some contingent expenses (e.g. buying additional medicine for the child). In cases like this purchase of food becomes a problem.
5. Beneficiaries are actually left without medical assistance (unless covered by some other program). They are very much concerned about the inaccessibility of dental service.
6. The situation becomes especially critical in the case of children with serious health problems (e.g. disabled children). In such a case, parents can only ensure the necessary minimal standard of treatment for their child, but no more than that (combined examination or treatment, etc).

*“The doctor prescribed to my child two kinds of medicine, I don’t remember which. When I got to the pharmacy shop and looked at the price I realized that a seven - day treatment would cost me 70 GEL. It was necessary to take the medicine for at least three months. The child had to take each at least once a day. The child needs much more than that. But I can’t afford it. Can’t buy it.”*

Mother of a disabled child covered by PIAD Program,  
who simultaneously receives some other kind of assistance

6. This kind of assistance is not enough to simultaneously satisfy several different needs. If it is spent on food, you can’t buy anything else. If it is meant for medicine, you can afford very little medicine or may not afford it at all.
7. This kind of assistance, taken separately, is either less effective, or ineffective. It has a positive impact only when used in combination with other types of assistance (poverty alleviation assistance, disability pension, etc).
8. For some groups it is senseless to participate in the program due to the financial inadequacy of assistance. If a single mother has no shelter, reintegration contains for her a certain risk, because 60 GEL is not even enough to pay rent.
9. Beneficiaries of the program complain about the termination of livestock procurement practice. They are also unhappy about the fact that this practice was regarded as an alternative to monetary assistance rather than its supplement. Respondents believe that this kind of assistance was truly effective.

*“I had that cow for two years, so I could give children all the milk and cheese. I sometimes sold a little when something was left over. That summer our sow had pigs. I sold all of them at a high price and bought with that money school things for my four children. I also bought three sacks of wheat flour”*

Mother children covered by PIAD Program

10. When the parent is forced to place the child in an institution, separation is often a very traumatic experience for both parents and children.

*“We cried every night. My child in the boarding school and I at home. The teachers would tell me that the child found it very difficult to stay there without me, that the teachers could not calm it down. Then it got used to living in the boarding school. I also took him home often or often visited him in the boarding school.”*

Mother of a child covered by PIAD Program

11. Even target groups are not often aware of the program. There are families with children in the institutions who have never heard about the Prevention and Reintegration Program. They are not aware of the services provided by social workers, either.

## **2. Institution versus family environment**

In some cases, the childcare institution is perceived as a desirable, positive alternative to the family environment. The reason is that the institution ensures:

- Better nutrition;
- Better medical service;
- More peaceful atmosphere, free from stress;
- Better conditions for learning (supply of school items);
- Better conditions for entertainment (at least, TV in the room);
- Heating in winter time;
- Security, etc.

Due to this, some families are not motivated to apply for the PIAD Program, because the assistance provided by the program will not guarantee for their children better conditions than the childcare institution.

*“I was afraid to take my child from there... I was afraid she would not study as well as she does now... Anyway children’s day is well organized. Maybe, that’s why she studies better there. I am afraid;*

*when back home she will be having fun with her peers and will focus less on her studies. That's why she has not asked me to take her from there . . . The older she gets, the more she likes it . . . They create the appropriate conditions for children to learn. She goes to English classes . . . She studies very well and is very good at English... I can't pay 50 GEL to the teacher or take her to English classes..."*

Mother of institutionalized child

*"At the moment, I am not thinking about taking my children back home. It should not be done before we, parents, manage to have an appropriate income and stop having arguments"*

Mother of institutionalized child

*"My boy, who was in the boarding school that time, preferred to stay there in that period. He and the boys had a separate room, good food, warmth, TV . . . Now imagine what is going on when we are all at home... In the winter we are all in this room.... Some want to read, others want to watch TV....."*

Mother of children covered by PIAD Program

However, it should be mentioned that in the institution versus family environment, making a choice in favor of the institution *is not a common and legitimate social practice*. (The reasons for that have been given in the above paragraphs).

As revealed by in-depth interviews, the *Day Care Center* is a better alternative to the institution. It is an intermediate unit between the family and the institution and can ensure for children what the family can't afford (food, clothes, medicine, school items, studying in different circles, sport activities, entertainment). On the other hand, such centers enable children to stay in their families and be in touch with family members. Many families would be delighted to use the services of the day care centers, where their children could stay during the day. However, they know nothing about their existence. Also, the network of such centers is not, yet, so wide in Georgia. (UNICEF (Reichenberg, Judita and Nordenmark, Anna), March 2006).

## **Assistance provided under the Poverty Reduction Program (Poverty Alleviation Assistance)**

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Nature of assistance:

- The assistance is provided by the Agency of Social Support, which is a structural unit of the Georgian Ministry of Labor, Health and Social Affairs.
- Allocation of financial assistance to poor families depends on the poverty level reflected in the relevant score. Minimum assistance is 30 GEL (for single person families), with a 12 GEL increase for every additional family member.
- An alternative to monetary assistance is the provision of different services to low ranking families (e.g. families scoring below 70,000), like the provision of health insurance policies.
- The program also issues gas and electricity vouchers (50 GEL each) and wood vouchers.
- Some poor families are issued free travel coupons and are provided with free meals.
- In individual cases, local governance bodies (e.g. Tbilisi mayor's office) can take a decision to fund other services, like the child's musical education.

*Related difficulties:*

1. Incomplete personal files (e.g. missing IDs).
2. Lack of time. There is a need for additional human resources to help with the procedures and collection of documents.
3. In respondents' opinion, poverty assessment is not very accurate, or it is often biased. It is true that many poor families might be deprived of assistance only because of possessing valuable items, given them as a gift.
4. In some cases the identification of potential beneficiaries is carried out in an unprofessional way (social agents' low level of professionalism, poor arrangement of the exercise, bias);

*“That assistance made me a bundle of nerves. When I learned about it last year, I went to Tskaltubo<sup>1</sup> to complete the application form. Since then they have been making me rush between Tskaltubo and my village. . . and keep saying: You’ll get the answer either today or tomorrow, either today or tomorrow . . . When I got fed up with all that I wrote president Saakashvili. After I got the reply, I took it to Tskaltubo. They immediately reacted and allocated assistance to me. Does it mean we all have to write to Saakashvili to get assistance?”*

Housewife of a recipient family

5. Service provided on the basis of a medical policy is sometimes low quality. Recipients complain about the indifferent attitude of the medical personnel.

*“In outpatient hospitals they do not like people getting medical service on these conditions. They need cash. They don’t care for your policies. We are, somehow, discriminated, stigmatized people”*

Housewife of a recipient family

But some people hold the opposite opinion:

*“We are very happy about the clinic. They do not demand money or some other things. All the personnel know us, because I have brought up my three children there.”*

Father of a beneficiary family receiving disability pension and poverty alleviation assistance

6. Not all the clinics provide medical service on the basis of health policies. On the other hand, the possessors of a policy do not want to change the clinic (to replace it with the one indicated in their card), because they have a doctor who they have known for ages and who knows all the details about their child’s disease.

*“In the clinic they sometimes demand payment for the ward, other times - money for medication, transfusion . . . They demand money for anything. I was told: The health policy does not work here.*

Father of a beneficiary family receiving disability pension and poverty alleviation assistance

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<sup>1</sup> Tskaltubo is a town (district center) in west Georgia.

7. Another problem with the policy is that it is rather inflexible. For example, if the beneficiary is confined to bed, he or she cannot get medical service at home, because the policy does not provide for this kind of arrangement.
8. Some beneficiaries do not know how to use health policies; they are not informed about them, so the policy remains unused.
9. In some cases beneficiaries were refused payment for gas and electricity vouchers (or clear some of the arrears) as admitted by the staff of the service.
10. People cannot actually use wood vouchers, since this is related to some difficulties:

*"I was not able to use the voucher, because I had to look for a car, for someone to use their car, fuel, labor, etc. So when I started calculations I realized that all this would cost me about 200 GEL. So, I bought wood in lots, instead.*

Housewife of a recipient family

11. There are long queues to free canteens, so they cannot serve everyone:

*"They always tell me they have no free places and ask me to come some other time . . . I have been standing in queue since November. How is it possible that my turn has not come yet?"*

Father of a family receiving poverty alleviation assistance

12. Poverty alleviation assistance is not often enough for a family to reach the subsistence minimum. There are families who are involved in the Poverty Reduction Program, but still have their children placed in the institutions. When living with their family, children find themselves in more difficult conditions than when staying at the institution:

*"Food is the biggest problem, of course... Differently from mothers, children never understand why they are hungry. Then you compare*

*your situation with the others' and see that they are much better off... In a situation like this it is very difficult to have a hungry child at home . . . It is more difficult in summer because wonderful smells come out from neighbors' apartments. You know how difficult it is?! You can stand all that because you are a mature person, but children . . . You understand why they go out but you can't tell them to come back home because you cannot cook a decent dinner for them . . . It is so difficult to describe all that, but this is what the reality is".*

Mother of children covered by PIAD Program

## **Disability pension and family assistance**

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Nature of assistance:

- The assistance is provided by the Agency of Social Support, which is a structural unit of the Georgian Ministry of Labor, Health and Social Affairs.
- Disability pension makes up 55 GEL per month and family assistance – 22 GEL per month.
- Allocation of disability pension is automatically followed by the allocation of family assistance, but not vice versa.
- Full orphans are allocated family assistance, only.
- Disability pension is provided before the child reaches the age of 18. After reaching adulthood, only the individuals belonging to disability group I continue receiving assistance.
- Family assistance is provided before the child reaches the age of 18. Post-school students continue receiving assistance until the age of 22.
- In case of family assistance, information is mainly provided by doctors and social workers.

This assistance is mainly spent on the purchase of *food and medicine*.



Related difficulties:

1. Monetary assistance is not often enough to purchase medicine (and, of course, to cover treatment expenses). Some disabled children need at least 100 GEL per month for basic medical products.
2. Disabled children might not be covered by health policies.
3. The situation is especially difficult when the child has to undergo surgery. This is a problem the family cannot solve unless it manages to enroll its child in a free surgery program carried out in Georgia for charitable purposes, but this is extremely difficult to do<sup>1</sup>.
4. In some cases children that have reached 18 and suffer from a serious disease (e.g. cerebral palsy) are not given the disability status because of limiting assistance to the age of 18. Such children may only receive 22 GEL family assistance after starting post-school education:

*“The child has been diagnosed with cerebral palsy, but it does not enjoy any benefits except for social assistance – 22 GEL that we receive every month. I went to the hospital where they had to allocate my child to a disability group. The neurologist told me that according to their instructions the child’s leg had to be 10 cm shorter or he had to be confined to bed to be counted as disabled and receive pension. Only Disability Group I is given pension. My child is not eligible for this group and Disability Groups II and III do not receive assistance . . . We pay for anything.... for prescribed medicine . . . This is basically medicine for intra-skull pressure (e.g. Kavinton), which is very expensive . . . The child suffers from a very strong pain.”*

Mother of a family assistance beneficiary student

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<sup>1</sup> In some cases, disabled children are supported by local municipality. In extremely critical cases the municipality might co-fund surgical intervention.

**Other problems:**

1. Parents of some disabled children note that along with financial difficulties they also face some other difficulties, mainly the child's integration into society. The child often experiences estrangement when being in its own environment. People are not ready to accept them. It prevents disabled children from becoming fully functioning members of their community:

*“First I took my child to kindergarten № (names the kindergarten) where we had big problems with the director, first, and then with parents. They looked at the child with astonishment, with suspicion... I realized that they did not want my child to communicate with their children. I understand that it is difficult to look at such a child. I see how people react when we use public transport or walk in the street. The child feels all that. He does not like to be outside. When he feels that someone is looking at him in a strange way he immediately asks me to take him home. We, Georgians are proud of being so humane but the reality is that our society is not ready to accept such people.”*

Grandmother of a disabled child

2. Disabled children face adjustment problems when being at school. They are thought to be marginal and are the object of humiliation. Such children cannot establish conflict-free interpersonal relations, show low level of involvement in group activities and have communication problems. They also face problems when doing homework:

*“First they laughed at the child because he could not speak. He could not stay in class just like this. The teacher had to ask him something... Children laughed, they humiliated him ... Now children have grown up a little, have got used to his speech . . . It is getting better now.”*

Mother of a disabled child

## Food aid

### Nature of aid:

- Food aid is provided under different programs. One of them is the World Food Program (WFP) meant for large families and the needy. 10 kg of flour and 0.5 liter of oil were to be provided to targeted households per month, but in reality the beneficiaries received the aid once a quarter.
- The composition of aid was different in every individual case (cereals, rice, pasta, oil, milk powder, sugar, etc). The periods for which it was provided also varied.
- The WFP's food-related initiative was to provide schools with rolls and buns. In such a case, there would be no need for parents to supply their children with food for school hours. This was also considered an additional motivator attracting children to school<sup>1</sup>.
- The Red Cross provides food aid two or three times a month. The aid (2 kg sugar two packages of cereals, flour, etc) is distributed to needy households. The Red Cross receives information on needy households from local administrations.

### Related difficulties:

1. Beneficiaries complain about the scarcity of food. The provided amount of food is normally consumed in one or a maximum of two weeks' time.

*"This kind of assistance is very small. 10 kg of flour or half a liter of oil can't solve the nutrition problem in a family of five. If we were given, for example, 20 kg of flour, it would still be something. This amount of oil and flour is enough for the child but not for the whole family"*

Mother of a disabled child

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<sup>1</sup> Nowadays, no aid is provided under the World Food Program (WFP).

*“It was so little . . . it was not of any help . . . 10 kg of flour . . . even 30kg . . . How could it be enough? You don’t even feel it. If you bake many loaves of bread, even one sack of flour will not be enough for the family”*

Mother of a family covered by Food Aid Program

2. Respondents liked the idea of supplying the school with rolls and buns. However, the implementation of this initiative was not smooth, either. The quality of products became a problem:

*“Rolls and buns were baked for the whole school and were distributed to all the junior students, including my child . . . But the products were so bad that it was impossible to eat them . . . Badly strained flour, awful pastry, etc . . . You could find thread and some strange things inside . . . even the pieces of a plastic bag . . . It was not only my child who refused to eat them . . . No one wanted to eat them . . . They gave them to the dogs outside to eat . . . ”*

Mother of a disabled child

Respondents mentioned one-off food aid received in different periods<sup>1</sup>:

- Provision of flour
- Food aid including rice, sugar (2 kg each), two tins of condensed milk, tangerines, apples. This kind of aid was provided during the election campaign.

*Related difficulties:*

1. Flour was provided at the place of beneficiaries’ registration (by IDs). At the same time, the actual place of dwelling was sometimes located somewhere else. This created additional difficulties for beneficiaries (lack of time, fare, inability to bring home heavy sacks of flour).

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<sup>1</sup> The databases developed by the Agency of Social Support at MoLHSA were used to identify the beneficiaries of one-off assistance.

*“I took my passport to Telavi<sup>1</sup>. It says: Registered in Dedoplistskaro district. I was told that I could get aid only at the place of registration. I approached them many times, but in vain. They told me to go to the place where my passport had been issued. I could not go to Dedoplistskaro . . . But the bus fare and the money I had to spend on its transportation to my place of living was enough to buy one sack of flour. That’s why I did not go. ”*

Mother of a family covered by Poverty Reduction Program

2. Some beneficiaries prefer financial assistance to food aid:

*“Monetary assistance is more important. You can find food. Anyway, we live in the village . . . You can grow something, like potatoes not to die of hunger. But we need money for anything - medicine, doctor. Money is crucial. Monetary assistance is more important for us than food aid. “*

Mother of a disabled child

## **Problems Common t o All Beneficiaries**

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1. None of the programs is able to ensure families’ welfare. This also applies to the PIAD program which provides the most substantial assistance – on average 100 GEL per month.

*“I am talking about a minimal amount... I think the child needs minimum 200 GEL per month - school, medicine, food . . So that the child feels that he is a real child . . . This money could bring him something pleasant to make him feel happy . . . compensate for the disability he has . . so that he has food, clothes, something to compensate.”*

Mother of a disabled child

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<sup>1</sup> Telavi and Dedoplistskaro are the distinct centers in Kakheti region of East Georgia.

2. Time deficit is a common problem for those families with children where caregivers are single mothers or old/single grand parents. Their schedule (basically determined by their unstable work) does not allow them to bring children home from school or kindergarten, take them to different classes (art, etc).
3. Some respondents complain about unfair distribution of assistance. They speak about deals and corruption. Assistance is sometimes provided to better-off families whereas poor families are left without any aid:

*“Some time ago I learned that some person received assistance (names the beneficiary). I asked what they needed it for. They have opened a garage to trade. They own a garden, a vineyard . . . They have whatever they need . . . And yet they received assistance. They also have a shop, which is very busy. What do such people need additional assistance for? I don’t really understand”*

Grandmother of a household receiving family assistance - orphan’s pension

*“When I approach the local administration for assistance the answer is that they can’t afford it at the moment, that there is no money in the budget. They send me from one building to another. No one knows in which building it is. When I finally start to act and voice my concerns, very, very loudly, any kind of assistance appears in no time. What about people who can’t do this, or are unhealthy. There must be no assistance for them”*

Mother of a beneficiary receiving disability pension

4. For those households who live in rural areas and own land plots, land cultivation and crop growing is a big problem, since they cannot afford fuel, equipment, seeds, etc. Another problem is the distance of agricultural plots from the place of dwelling and the unavailability of transport. The maintenance of domestic animals (cows, pigs, hens) creates

a lot of additional difficulties. Beneficiaries' motivation to be involved in agricultural activities and animal husbandry is very high.

*“If I could, I'd buy seeds, would cultivate the land . . . Potato seeds cost a lot. I would grow potatoes for our own consumption and also for sale. I'd buy a pig, hens. If you do not grow maize, you can't have hens . . . You have to feed them, right? 1 bucket of maize costs 7 GEL. How can I afford it? We can hardly afford food for ourselves . . . “*

Housewife of a family covered by PIAD

5. There are households with one parent suffering from a serious disease. They are eligible for sick pension, but because of the non-existence of personal health records they are not able to receive this kind of assistance.

\* \* \*

Stemming from the above, to meet the minimum welfare standard, households need additional income which could be generated in the following ways:

- Finding a badly-paid low qualification job. This is mainly seasonal and temporary work (doing agricultural work for someone – harvesting grapes, strawberries, taking the cattle to the pastry, etc.) Earnings from seasonal work are, on average, 200-300 GEL. As a reimbursement people are sometimes given food products like flour.
- Relying on others' (relatives, neighbors) help.
- Borrowing money.
- Paying for products by installment.
- Many of them think that working abroad and supporting family with the earned money would be the best solution to their problem.

## Summary

The State Program for Prevention of Infant Abandonment and for Deinstitutionalisation of Children cannot ensure for families the necessary conditions guaranteeing *sustainable* welfare for their children, especially after the termination of assistance. The only exception is the procurement of livestock for households in rural areas, which provides certain guarantees. However, in such a case, the feeding and maintenance of livestock might develop into an irresolvable problem.

The above program is not effective enough in terms of the elimination of the risk related to the children's placement in the institution. This is because the institution ensures better conditions for children according to almost all the relevant criteria.

Assistance provided under the program (monetary assistance, food) can only *stop* the aggravation of an extremely negative situation, but it cannot bring any improvements.

The beneficiaries of the program are not clear about the situation they will find themselves in after the completion of the program. They are concerned about their futures, which do not seem to be promising and are very pessimistic (even, sometimes, tragic).

The major reason for joining the PIAD program is the inherent and psycho-social need for mutual attachment between parents and children and their desire to exist within the same 'space'. State assistance has, mainly, a provoking function. It creates a minimum material ground for the satisfaction of the above need. (However, we should also consider the restraining social factors, like the stigmatization of the childcare institutions by society).

Due to the fact that the placement of children in the institutions is the source of strong stress and marginalization, and also



because the monetary and food aid provided to families is not adequate, the service of the so-called “*Day care centers*” has turned out to be the best solution for the beneficiaries of the program. Consequently, it is advisable to expand this kind of service to all the regions of Georgia.

As with poverty alleviation assistance, schemes such as disability pension and family and food assistance help socially needy families to solve *individual (situational) difficulties* only. They are not able to provide families with a *stable* ground guaranteeing their children’s welfare by almost any welfare indicator.

The named types of assistance have a sort of preventive effect only when they imply food and medicine supply. However, this kind of effect is also limited to individual situations and cannot ensure a final *solution* of the problem.

When a family is simultaneously covered by several programs (PIAD, poverty reduction, disability pension, etc), the effect of assistance is augmented. However, the state social policy limits this kind of combination of programs. They are meant to *replace* rather than supplement each other. This is mainly true for the interrelationship between the prevention and deinstitutionalisation program and the poverty reduction program.

To satisfy the minimum requirements for the child’s welfare, families have to look for additional income (about 200-300 GEL per month). The best generator of such income is employment. This could be running a private farm (in rural areas) or finding a job with more or less stable salary (in urban areas). Lack of employment alternatives continue to provide incentives to institutionalisation . Therefore, the PRP has to enlarge its functions and think about the provision of services to targeted needy families. An employment-oriented service requires the provision of some other parallel services, out of which the following seem to be the most important: a) assistance

in agricultural activities (supplying fuel, equipment, seeds, irrigation water, etc), and, b) taking care of children through Day Care Centers.

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## **TRANSITION OF CONCEPTS: THE EXAMPLE OF ‘SOLIDARITY’**

### **Abstract**

The purpose of this paper is to analyze changes in the meaning of the term “solidarity”. According to definitions, synonyms of *solidarity* are togetherness, team spirit, same interests, justice and trust. At least, it was so during Soviet times. How does the youth of today interpret this term? The research method is a printed questionnaire of students at Tallinn University in May 2009. The result: people use the same language but some words have different meaning for everybody. One cannot overestimate the role of stories (narratives). Words have a people-based, personal meaning that changes in time, besides the so-called official definition: words are always in transition. We have to keep that in mind to avoid misunderstandings.

### **Key words**

solidarity; transition; students; empathy; narratology.

## Introduction

The purpose of this paper is to analyze the change (or transition) of the meaning of the term “solidarity”. According to definitions, one might think that togetherness, team spirit, same interests, but also justice and trust, are synonyms of *solidarity*. At least, it was so during Soviet times. How does the youth of today interpret this term? Students at the Social Work Institute, Tallinn University, completed a printed questionnaire in May 2009. The resulting hypothesis is: The word “solidarity” has too many meanings for it to be used accurately.

Social researchers Plotnik and Kazjulja (2008) examined newspapers in Estonian and Russian during 1995-2005. They found out that social justice was mentioned in critical and hopeless stories. The authors named this opposition discourse and were amazed that these expressions were not used in the rhetoric by the people at power at that time, as if moral decisions were something that did not fit into ruling. The words “justice” and “social justice” mainly had a decorative role in that decade, being in the same line as “honesty”, “humanity” and “solidarity” (Plotnik and Kazjulja, 2008, pp. 40, 42). The vice chancellor of the Ministry of Foreign Affairs (2006) paid attention to the imprecision of the term: “The positive meaning of solidarity is represented in the necessity to support each other’s uniqueness according to the philosophical basis of the European Union. Sadly, there is no list of whether all the member countries have an equal amount of originality and if they are supported equally. This makes equal treatment quite impossible, but until now, none has really demanded on it either. /.../ One of the most important questions of the 21st century is, to whom we should express solidarity.” (Laanemäe, 2006, pp. 37-38).

Even though solidarity has been much discussed, one cannot speak about positive results. For example, according to the

Saar Poll research, 22% of the Estonian people consider older people as a burden to the society; and the Baltic states occupy the first positions in this ranking (ER news, 2009). The unequal financial statuses also reflect the lack of solidarity: 19.5% of the Estonian population lived in relatively poor circumstances in 2007; the differences between the richest and the poorest quantiles reach almost five times, which still placed Estonia into the last ten of the most unequal countries of Europe (Jaagant, 2009). The question arises, who uses solidarity while communicating to whom, and if it is voluntary or forced? The problem is summarized by historian, Vseviov: "It seems that history isn't familiar with the term solidarity. Only interests can be noticed instead of it. Even on those, who represented the role of the giver or the one of a disclaimer." Vseviov uses the example of President Jeltsin, who took the trolleybus a couple of times, to seem himself seem interested in the other passengers. "This wasn't the solidarity, this was only interest." (Vseviov, 2009).

It seems that a word is actual because of fashion or maybe because of demagogical deliberations. Now the field of use of "solidarity" in Estonia is amazingly broad – it fits into the rhetoric of right- and left-wingers, politicians, historians and journalists, but also of the ones in need. Everyone has his/her own idea of the word. During the Soviet time 'solidarity' had mostly an ideological meaning; now this is not the only case anymore.

## **The theoretical background of solidarity**

Definitions emphasize the feeling of unity: solidarity as togetherness and joint interests. Solidarity (Latin: *solidus* – certain), feeling of one, having the same interests, sharing responsibility (Kleis et al 1978, p 572). Szczepanski (1970), a Polish sociologist, interpreted (in Soviet times) solidarity as ‘a feeling of “us”, which is based on unity, feeling of a group and the understanding of the other group members. Each person sets his/her personal welfare equal to the benefits of others. Solidarity appears in a similar feeling and action – so that same attitudes and judging criteria are the same for all the members of the group; and everyone adjusts the same, concrete methods of actions in certain situations. For example, the whole school academic group expresses solidarity if all the pupils refuse to reveal the one who broke the window. A group of revolutionaries, who are prepared to die for their idea, also expresses solidarity.’ Solidarity could have different reasons according to Szczepanski: “One might wish to equalize the financial benefits, want to feel cultural unity, value their race, feel the need to accomplish a very important task, it might have ideological or religion reasons etc. The solidarity of the members is a precondition to the power of the group, but before that to the power of resistance to the exterior forces.’ (Szczepanski, 1970, pp. 241-242).

According to Durkheim’s *The Division of Labour in Society* (1893), types of social solidarity correlate with types of society. In a society exhibiting mechanical solidarity, its cohesion and integration comes from the homogeneity of individuals – people feel connected through similar work, educational and religious training, and lifestyle. Organic solidarity comes from the interdependence that arises from specialization of work and the complementarities between people – a development that occurs in “modern” and “industrial” societies. Social solidarity

refers to the integration and degree and type of integration, shown by a society or group with people and their neighbors. Solidarity is commonly associated with political socialism, being seen as the driving force and defining temperament behind the ideal classless work force. Khaldun's (2008) Mugaddimah described it as the fundamental bond of human society and the basic motive force of history. According to Bayertz, the term solidarity entered political discourse during the first half of the 19th century and assumed a place alongside the term "fraternity", which had gained prominence in the aftermath of the French Revolution, and even to an extent, replaced it. Until today the term solidarity stands largely unexplained in relation to complementary terms such as "community spirit" or "mutual attachment", "social cooperation" or "charity", and – from time to time – "brotherly love" or "love of mankind". In its most general use, the term "solidarity" focuses on the tie which binds all of us human beings to one big moral community. One has solidary only with the other members of the particular community to which one believes oneself to belong. It seems reasonable to comprehend "solidarity" not as an ethical term, but merely as a political watchword. (Bayertz, 1999).

In Szczepanski's definition "group unity", "all group members", "different reasons" stress the context. There are many groups in society – therefore each of them might have its own solidarity. Expressions like "cultural similarity"; "religious or ideological background"; "accomplishing a very important task" increase the vagueness. For example, "the financial benefits" are in some ways equalized by pirates and jam thieves. It seems that solidarity fits to cover all kinds of activities – it creates a feeling of trust because of the way it sounds. Szczepanski used the example of a group who did not reveal the pupil who had broken the window as a practical example for solidarity. Actually, only the ones who are afraid try to avoid responsibility, and the one who has broken something should take care of repairing it. So, sometimes in the past, one used to use the term "solidarity"

instead of “cowardness”; now it has rather become a financial term (as mentioned before).

The content and narrative of definitions transforms and changes in time a lot. A Hungarian psychologist, László, explains: “Sometimes two people can react in a totally different way in the same situation. The explanation is simple: in fact they are not in the same situation - narrative always creates its own ‘reality’. Every society has its own “historically crystallized stories”, and although individuals may view them from different aspects and create different stories out of the same experienced event, culture informs all its members of the set of possible story frames.” (László, 2008, pp. 94, 12). The mess connected to solidarity might partly result from the context being different for each person: a part of them might still connect it with the vow of silence of the revolutionaries; the others think solidarity means donations and charity. A problem might arise when one does not reflect on the fact that people usually understand words differently.

## **The research and results**

There were three different tasks for the same students (21+11) on different days in May 2009 at the Social Work Institute of Tallinn University.

1. At first I examined the meaning of solidarity for the second year students of Tallinn University. There was an extra (unexpectedly) brief question in one course paper (test) for future teachers and social workers: “What is solidarity?”
2. I also distributed a short test of temperament (with the test mentioned). I confirmed that it was not obligatory to complete. I stressed that doing that extra task or not doing would not influence marks at all. Because the text does not



really match with the topic at hand, I will not spend more time on it here, but I will note the generosity of the students (on the topic of empathy and solidarity).

3. The impulse of the third task comes from Paulos (2003), who taught a summer course at Temple University. I will consider this in more detail later.

## Results

In spring 2009 I examined the meaning of solidarity for the second year students of Tallinn University. There was an extra (unexpectedly) brief question in one course paper (test) for future teachers and social workers: "What is solidarity?" Altogether, 32 students answered this question and I grouped the definitions as follows.

### 1. Solidarity as tolerance (in context of equality and justice):

- *"Solidarity is about being open for differences and the widening of normative borders. "*
- *"It's neutrality, taking other's understandings into account."*
- *"A person with solidarity is tolerant and accepts people the way they are, even as similar and equals."*
- *"Tolerating people who are different from the usual picture of society."*
- *"Solidarity means that everyone has the same rights and responsibilities."*
- *"When we understand that there are differences and we accept them."*
- *"A person with solidarity has no prejudices, he's open-minded."*
- *"To listen what the other person has to say, to take his thoughts into consideration."*

- *“If you treat everyone equally.”*
- *“Solidarity is tolerance towards others. We must take people as they are.”*
- *“To not dominate your own opinion, but also accept other opinions and not criticize them.”*

2. Solidarity as a type of appearance, but also politeness:

- *“We use the term “solidarity” for example when describing a polite and good-looking gentleman. It results from the way one acts.”*
- *“A type of politeness, which is common to people who respect themselves and others.”*
- *“Politeness, acting tactfully according to the developed norms.”*
- *“Solidarity is polite, correct, knowing, and honest. “*
- *“To accept something out of politeness.”*

3. Solidarity as empathy:

- *“Solidarity is a mixture of the feeling of justice, power of will and empathy.”*
- *“Solidarity is the ability to count with other opinions, to accept them.”*
- *“Respect, helpfulness, politeness – also planned, not only occasionally.”*
- *“It means understanding, knowledge, empathy.”*
- *“I agree with you, we have the same opinion, we support each other. It’s related to empathy, the ability to place yourself into the position of others.”*
- *“Solidarity is openness, the understanding of others.”*

4. Three definitions were similar to the encyclopedic definition:

- *“To be ready to withdraw equally, to make compromises in your rights.”*

- *“Feeling of community. The wish to notice and support each other.”*
- *“Solidarity might be defined as faithfulness: one doesn't betray another person.”*

5. Other:

- *“To be kind, open and loyal.”*
- *“Respect towards your parents, teachers and friends.”*
- *“To be discrete on certain topics.”*
- *“To agree with the rules.”*
- *“Solidarity means not to give negative evaluations.”*
- *“The wish to take part in common activities.”*
- *“Solidarity is the ability to be diplomatic.”*

Current students, future specialists, are of the same opinion about solidarity being a positive term, whatever it means for them. A part of the interpretations confirmed the doubts: even though we seem to use the same language, we still speak different ones; and that even when talking about one generation. When people active in the academic environment understand (foreign) words that differently, what is the situation when observing people of different educational level and age? It makes you think that in society as a whole:

- a) people are asked to show solidarity;
- b) there is no agreement on what that term means – so: even if we really want it, solidarity cannot occur;
- c) but still nothing changes/depends or happens.

It seems like people could be asked to do anything (or not) – the population would not mind. The test was a part of the subject “A child with special needs and deviant behavior”, which perhaps explains tolerance in answers. The students are clever – the questions have to be about the subject, which is why many of them associated solidarity with how one feels about “different

ones". That means that students' folklore could also substitute knowledge. A part of the academic youth does not know the actual meaning of the term "solidarity", even though the word is often used in publicity.

## **Empathy as a precondition of solidarity**

To show solidarity, one has to have empathy: each person in the conversation has to know what the other is thinking. According to Fukuyama, one reason that the human brain developed as quickly as it did was the need for humans to cooperate and decipher each other's behavior, even deceive one another (Fukuyama 1999, p. 177). According to Giddens the reflexive life planning that focuses on empowerment, self-reliance and stakeholder involvement fits nearly with neo-liberal identities. Only the fittest, the most calculating and enterprising survive in this harsh Darwinian landscape. Indeed, one of the advantages of living in a risk society is said to be the explosion of choice, which is differentially distributed, in reflexive patterns of consumption. The flipside is that if service users are unable to cope with the reflexivity required in neo-liberalism they must be regulated, normalized and exposed (Webb, 2006, p 58). According to researchers empathy is a motivation oriented towards the other; or the experience of foreign consciousness in general. Kohut (1996) says that empathy is the capacity to think and feel oneself into the inner life of another person.

In sociology the concept of empathy – the ability to assume or take on the social roles and attitudes of other social actors – appears in a variety of different contexts. In the social psychology of Mead the ability to empathize with social roles and positions is a basic social skill, acquired in the process of socialization. In the sociology of development, empathy has been treated by Lerner as a basic psychological concomitant of modernization

which requires social actors to identify with new political leaders and programmes, new economic commodities and modern social institutions (Abercrombie *et al*, 1994, p. 142).

Psychologists say that the bigger the group is, the less empathy and solidarity are expressed (because the responsibility diffuses). This is the phenomenon of the bystander effect: usually, as the number of people who witness an emergency increases, the likelihood that one of them will help decreases. Each person thinks someone else will help the victim. That is, the presence of other bystanders allows each individual to experience a diffusion of responsibility for not taking action, which lowers the costs of not helping. The degree to which the presence of other people will inhibit helping may depend on who those other people are. When they are strangers, perhaps poor communication inhibits helping. People often have difficulty speaking to strangers, particularly in an emergency, and without speaking, they have difficulty knowing what the others intend to do. According to this logic, if people are with friends rather than strangers, they should be less uncomfortable, more willing to discuss the problem, and thus more likely to help. Logically, the situation in towns is worse. According to Bernstein *et al* (2000), people in urban areas are less helpful than those in rural areas. The first explanation is that stressful environments create bad moods – and, generally speaking, people in bad moods are less likely to help. A second possibility is that noise, crowding and other urban stressors create too much stimulation. To reduce this excessive stimulation, people may pay less attention to their surroundings, including to individuals who need help. It is also difficult for arousal: cost-reward theory to predict what bystanders will do when the cost of helping and the cost of not helping are both high. In these instances helping (or not helping) may depend on several situational factors and, sometimes, on the personality of the potential helper. They may also be circumstances in which cost considerations may not be the major cause of a decision to help or not to help. (Bernstein, *et al* 2000, pp. 656-7).

It was possible to discuss empathy with the help of the same students (as mentioned earlier in this article). A short test on temperaments was distributed with the test earlier mentioned. Again, I stressed that it was not obligatory to fill it in and that doing that extra task or not doing would not influence the mark at all. Because the text doesn't really match with the topic at hand, I will not spend more time on it here but, again, I will note the generosity of the students on the topic of empathy and solidarity.

There were 11 people writing the course paper (test), 10 of those completed the extra test as well; there were 21 people writing the same test on the next day, of whom 15 also did the extra task (test). I was happy at first that they showed solidarity and empathy and wanted to please me; yet I could not exclude the possibility that perhaps they did not trust me when I said that it would not affect their result. The next day 15 students (of 21) completed the test – they showed less empathy but maybe that means that they also trusted me more (they truly believed that there would be no punishment for those who did not complete the voluntary task)? One could conclude that what seems to be solidarity might be fear instead. What is the truth? The psychological idea that has so far had the greatest impact on economics is “prospect theory”, which was developed by Kahneman and the late Tversky. Prospect theory claims that people regularly miscalculate probabilities: they assume that outcomes which are very probable are less likely than they are, and that extremely improbable, but still possible, outcomes have no chance at all of happening. They also tend to view decisions in isolation, rather than as part of a bigger picture. (Kahneman *et al*, 2008). People constantly make mistakes and evaluate situations incorrectly – at least they show solidarity in that area. Concepts are under transition, but people don't know that, and everybody has personal narratives which can be one reason of social conflicts.

## **The Paulos test**

Paulos (2003) taught a summer course at Temple University. Every day there was intensive teaching and the pace was rapid – there was a short quiz every day also. Paulos placed a little box at the bottom of each exam sheet and a notation next to it stating that students who crossed the box (placed an X in it) would have ten extra points added to their exam scores. A further notation stated that the points would be added only if less than half the class crossed the box. If more than half crossed the box, those crossing it would lose ten points on their exam scores. A few brave souls crossed the box on the first quiz and received ten extra points. As the summer wore on, more and more students did so. One day he announced that more than half the students had crossed the box and that those who did had therefore been penalized ten points. Very few students crossed the box on the next exam. Gradually, however, the number crossing it edged up to around 40% of the class and stayed there, but it was always a different 40%.

The Consumer Confidence Index (CCI), which measures consumers' propensity to consume and their confidence in their own economic future, is likewise subject to a flighty, reflexive sort of consensus. Since people's evaluation of their own economic prospects is so dependent on what they perceive others' prospects to be, the CCI indirectly surveys people's beliefs about other people's beliefs. ("Consume" and "consumer" are, in this context, common but unfortunate terms. "Buy", "purchase", "citizen" and "household" are preferable.) (Paulos, 2003, p. 8).

I did the same small experiment with my students, adding a box under the test mentioned above, with the Paulos instructions about the plus and minus points. Four of the eleven students of the first group ticked the box. Actually another two students ticked the box also, but they erased it after somebody remembered

that the subject at hand ends with an examination without a mark. If this had not come up, there would have been six ticks in the tests; that means more than half and the ones who took the risk would have lost 10 points. Now, four courageous students got extra points, which improved their mark in a subject where results were not actually important. On the other hand the erasing of ticks deserves attention: if the result is not important, there is no difference in gaining or losing 10 points. Getting extra points with such a small effort reminds me in some aspects of taking a quick loan: it is commonly known in the current financial situation that everything has its own price. It is possible that the ones who erased the tick decided to give up temptations (now and from now on), because you never know ...

So: the solidarity has its price; and once again this concept is no longer a political one.

There was a larger group taking the test on the next day, 6 of 21 students ticked the box. There were less people taking the risk in this group – people do not know each other that well and that reduces the wish to take risks. People evaluated the situation more precisely in the smaller group; some students tried (secretly) to exchange information. In a bigger group solidarity is not easy.

The people who ticked the box could usually be divided into two groups: the knowledge of two thirds of the students was very vague, so they needed the extra points to improve their grade. Conclusion: the bigger the benefits are, the higher the readiness to run risks and the need to think about solidarity. One third of the students who ticked the box had prepared excellently for the test – even without the extra points they would have received the highest mark. Probably they were too uncertain and thought it to be unnecessary to take the risk. In general, one could say that both the lazy students and those with low self confidence are likely to tick the box (and to benefit from empathy and solidarity).



Because the context of words is changing constantly, one has to be ready for some creativity (misunderstandings). If there is little information, emotions play a larger role, which could result in wrong decisions. Terms that have an unknown meaning get a fictional definition. The psychologist Hogan asks: “How can we decide whether something is a bird? We compare it with a prototype. This sort of comparative judgment applies not only to other people, but to oneself. We must infer what we are feeling even after we have learned terms for emotions. Bem’s self-perception theory contends that “Individuals come to “know” their own attitudes, emotions, and other internal states partially by inferring them from observations of their own overt behavior and/or the circumstances in which this behavior occurs”, which is to say by inference from expressive/action outcomes and eliciting conditions (Hogan, 2003, p. 240). When we hear the term “solidarity”, we compare it to a meaning we have heard before: people who lived under Socialism have a different context for this word than the younger generation. According to László, historical narrative is the product of social construction, but it is a construction that uses narrative as a cognitive tool with its own rules and laws. The validity of narrative hinges on its credibility, authenticity and coherence, which in turn are dependent on the proper use of narratives – time, plot, characters, perspective, narrative intentions and evaluation. The paradox of narrative is that it is a universally valid human cognitive mechanism and, at the same time, a form of knowledge created by this mechanism that is validated and maintained socially. “We dream in narrative, daydream in narrative, remember, anticipate, hope, despair, believe, doubt, plan, revise, criticize, construct, gossip, learn, hate and love by narrative.” (László, 2008, p. 157).

Generally speaking solidarity depends on:

1. knowledge (whether one knows the official definition of the word);
2. the existence and level of empathy;

3. the size of the group;
4. the members of the group (acquaintances/strangers);
5. the preparedness to take risks and the ability to analyze the situation;
6. self-esteem;
7. the peculiarities of the people involved (politicians/people in need of help).

There are too many factors involved for one word: 'solidarity' is becoming very contextual. Berger and Luckman (1966) stressed that if reality is socially constructed by human activity, it can be changed by human activity also; but not all people are equal in their power to construct reality – deviance designations may serve political interests and they are created usually through some type of social conflict. Watkins calls this conflict the politics of definition (Berger and Luckman, 1966, p. 69). People use the same language but some words have different meaning for everybody. One cannot underestimate the role of stories (narratives). Words have a people-based, personal meaning that changes in time, besides the so-called official definition: words are always in transition. We have to keep that in mind to avoid misunderstandings.

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**CAN THE DEVELOPMENT OF DOCTORAL  
STUDIES IN SOCIAL WORK RESIST THE NEO-  
LIBERALISM WITHIN ACADEMIA?  
SOME COMPARISONS**

**Abstract**

This article considers the development of a cross-national PhD programme, *Indosow*, International Doctoral Studies in Social Work, led by the University of Ljubjana, and the challenges of establishing a degree of uniformity whilst respecting diverse contexts. There are particular difficulties where social work is pushed to the margins of academia. PhD programmes in social work are considered important because they provide a scientific, research base for the discipline and profession of social work, and part of the process of emancipation from other disciplines. However, making social work more academic also carries risks, which are illustrated by specific examples; these indicate how even the name 'social work' is being replaced (by 'case manager' for instance), thus attacking social work's identity. The article argue for a critical perspective which refuses to let doctoral studies become a virtual endeavour of academics or of those who have no interest in professional social work practice and the impact of their studies on social change, social justice, and lessening inequalities and discrimination.

**Key words**

PhD social work; Bologna process; international social work education; critical social work; social justice; neo-liberalism.

*In other words, if there is no possibility of getting an internationally accepted doctorate in social work according to the standards of IASSW/IFSW and European universities who offer Ph.D. curricula in social work, the chances offered by the Bologna reform will be mainly lost.*

Staub-Bernasconi, 2006

*When I started to work in social work in the 1970s we were a kind of bureaucrats. Now we are asked to be intellectuals!*

Satka, 2008

*I would argue that the aim of social work education should be to enable students to explore the philosophical and professional bases of ethical judgments and actions within social work practice and managerial approaches, and from international and multi-cultural perspective.*

Littlechild, 2009

## **Introduction**

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When presently in most of the European countries students and academics focus on the negative effects of the European reform of higher education (known as the Bologna reform), almost the opposite is true for a historically less exclusivist social work discipline. Critics of the Bologna reform claim that it has opened the gates for the commercialisation of public universities and the domination of the Anglo-Saxon system of higher education throughout Europe, which means greater standardisation and uniformity of academic institutions. On the one hand, higher education has been losing out in terms of quality and exclusivity, owing to the fact that more people are currently studying at universities than ever before: in 2000, an average of 19.4 percent of EU residents had a higher education; by 2007, this figure had increased to 23.4 percent (Kocbek 2009: 33). On the other hand, some see in these

numbers the reform's contribution to decreasing the high rate of young unemployed persons (in the EU, for example, 78 percent of young people age 18 are involved in education; in Sweden, this figure is 95 percent) (*ibid.*).

In social work, the same reform has (at least formally) provided an opportunity for the rapid academisation of social work education and facilitated an increase in research activities at schools for social work. Some critical social workers have even noted that this shift-from a highly under-researched discipline one or two decades ago to the desire for research and the utilitarian need to gain as much research funding as possible-has moved the focus of social work academics away from 'real' practice issues (personal communication with a social worker from Slovenia, 2009).

Another development in social work has been taking place parallel to the Bologna reform: the study of the history of the social work profession. Almost all research on the historical roots of the profession in the last ten years has shown (often to the surprise of the researchers themselves) that, within the core of locally specific ideas of social work, the demand for the scientific development of the discipline was undoubtedly imbedded in the development of the profession from its very beginning (Hering and Waaldijk 2003, see also Zaviršek 2005, 2008, Chytil 2009). These demands appeared alongside the charity aspect of social work. Tracing these strains of thought throughout the twentieth century, it seems that in countries where the charitable system of social protection was not dominant, which was the case in the former socialist and communist countries, there have been fewer obstacles to the academisation of social work than in those countries where charitable or religious organisations remained powerful players within the social sphere (for example, Germany, Italy and certain other western European countries). These historical and ideological differences are influencing the development of doctoral studies in social work across Europe.

## **The establishment of Indosow and its innovative potential: Challenging the old power relations**

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Soon after the School of Social Work in Ljubljana became recognised as a 4-year university degree programme and was renamed the Faculty of Social Work—a huge success following decades of struggles and refusal at the hands of more respectable and powerful university disciplines—a small group of teachers at the school decided to initiate an international doctoral study in social work. With support from friends and colleagues from other internationally oriented universities, five schools of social work applied for an EU Tempus grant in 2005. The EU granted the project, valued at half a million Euros, an amount equal to 50 percent of the total project costs; the money was given to the University of Ljubljana as the leading institution within the project ([www.indosow.net](http://www.indosow.net)).<sup>1</sup>

Working on commonalities and differences between five institutions of higher education, the project members became aware of the fact that social work programmes in Europe differ significantly not only at the undergraduate level, but also at the doctoral level. Some key points where differences arise include the formal conditions for the enrolment of doctoral students and the payment of their tuition; the quality and duration of the study; supervision styles and the number of supervisors involved in supporting students; the length of the required doctoral thesis; and differences in forms of doctorates. The search for compromises to overcome these differences in order

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<sup>1</sup> The partnership institutions are: University of Ljubljana, Faculty of Social Work, Slovenia (the coordinating institution); Alice-Salomon Hochschule für Sozialarbeit und Sozialpädagogik, Berlin, Germany; Faculty of Health and Social Care, Anglia Ruskin University, Cambridge, UK; University of Jyväskylä, Department of Social Sciences and Philosophy, Jyväskylä, Finland and Siegen University, Germany. Other institutions/associate partners include: University of Colombo (Sri Lanka), University of Haifa (Israel).

to create a jointly shared curriculum and a joint programme was an important part of the project, and demanded a great deal of work on the comparative perspective, as well as intercultural communication and a cross-country understanding of specificities in the language, definitions and practice of social work. Indosow had to establish a certain degree of uniformity among the educational institutions involved, but also managed to respect diverse contexts and differences among partner institutions.

Anglia Polytechnic University Cambridge, for instance, offers a Ph.D. programme as well as a professional doctorate (Prof Doc), while none of the other partner institutions offer a professional doctorate in addition to a classic Ph.D. Doctoral programmes in some partner countries, such as Finland, are longer than in other partner countries. Anglia Ruskin Institute of Health and Social Care Cambridge has a 3-year full-time programme on the postgraduate level, but most of the students study part-time and therefore study for at least 6 years. Germany and Slovenia have an open-ended Ph.D. programme. At the Faculty of Social Work Ljubljana, students are required to attend six obligatory doctoral seminars, but the university does not offer a full Ph.D. programme, and its doctoral study is-like that of the Alice Salomon University of Applied Science Berlin (in cooperation with the University of Siegen)-primarily individual-oriented and based on individual supervision. The format of the study reflects former times, when only the very best and most intellectually mature students studied at the doctoral level. At the same time, it creates and tolerates relationships which Michael Vynnytsky, the director of the graduate school at the Kiev Mohyla University, has called 'the system slaved on a single supervisor' (personal communication, July 2009). In contrast to Slovenia and Germany, students at the Department of Social Sciences and Philosophy at the University of Jyväskylä have a number of supervisors from different fields involved in their work during the Ph.D. process. The Finnish system does not recognise the



(often) strong bond between the student and the supervisor, thereby freeing the student from an (often) over-dependant relationship with an 'all-knowing father/mother' and similarly freeing the supervisor from the (often) unspoken obligation to ensure that the doctoral candidate successfully completes the tasks and finishes the doctoral study, (often) regardless of the actual quality of his/her doctoral work. The UK institutions do not use the European Credit Transfer System, which is used by other western countries and all other educational institutions in the project. There are also differences in tuition fees, from a rather high tuition fee in the UK and Slovenia, to no tuition fees in Germany, where the majority of students receive scholarships in order to be able to conduct full-time research for their doctoral study. In Finland, a national database of doctoral degrees, including those from the field of social work, has been established (Karvinen, 2003, in Lyons and Lawrence 2006: 62), which is, at least for the time being, a unique development among European universities. All of these differences made the process of creating a joint international doctoral programme an exciting journey as well as a long and difficult negotiating process.

One of the biggest obstacles-which has been only partially resolved-arose from the fact that, in some European countries with, paradoxically, the longest and strongest traditions in social work, such as Germany and Austria, social work education has been traditionally placed at universities of applied science, which are not eligible to have doctoral programmes at all. The Alice Salomon University of Applied Science Berlin offers a doctorate module for graduate students of social work and other social science disciplines as well as doctoral seminars, but cannot enrol doctoral students. Similarly, St. Pölten University of Applied Science in Austria can educate social workers up to the MA level, but not on the doctoral level. To date, the 'third cycle' of higher education (Ph.D.) has only been available at universities, and not at universities of applied science, despite

the fact that the German pioneer of social work education Alice Salomon (soon after the establishment of the school in 1908, she became a well-known social work thinker and internationally known activist), as well as her Austrian counterpart, Ilse Arlt, emphasised the importance of social work becoming a scientifically based profession as early as the 1920s or 1950s respectively (Staub-Bernasconi 2006a, 2007; see also Maiss and Pantucek 2008; Maiss 2009). Since doctoral studies are inevitably linked to research, this barrier alienates social work education and social work practice from ongoing intensive research work.

One of the reasons for this situation is the persistence of classic universities in some European countries in maintaining their unique status as 'real' academic institutions by keeping social work outside of academia. Another reason might be sought within a traditional charity-based definition of social work closely identified with Christian ideology, which views 'helping the needy' as ideologically more important than academic training and critical research.

Therefore, during the course of the project, it became obvious that both the Alice Salomon University of Applied Science Berlin and St. Pölten University of Applied Sciences would need to find a host institution that would be benevolent enough to carry out the doctoral programme in social work at the university level. This innovation was meant to challenge the old power relations, and it also had political consequences: it sought to ensure doctoral studies in social work for German and Austrian social work students instead of forcing them to find a host discipline to obtain a doctorate. The project initiators' and partners' strategy for finding collaborative host institutions involved negotiations with several universities from Germany and Austria, and was successfully completed in Germany, where, with the support of Prof. Sabine Hering, the founder of the European Network of the History of Social Work, the University of Siegen was willing

to play host to Indosow in collaboration with the Alice Salomon University of Applied Science Berlin. Unfortunately, in Austria the educational structure seems to be more reluctant towards such a change. In spite of the initiatives of project partners who, together with social work academics<sup>1</sup> and professional social workers<sup>2</sup>, tried to invert the old power relations, the project was not able to find a host university in Austria which would be willing to carry out the doctoral programme in social work.

Another set of power relations that was challenged by Indosow is linked to the fact that Indosow itself was initiated by an eastern European school for social work, a development which disturbed and disrupted the hitherto taken for granted dominance of western schools. The importance of this power shift has to be understood in the context of Midgley's (2008) analysis, which showed that the relationships within international social work exchanges were not based on reciprocity, but were unilateral, meaning that the western approach in education for social work was dominant and exported to other parts of the world. The unilateral character of these relations is still in evidence today, especially in research (even comparative research) and academic writing. Almost without exception, social work academics from the west refer to and quote western authors from Anglo-Saxon countries, including non-western authors who migrated to the west (and the same is true for the majority of the non-western

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<sup>1</sup> See the conference directed by Prof. Marianne Gumpinger with the title *Doktorhut fuer SozialarbeiterInnen?* Upper Austria University of Applied Sciences Linz, March 10 2008.

<http://www.fh-ooe.at/campus-linz/aktuelles/fh-ooe-news-linz/fh-ooe-news-linz/article/doktorhut-fuer-sozialarbeiterinnen/> (July 17 2009).

<sup>2</sup> See the international symposium with a double meaning hidden in its title *Sozialarbet hat Recht*, organised by the Association of the Professional Social Workers from Austria in Vienna, November 23-25 2008.

<http://basw-bg.com/doc-published/Conference-Austria%202008.pdf> (July 17 2009).

writers). Despite an increase in comparative research written and published internationally by non-western writers, the work of these authors is not used as a point of reference in written texts. It seems that when promoting equality, many social work academics do so not for themselves, but for others (politicians, professionals, lay people, police, other social sciences).

### **The development of doctoral studies in different countries: some comparisons**

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As mentioned above, only since the year 2000-on the basis of the Bologna reform-have a number of schools of social work throughout Europe and beyond been developing postgraduate studies in social work. In addition, the Berlin Communiqué (2003) made sure that research has become an inevitable part of the activities within social work departments<sup>1</sup>, together with doctoral studies and the promotion of interdisciplinary and inter-institutional activities for improving higher education in Europe (Labonte-Roset 2005, Lyons 2003). Now more than ever, the internationalisation of social work schools is becoming an everyday reality and even a 'mainstream activity' (Midgley 2008: 39). The recent establishment of the first European International Doctoral Studies in Social Work-Indosow-is one result of these relatively new processes.

In some European countries, schools of social work have developed Ph.D. programmes/studies, while in other countries (Austria, Italy, the Ukraine and others), the doctoral level can only be attained within other social science disciplines. Some countries have developed all three levels of higher education, including doctoral programmes: UK, Sweden, Portugal,

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<sup>1</sup> A rare exception is France, which does not yet offer social work training at universities or at universities of applied sciences (Labonte-Roset 2005).

Brazil, India, Finland, US, Hungary, Slovenia, South Africa, Estonia, Czech Republic, etc. (Labonte-Roset 2005; see also Staub-Bernasconi 2006a, Chytil 2009). An early comparative analysis encompassing 12 European countries found that different universities in the EU have different approaches to doctoral programmes in social work; these differences include programme location, the duration of the study, the involvement of a 'host discipline' etc. (Laot 2000). Various studies have revealed some interesting differences between countries:

### *1) Programme location*

Some programmes are located at universities, as is the case, for instance, in the UK, and some are located at colleges linked to the university, as is the case in Portugal (Laot 2000).

### *2) The establishment of the doctoral schools*

Some doctoral programmes are organised within new structures at universities-doctoral schools-while others remain under the existing structure. In some countries, such as Ukraine, the doctoral schools aim to ensure an interdisciplinary perspective within individual doctoral programmes, with a portion of courses being offered to students in all doctoral programmes. Doctoral schools make sure that students are supported not only individually, but also as a cohort group, and that they are closely linked to the university where they study (Ali and Kohun 2006).

### *3) Duration of study*

Some programmes are of a limited duration, as in the UK, Portugal and the Indosow programme, while others do not require students to complete a Ph.D. thesis within a set timeframe. The duration of the study depends on whether students are studying full-time (Ukraine) or part-time (the majority of European universities).

#### 4) *The need for a 'host discipline'*

Many European countries do not grant a Ph.D. in social work (Austria, Netherlands, Greece, Switzerland, etc.), but require social work students to choose a 'host discipline' for their doctoral studies (frequently selected disciplines include sociology, social pedagogy, applied social sciences, societal science and philosophy, education, psychology and social policy). In Ukraine, for example, where there are at least thirty schools of social work at the university level throughout the country, social workers who are interested in studying at the doctoral level (called *aspirantura*, which confers the title of 'candidate of science', the first step in a process ending in title of 'doctor of science') most often choose sociology, social relations, social policy or even the 'psychology of social work' as their host discipline; none of these study programmes are offered at the schools of social work, though this now one of the objectives of the 'ACES' programme presented by Lucas in her article in this issue.

#### 5) *The need for a 'host university'*

As explained above, the Indosow programme has launched an innovation by finding a 'host university' which agreed to carry out the programme in cooperation with a university of applied sciences. So far, this model has been introduced in Germany; in Austria, on the other hand, a host university could not be found.

#### 6) *Different models of doctoral provision*

There are three different models of doctoral provision in Europe and elsewhere:

- Ph.D. (the most common format for original, scientifically based research work);
- Professional Doctoral studies (well-established in the UK and Australia, for instance). Those who favour this type of doctorate claim that the professional doctorate ensures

close collaboration with practice and the work place of the candidate (a triangular system between the student, the supervisor and the professional work team at the work place) and rightly reduces the status of the university as the exclusive place of the creation of new knowledge and science. On the other hand, those who are critical of the professional doctorate emphasise the dominance of the neo-liberal tendencies in education which seek to transform the university into a factory for the production of the evidence-based and positivistic knowledge-based research that justifies policy changes in the social realm. This danger is evident in situations where an applicant is paid by a professional organisation to pursue a professional doctorate (Fink 2006).

- Ph.D. by publication (a certain number of articles published in journals scientifically recognised by the SSCI; countries where this system is found include Sweden, UK, and Slovenia).

### *7) The development of the joint doctoral programme*

Indosow-International Doctoral Studies in Social Work-is the first joint doctoral programme featuring the mutual recognition of doctoral diplomas to be established in Europe. However, it goes beyond Europe through the inclusion of associate partners in the Middle East and Asia, thus providing an opportunity for doctoral students to get involved in a comparative study of social work processes, social welfare and policy systems.

The programme promotes mobility, international supervision (each student has one local and one international supervisor), comparative research and learning from different locally specific contexts. The basic conceptual principles on which the shared programme is based are the social work theories and principles of social justice, inclusion, anti-discriminatory action, diversity, the right of self-determination and agency. Alongside the

doctoral study programme, the founding members of Indosow have established a network of academics, practitioners, user groups and groups of carers, who provide both a source of reflexive knowledge and a foundation for good practice. In the last couple of years, Indosow has developed high-quality doctoral scientific meetings, seminars and exchanges between teachers, supervisors and students of social work and created opportunities for a scientific exchange of literature, concepts, applied studies, methodologies and current ideas in social work and social welfare and for the development of social work science in general.

Despite several differences in the doctoral programmes at different universities, the development of the doctoral studies and programmes in social work attains to several commonalities, including:

- Providing an opportunity for social work students, professionals, and researchers to obtain all three cycles of higher education without having to search for a 'host discipline', thereby preventing what Staub-Bernasconi (2006) has called a 'dead-end of social work education';
- Ensuring greater public recognition for the science and profession of social work
- Making sure that academic knowledge, research and public debates about social work and policy are intertwined and enrich each other and that the academisation of social work contributes to the well-being of service users;
- Encouraging the unification of major stakeholders on the regional, national, and even international level (joint congresses, team work, research work);
- Ensuring the development of social work theories and the emancipation of social work from its old-fashioned dependency on other social science disciplines.



The last item is especially important, since even the global definition of social work (IASSW/IFSW 2004) does not recognise social work as an academic discipline with its own theoretical foundations. Instead of emphasising the scientific knowledge base of social work, it speaks of 'theories of human behaviour and social systems'.<sup>1</sup> Staub-Bernasconi (2006) pointed out some reasons for the persistence of the distinction between the 'scientific' social science disciplines and social work as 'just a profession' without its own scientific knowledge base: a.) the vast variety of social work services in a number of welfare and health care systems such as education, psychiatry, law; b.) the fragmentation of social work into many different occupations, such as rehabilitation, care management, social management etc., prevents the formation of a common scientific knowledge base of social work.

### **The academisation of social work: a way to strengthen the discipline or a virtual endeavour?**

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It is often assumed that the academisation of social work and the focus on (comparative) research has a unilaterally positive effect on professional practice and will inevitably strengthen the discipline. This assumption has to be questioned. It is precisely the positioning of academia in today's world, in conjunction with the re-focusing of academic knowledge at universities in response to pressure from the corporate and political spheres,

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<sup>1</sup> The full definition reads: 'The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilising theories of human behaviour and social systems [my emphasis] social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.'

*[http://www.ifsw.org/cm\\_data/GlobalSocialWorkStandards2005.pdf](http://www.ifsw.org/cm_data/GlobalSocialWorkStandards2005.pdf). (July 10 2009).*

which is transforming the academisation of social work and research activities into a virtual endeavour which does not support greater coherence, professional autonomy and critical thinking in social work.

It would even seem that the opposite is true: the two different societal sub-systems—the social realm of neo-liberal states and academia—actually encourage each other's dependency on market- and profit-oriented thinking. In spite of the expectation that academic processes would strengthen critical reflection upon the hybrid, dual and heterogeneous mandate of the profession manifested in the multiple roles of social workers (helpers of the needy, bureaucrats of the state, welfare officers, managers and advocates), it seems that neo-liberal, (nearly) bankrupt states have had their way in determining academic education. Critical thinking is no longer necessarily a constitutive part of academic discourse, nor is an orientation towards social action, development, change and social movements an inevitable component of social work curricula. It is therefore obvious that academisation does not inevitably strengthen the profession's autonomy and social work's ability to engender social change and critical reflection.

The problem is particularly acute in cases where:

- Academic processes and current social work practices demand *utilitarian knowledge without theoretical reflection*;
- There is a *widening gap between scientific, reflected knowledge and social processes* that happen in practice;
- Social work is being developed at the level of higher education (the development of social work departments on the bachelors, masters and doctoral level), but, at the same time, the *social work profession is losing its generic professional autonomy through fragmentation into many different occupations (case manager, care planner, personal assistant, child's advocate etc.)*;

- Persons enrolling in doctoral studies are *primarily interested in upgrading their social work or professional education, and not in social change.*

Let us take a closer look at some examples. The first process described above can be observed in the widely recognised growing demand that social workers be able to carry out specific tasks for a particular service user, known as the managerial approach in social work. Littlechild (2009) describes it as a process based on the assumption that every social work activity can be managed in a rational way, without taking into account the emotional and social experiences of professionals and clients, power imbalances, or the ideological and value system on which actions are based:

‘Managerial attempts to try to make social work constantly more rational and predictable are having the consequences of deflecting social work from the essential elements which constitute its main strength. Traditional social work expertise has been built on the ability to establish relationships with a wide variety of people, survey the environment for resources and bring these together on behalf of service users, to negotiate with various individuals, groups and organisations and to mobilise their energies, and to enter other worlds and meanings in order to offer help’ (Littlechild 2009: 242).

This expectation makes social work into a utilitarian profession susceptible to being used and misused by particular leading power players within the welfare sphere. As Lyons (2003: 560) observed, ‘social workers are increasingly seen as front line workers (implementers of social politics) who must be “governed” (monitored, controlled, accountable)’. This development is not restricted to countries with a modest critical social work tradition. In western Europe as well, social workers are again becoming social administrators, who are responsible for seeing that persons entitled by the state receive social

transfers (welfare money) according to the law and based on the principles of formal justice. In spite of social work's academic development and the 'third mandate' derived from its theoretical foundation and critical standpoint (Staub-Bernasconi 2007), in everyday practice, social work skills are being reduced to the skills primarily needed to serve the interests and needs of the state instead of the service user and the critical profession itself. This development casts social work 'back in time'. In the former Yugoslavia, for example, state socialism was a time when social work was defined as a profession that carries out the goals of social policy, and an indigenous or locally specific understanding of social work was related to its utilitarian function, which was delineated by the extent to which social workers were able to serve the political aims of the state (Zaviršek 2005; 2008).

Today, the same processes can also be found in the educational sphere, in what is called 'competence-oriented social science knowledge' (also supported by the Bologna reform). This implies a preference for more task-oriented knowledge as opposed to knowledge grounded in theory, and is intended to produce social workers who would be instrumental to the demands of state institutions. Some scholars have already observed a shift in the focus of social work curricula towards 'competence-based social work programmes' (Lyons and Lawrence 2006). Competence-based social work programmes can yield certain positive results, such as professionals who follow strict procedures and are able to use various social work techniques, regardless of their personal orientation and values. On the other hand, this type of curricula is marked by a lack of theoretical paradigms, critical knowledge, and an understanding of the historical, ideological and ethical paradigms on which social work has been historically based and fails to partake of or convey an understanding of how the professional skills and their implementation are inseparable from the value base, personal ethics and orientations of social work professionals. Yan and Tsang (2008) provide an exemplary description of this rather

disconcerting development (the reduction of education for social work to technical skills and the erasure of an understanding of social work ideas and values) in the Chinese context:

'Whereas the idea of science, especially understood in a positivist-empiricist framework, has been subjected to critical scrutiny and challenge in Western social work discourse in the last few decades, Chinese social work scholars promote the use of scientific methods by professionally trained workers or evidence based practice as a defining feature of social work. This rhetoric presents social work as a scientific and apolitical form of helping. Members of this new profession are thus equipped with technical knowledge in the science of helping and are, therefore, less likely to be seen as advocates and practitioners of a subversive value system' (Yan and Tsang 2008: 195).

While on the one hand, schools of social work promote the 'scientisation of social work' in the positive and negative forms mentioned above, on the other, neo-liberal states are responsible for the de-professionalisation of social work. For example, national governments are not willing to open new workplaces for professional and critical social workers, but are rather interested in employing masses of unemployed and non-professionally trained workers in the social sphere. It is a paradox that, at a time when social work schools are witnessing both a horizontal (number of schools and programmes) and vertical (level of degrees offered) expansion, governmental bodies are evermore keen to employ less trained workers, pursuant to their goals of controlling the social sphere, decreasing the unemployment rate, and maintaining social stability through non-critical masses of welfare workers.

In Slovenia, for instance, anti-racist social work was only developed in the past couple of years as a part of the core social work curricula on the undergraduate and postgraduate level; the

very first Ph.D. student presented a thesis on ethnically sensitive social work practice with the country's Roma population in 2009 (Urh 2008; 2009). In the meantime, however, the ministry responsible for social welfare and policy has installed so-called field workers for Roma at various welfare institutions across the country and, by doing so, has brought some people back into the sphere of paid employment. These poorly paid and poorly trained workers found themselves unemployed after the Slovenian companies they had been working for were defeated in competition with companies that employ cheaper, globalised proletariat.

As field workers for Roma, they became an instrument of both the government and the social workers at the local centres for social work, as they have been asked to visit Roma settlements and deliver field reports about the needs of these people. Instead of employing recently graduated social workers who have been educated for anti-racist social work practice, the state employed semi-skilled workers to provide some 'help', but also to maintain the status quo and achieve one of the government's economic aims: reducing the unemployment rate and, consequently, outlay for the social sphere to the greatest possible extent. In the meantime, new generations of trained social workers remain unemployed, despite their academically based knowledge about ethnically sensitive social work practice. Furthermore, older social workers who are already employed are asked to stay in the office and work in social administration, that is, deliver welfare money to those entitled to receive it. If a positive consequence of this kind of de-professionalisation is that some people with experiences similar to those of service users get involved in welfare activities, a negative consequence is the reduction of professional social work activities to those of 'state bureaucrats' who deliver welfare transfers according the formal system of justice defined by the social policy of the state or private humanitarian (religious) organisations.

Similar processes have been noted in China. Despite the rapid growth of schools of social work since 1989 (there are more than 200 schools in the country, and this number continues to grow), the government has employed millions of low paid workers in newly developed community services in order to serve its economic interests through the employment of newly unemployed workers who were previously employed within the state social apparatus or young unemployed persons (Yan and Tsang 2008). At the same time, the government intended to lessen the welfare burden by establishing a large number of state-controlled community centres. Yan and Tsang have shown how serving social needs has been interrelated with serving the political and economic needs of the state, which is interested in modernising its professionals through the implementation of a new social science discipline, but, at the same time, is not keen to challenge the existing social order. Critical social work would inevitably clash with the Chinese understanding of democratic rights and social justice in the areas of disability, gender, ethnicity etc.

The third example comes from the Republic of Kosovo (founded in 2008), where international social work academics, together with a handful of domestic university professors, have tried to establish social work education at the university level.<sup>1</sup> In Kosovo, as in other parts of Yugoslavia, social workers had been active since 1959; during the first decade of socialism, local centres of social work were the basic welfare institutions. As late as the 1990s, there were over thirty such local centres in what is today the Republic of Kosovo. Social work was carried out by people holding university social work degrees, just like everywhere

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<sup>1</sup> See the work done by prof. Ruth Seifert from the University of Applied Sciences Regensburg, Germany at the Pristina University. Cf. Seifert, R. (Ed.) (2004), *Soziale Arbeit und kriegsrische Konflikte*. Muenster: Lit.; *Social Work in South Eastern Europe*, DAAD Newsletter 1, 2008. [http://www.daad.de/imperia/md/content/hochschulen/stabilitaetspakt/newsletter/1\\_2008\\_en.pdf](http://www.daad.de/imperia/md/content/hochschulen/stabilitaetspakt/newsletter/1_2008_en.pdf) (July 20 2009).

else in Yugoslavia, which was the only communist country to have developed a system of professional social work (Zaviršek 2005, 2008). Since the beginning of the year 2000, different international stakeholders, including the United Nations Interim Administrative Mission in Kosovo (UNMIK) and numerous foreign humanitarian and non-governmental organisations and experts in the social field, have set out to restructure the welfare system. Instead of transforming and improving the social and health systems and creating a welfare society in cooperation with the local population, these international players erased what was left from the past in order to establish a completely new system based on privatised social services and private capital.

In order to achieve their goal, the new international power players abandoned social work as a profession and created the impression that 'there was nothing' in Kosovo prior to the arrival of international organisations and security forces. Social workers and pedagogues employed as social workers in the social field got a new official name: *menagjer i rastiti*, which is an Albanian translation of the American 'case manager'. The reduction of social work to 'case management' implies the erasure of the theoretical foundation of the social work discipline and, consequently, its de-professionalisation and de-politicisation. Social workers and pedagogues were dismissed by the international organisations not because they were useless, but rather with the aim of creating conditions for the privatisation of the welfare society and its social institutions. In the author's view social services are increasingly becoming an object of the market economy introduced by the forces of neo-capitalism. In order to secure the success of this operation, the professional identity of those who had been working in the social field for decades and who believed in the value of the social state had to be completely destroyed. One way to destroy professional identity is by taking away the name that,



among other things, constructs that identity. The introduction of a new name affects the persons' professional identity and helps to destroy the roots of social work.

These three examples show that, on the one hand, social work has developed its own theoretical foundation of research and academic credibility; on the other, it has come to be widely viewed as a tool in the hands of social policy welfare players (politicians, religious humanitarians, international stakeholders) who are not only constructing welfare regimes, but also pursuing their own particular political goals. Task-oriented social work knowledge and know-how without a foundation in critical theory can easily be achieved, especially in countries which are characterised by a modest degree of service user involvement and a short history of social movements, such as Slovenia, China and Kosovo.

These are only a few examples of how the gap between social work as an academic, research-oriented discipline and as a practice profession is widening. In other words, although the interest in research, academic work, and social work publications displayed by academics and professionals within the discipline has never been greater and continues to grow (Lyons 2003; Labonte-Roset 2005), social work is becoming increasingly structurally marginalised, instrumentalised and de-professionalised in many countries in different parts of the world.

As emphasised above, the academisation of social work does not inevitably strengthen the profession's autonomy and social work's ability to generate social change and critical reflection. Yan and Tsang (2008) provide a radical interpretation of these developments when they claim that, in China, for instance, 'social work practice exists mostly in the virtual world of academic discourse' (*op. cit.*: 196). This is especially true in cases where doctoral studies target persons whose primary

intent is upgrading their formal education. It is important to stress that, in countries with a modest history of academic social work and social work research (as is the case in eastern European countries), a relatively high number of doctoral candidates are coming not from social work, but from other disciplines, such as nursing, social pedagogy, and social management, many times in search of a quick and easy promotion. In some countries, social workers and other welfare officers who work in governmental jobs at ministries, welfare departments and the like are returning to the university to upgrade their formal degrees in ever greater numbers.

In order to prevent this, the new doctoral school at the Kiev Mohyla University in the Ukraine decided to accept only full-time doctoral students (personal visit and communication, July 2009). Welfare officers from different ministries and directors from large public care institutions or welfare departments were identified as those who would be most interested in upgrading their education, and, it was felt, this pragmatic view on education implies indifference towards the deeper values of social work, including its commitment to change and ethical principles (although, regardless of their initial motivation, welfare officers could potentially gain new perspectives on their work in the social sphere from the programme).

Something similar can be observed in Slovenia, a country with a population of two million and only one school of social work. In such a small country, it often happens that doctoral students are supervised by peers, long-time colleagues, or even friends. These types of familiar relations often negatively affect the doctoral process, as personal relationships inevitably influence the quality of the doctoral study. Not only does the dependency of the doctoral candidate on his/her supervisor hinder the quality of the doctorate, but more frequently, it happens that the supervisor is dependent on his/her candidate in cases where the candidate holds a politically or institutionally powerful

position which can affect the supervisor's access to research money, extra job contracts, etc. The one-supervisor system, as already pointed out, actually enslaves both the student and the supervisor, who is often expected to ensure that the student succeeds in the study regardless of his or her capabilities for analytical thinking and research work. For this reason, the single supervisor system has been avoided in many countries through systems that use multiple or external supervisors (as is the case at Hong Kong University and Hong Kong Polytechnic University and in the Indosow programme).

In their analysis of how the Chinese government is installing a particular social work which would serve the political agenda of the state, Yan and Tsang (2008) revealed a similar phenomenon. The government wants to modernise the social system, a process which includes academically upgrading those professionals who already work at ministries in the social sphere, but, at the same time, wants to keep the existing power order intact.

Again, parallels between the current situation and 1950s socialist Yugoslavia can be found. Looking to upgrade the formal status of welfare officers already working at various jobs within the social sphere, the communist leadership introduced the possibility of a quick diploma in social work; two-year higher education with a system of scholarships, also for those who had only completed elementary school (Zaviršek 2005; 2008). The government made use of those persons who had already shown a commitment to the new political system (since they had been active in the partisan struggle) and awarded them with a diploma in 'socialist social work'.

## **Concluding remarks: resisting neo-liberalism in academia**

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All of these examples show that, besides its importance for the development of doctoral studies and comparative research in social work, the critical perspective implies refusing to let doctoral studies become a virtual endeavour of academics or of those who would like to get their hands on a Ph.D. without having any influence on professional social work practice. Therefore, truly critical social work academics and professionals would rightly reject doctoral studies and programmes which have no impact on social change, social justice, and lessening inequalities and discrimination. Not only a 'PhD thesis fit for publication', but a critical and analytical thesis, which would reflect current inequalities and people's struggles, is what is demanded within the academisation of the social work profession.

Having been constantly in danger of being subsumed by other, more 'powerful' disciplines, for social work, the development of doctoral studies means academic independence from other social science disciplines. However, where they once faced the threat of being subsumed by traditional social science disciplines, social workers must now deal with attempts to force them to merge with newly established applied social science disciplines lacking critical theoretical thinking and traditions, such as 'management in public health' or 'social administration'. Where the past dominance of traditional disciplines came from within academia itself, the new form of dominance comes from 'outside'. The corporatist logic of the higher education business, as well as the profit-oriented social business, demand courses and subjects which forego theory in favour of more practical and managerially oriented approaches (social and health management, social administration and financing, etc.).

The corporatist orientation of education is not interested in viewing social work as a social science discipline, but rather as an agency for 'helping the needy', wherein the particular state defines who the needy are, while the profession is only free to choose the technical tools it will use to alleviate a portion of the suffering. In such a context, the powerful concept of empowerment has been replaced with the much less critical 'strength perspective'. This move is in line with another well-known social work slogan which has also been used by international banks when advertising their services in poor parts of Asia or Africa (advertisements on the BBC): 'helping people help themselves'. This shows how, in today's world, social work ideas might easily merge with neo-liberal ones.

Therefore, it is important for social work academics to develop ways to create and sustain reflexive, theoretically based, critical research-oriented doctoral studies based on the interdisciplinary and comparative perspectives which could support and strengthen social work. This article advocates for the development of this kind of studies and underscores the huge need for social work doctoral students who are willing and able to generate, over the course of their doctoral study, critical, reflective and transformative scientifically based social work knowledge, ideas, values and ethics which go beyond the formal descriptive knowledge demanded by either current welfare and social policies or today's academia.

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## ***HIV/AIDS EPIDEMIC AS A CHALLENGE TO POLICY TRADITIONS IN UKRAINE***

### **Abstract**

Ukraine has one of the highest and most rapidly growing rates of HIV/AIDS in Europe. Since 2003 several Global Health Initiatives (GHIs) have committed to providing over US\$ 300 million towards the control of HIV/AIDS in Ukraine. These funding mechanisms have had a significant impact on the availability of services for people living with HIV/AIDS (PLWHA) and populations at risk of being infected, as well on the health system including on human resources, governance and management capacity, and on nongovernmental providers of HIV/AIDS services.

This paper highlights the effects of the largest external funder of HIV/AIDS programs in Ukraine, the Global Fund to Fight AIDS, Tuberculosis and Malaria and provides recommendations to improve the effectiveness of further funding. It is based on 2006-2008 research in three regions: Kyiv, Odessa and L'viv .

### **Key words**

HIV/AIDS epidemic; policy to combat HIV/AIDS; the Global Fund; access to services; strengthening of civil society.



## **Introduction**

The emergence of HIV as a global pandemic challenged health systems whose resources, both human and monetary, were sharply reduced and were in a state of transition. Given the high cost of AIDS treatment and the long term need for the drugs and systems to deliver, treatment of people living with HIV/AIDS (PLWHA) was not considered to be cost effective, despite the burden of the disease on economies and societies.

High levels of injecting drug use in the former Soviet Union countries of Eastern Europe and Central Asia have created some of the fastest growing HIV/AIDS epidemics in the world. In Eastern Europe the majority of new HIV diagnoses are reported in Russia and Ukraine: the latter has the fastest growing epidemic in Europe. The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) has mobilized substantial new resources for HIV/AIDS control in the region and these have enabled increased population coverage of HIV/AIDS services (GFATM, 2008). While clear-cut evidence of the effects of the GFATM is not yet available recent reviews suggest the initiative is having positive effects through attracting high level political support, mobilizing new stakeholders, notably civil society, and promoting new approaches to performance-based funding (Biesma et al, 2009).

It is therefore important to understand the factors that constrain access to GFATM-financed HIV/AIDS services in order to assist decision makers develop effective country programs. However, limited systematic research exists on the sub-national effects of the GFATM, especially in the concentrated epidemic settings of Eastern Europe and Central Asia. This paper aims to fill this knowledge gap by examining key barriers to accessing GFATM-financed HIV/AIDS programs based on a study conducted in Ukraine.

Studying the influence of global initiatives in Ukraine is particularly important given the slow progress that Ukraine has made in stabilizing and reducing the spread of HIV/AIDS. In 2008 the number of registered PLWHA was 131,000 - a rise from approximately 46,000 in 2002. Many PLWHA are unaware of their status and a current estimate says there are about 400,000 HIV-positive people in Ukraine. This is despite the legislative, political, organizational and administrative measures which have been taken in response to the epidemic, including the recently formed National Coordination Council for HIV/AIDS and increased activities of nongovernmental organizations (NGOs) providing HIV/AIDS services.

## **Methodology of research**

The study was funded by the Open Society Institute in New York and had been conducted in 2006-2008 by the School of Public Health and the School of Social Work at the National University "Kyiv-Mohyla Academy". The study aims to explore the effects of Global HIV/AIDS Initiatives (GHIs) on the Ukrainian health system. The partners in this project are the London School of Hygiene and Tropical Medicine and the Royal College of Surgeons in Ireland. The study forms a part of the *Global HIV/AIDS Initiatives Network* (GHIN): <http://www.ghinet.org>.

This paper presents results from the final stage of the study based on fieldwork carried out in Ukraine from January – June 2008. It aims to assess the effects of global initiatives in Ukraine at national and sub-national levels, including the effects on scale-up of HIV/AIDS services, coordination of HIV/AIDS programs, health systems capacity and equitable access to HIV/AIDS services. The study focuses largely on the Global Fund to Fight AIDS, TB and Malaria (Global Fund) which is the largest external funder of HIV/AIDS programs in Ukraine.

Qualitative and quantitative research methods were used to collect the data. Tools for the study include: document review (research reports and papers, presentations, statistics and policy and programmatic documents); semi-structured interviews with national and sub-national stakeholders and including members of NGOs and semi-structured and structured interviews with clients of HIV/AIDS services; and structured interviews with providers of medical and social services. Tools were developed jointly by the Ukrainian team and London GHIN partners. Quantitative data from the questionnaires were analyzed using SPSS using descriptive statistical techniques. The analysis of qualitative data from documents and semi-structured interviews was conducted using the Framework Approach to qualitative data analysis to capture both a priori and emerging themes.

The selection of study regions (Kyiv, Odessa and L'viv) was based on a number of criteria: the epidemic situation in those regions; the activities of Global Fund in each region; and the level of development of the nongovernmental sector. Kyiv and Odessa are priority regions where high levels of global health initiatives financing (reflecting high HIV/AIDS prevalence) have been invested and a substantial number of projects have been implemented by NGOs. L'viv is a non-priority region where official statistics indicate a low level of HIV/AIDS. There are few Global Fund-financed projects in this region, although the nongovernmental sector is relatively active there. Including L'viv in the study makes it possible to compare priority and nonpriority regions and to identify the influence of the Global Fund on the development of HIV/AIDS programs and services in contrasting regions of Ukraine.

A total of 49 stakeholders were interviewed using a semi-structured topic guide during the 2008 phase of the study: national stakeholders (n=21); Kyiv (n=12); Odessa (n=10); L'viv (n=6). Stakeholders were defined as individuals making decisions about HIV/AIDS programs or implementing those programs at national or sub-national levels. They include representatives

from government and international organizations, from regional government departments, and from national and sub-national NGOs including members of national and sub-national HIV/AIDS coordination councils.

50 service providers were interviewed using a structured survey tool during the 2008 phase of the study across the three case study regions: Kyiv (n=20); Odessa (n=20); L'viv (n=10).

25 clients participated in in-depth qualitative interviews which were conducted using semi-structured topic guides during the 2008 phase of the fieldwork: Kyiv (n=10); Odessa (n=10); L'viv (n=5). Clients were sampled who were using government medical services (n=12) and nongovernmental social services (n=13) across the three case study regions.

## **Key findings**

### **Ukrainian policy on HIV/AIDS: stages and challenges**

Currently, HIV/AIDS is identified as a priority issue for Ukrainian state public health and social care policy. HIV/AIDS policy covers a broad range of interventions including prevention and treatment, care and support for PLWHA. There have been several distinct periods that have influenced the development of HIV/AIDS policy in Ukraine:

1. Post-soviet period (first half of the 1990s) whereby HIV-positive people were marginalized and stigmatized. During this period, intravenous drug users (IDUs) were forced to have HIV tests, and HIV-related services were entirely within the domain of medical rather than social institutions. Whilst national legislation on HIV/AIDS met international standards, a number of studies conducted in Ukraine have shown that these standards were often violated.

2. A bureaucratically-orientated period (mid-1990s to 2004) characterized by political rhetoric concerning the prevention of HIV/AIDS and treatment for PLWHA that was not backed up with financial support. As a result national HIV/AIDS programs were not implemented or evaluated effectively.
3. A period of rapidly expanding HIV/AIDS programs and services (2005 until present). This is a result of substantial donor support, in particular Global Fund grants, and significant funding of nongovernmental organizations to provide prevention, care and support services (Semigina, 2007).

A Law of Ukraine on the Prevention of AIDS and Social Protection of Population has been in effect since 1991, and this is the first political document that sets out the role and responsibilities of the state in reducing the spread of HIV/AIDS in Ukraine (Rudiy, 2004).

Since 1992, the Government has implemented five successive national programs for the prevention of HIV. The fifth national program was implemented in 2004-2008. It had two components: one aimed at preventing the spread of HIV/AIDS, and another for providing treatment, care and support for PLWHA. The program promoted actions that focused on specific groups of people including 15-24-year-olds and IDUs. It also highlighted measures to reduce mother-to-child transmission of HIV. However, the priorities, content and structure of the national program were similar to previous programs; it did not build upon the successes and failures of past efforts, even when these have been ineffective in reducing the spread of HIV/AIDS.

In order to implement the national strategy, local level programs have been developed across Ukraine. However, previous research on the programs in Kyiv, Odessa and L'viv suggests that these correspond with the national strategy: they do not reflect regional differences and priorities.

One impediment to the effectiveness of HIV/AIDS policies in

Ukraine is the discrepancy between the considerable need for care, support, treatment and preventative measures, and the modest state financing of these needs. There is also a contradiction between the centralized system of public health and decentralized provision of medical and social services. Other barriers to the implementation of policies include: frequent changes of government resulting in a lack of continuation of policies, an absence of political will, and poor interdepartmental and intradepartmental cooperation between various government structures.

It should be noted that whilst members of the government speak about their commitment towards preventing HIV/AIDS, society's negative attitude towards PLWHA - largely vulnerable groups, such as IDUs and commercial sex workers - limits the measures that can be used to control the epidemic as this may affect their popularity with voters. Research suggests that although many government officials view HIV/AIDS as a priority issue for state social policy, current measures employed to prevent the infection are considered to be ineffective: the rating of such measures is very low (UNAIDS, WHO, 2008).

### **Scale up of HIV/AIDS services**

At the beginning of 2004 there were few HIV-services in Ukraine and most government-run AIDS centers only operated in regions with relatively high infection levels (priority regions). Government medical services dominated: social services for children, families and youth had a limited role in preventing the epidemic and few other HIV/AIDS-related nongovernmental organizations existed. Those which did exist had limited funds to deliver services.

Over the past decade, many international organizations and global initiatives have responded to the global HIV/AIDS epidemic. Ukraine has benefited from financial assistance from the GFATM and the World Bank. In 2004, Ukraine received funding as part of the Round One Global Fund HIV/AIDS Program. The Principal Recipient of the grant, the International HIV/AIDS Alliance, concentrated efforts in the eight priority regions with the highest incidences of HIV: Kyiv, Cherkassy, Donetsk, Dnipropetrovsk, Kherson, Mykolaiv, Odessa and Crimea. The program disbursed over 200 sub-grants to 130 Ukrainian and international organizations to implement the work. Their purpose was to provide prevention, care and support services for local communities, and to undertake program activities at the national level including ARV treatment, mass media campaigns and the implementation of HIV/AIDS educational programs.

Respondents indicated that the decision to invest in the eight priority regions was influenced by earlier activities funded by USAID, whose presence in these regions had developed the infrastructure to deliver some HIV/AIDS services. This was seen by interviewees as allowing Global Fund money to be used more effectively.

By 2007 the Global Fund grant funded 469 government and nongovernmental organizations to carry out HIV/AIDS projects in all regions of Ukraine. Funds were spent on various activities including:

- Voluntary counseling and testing and support services, including services for HIV-positive children
- First and second line ART
- Prevention services including the distribution of condoms
- Mass media campaigns
- Advice on healthy lifestyles
- Syringe exchange services

- The development of a self-support movement and nongovernmental centers
- Implementing support and care programs in prisons
- Purchasing and delivering treatment and equipment
- A national HIV/AIDS information “hotline”

As a result of funding from GHIs the number of people receiving antiretroviral therapy (ART) increased considerably from 53 (2003) to 5,684 (2008) and is currently approximately 9,000 (March 2009). The percentage of PLWHA receiving ART increased from 21% in 2005 to 35% in 2007. By 2007 75% of children with HIV and 93% of HIV positive pregnant women were receiving treatment. Despite this progress, demand for ART still outweighs supply, and increases in the number of people receiving treatment are less than the number of newly registered HIV cases.

In Ukraine, almost 80% of the work aimed at preventing the spread of HIV/AIDS is financed by the Global Fund. Preventative programmes include needle/syringe exchange programmes, opiate substitution therapy, and the distribution of information materials for young people. Most preventative services are carried out by NGOs who sometimes collaborate with government organizations.

In 2003, 0.12% of the population had been tested for HIV. By 2007 this had risen to 15.5%. Despite improvements in figures, testing without consent (for instance at tuberculosis and drug clinics) is common and few people receive pre- and post-test counselling (Scherbina, 2008). Implementation of the Global Fund program has spurred the development of social support and care services including new community services and palliative care programmes. Scale-up has, however, been limited by a lack of trained social workers and social institutions outside large cities.



## **Human resources for HIV/AIDS programs**

Between 2004 and 2007, numbers of workers increased in most governmental and nongovernmental HIV-service organizations. Despite this scale-up, interviews with service providers reveal that staff shortages remain, and workloads have increased. The general feeling of increased workload is likely to be a result of more administrative responsibilities such as keeping records, maintaining databases and preparing reports.

The implementation of Global Fund programs in Ukraine has been accompanied by increased attention on developing the skills of managers and workers that provide HIV/AIDS services and prevention programs. Common training programmes include voluntary testing and counselling, HIV prevention and social support. These are usually short-term, lasting between 1-3 days.

Most staff working at HIV-service organizations considered themselves to be motivated to work. Important factors that motivate staff include: feelings of empathy towards clients, positive experiences of team work and good working conditions.

At the end of 2007 and in 2008 HIV/AIDS service organizations received financing through two principal recipients as part of the Global Fund Round Six HIV/AIDS grant - the International HIV/AIDS Alliance in Ukraine and the All-Ukrainian Network of People Living with HIV (Network of PLWHA). There were diverse views among respondents about the transition from one to two principal recipients, and about the performance of the Network of PLWHA, which was seen as having limited experience in managing large programs. Some respondents, especially regional representatives, suggested that the Network of PLWHA needed to develop its capacity so that it could adequately perform the functions required for managing grants.

## **Access to HIV/AIDS services**

Evaluation of HIV/AIDS service providers' and users' accounts of access to HIV/AIDS services reveals differences in opinion between these groups: HIV service providers claimed that the majority of clients who presented to their organizations were offered services, whereas respondents pointed out that significant barriers to access exist. Stigma and discrimination are major barriers to accessing services with half of interviewed clients saying that they had experienced negative attitudes and exclusion due to their HIV-positive status.

Half of clients interviewed said they had experienced negative attitudes and exclusion due to their HIV-positive status. This has mainly taken place in medical institutions, where confidentiality has been broken and medical personnel refused to provide some services. Examples include: staff refusing to do a blood analysis in a polyclinic; staff refusing to provide treatment; the ambulance service not accepting a call. One reason for this is that they are not aware of their rights, although some clients had tried to defend their rights in such cases or appeal to the hospital administration regarding refusal of medical services:

*“There were cases 5-6 years ago when medical doctors refused to help, referred to each other, no one wanted to deal with me. It had happened because I was unprepared; I didn't know laws and believed more to people in white smocks. There were refusals; they didn't want to take to the hospital with high temperature. Then I learned laws. I just know how to explain without being rude. Some doctors don't know what I know.”*

Stigma and discrimination towards PLWHA can prevent access to services in other ways. For instance, past research has found that some infected people avoided AIDS centers and

other services after finding out that they were HIV-positive and were forced to sign a document that admits personal criminal responsibility if they pass the infection on. Some HIV-positive pregnant women are recommended to abort their pregnancy, rather than being offered treatment and vertical prevention (Human Rights Watch, 2006). Research has also found that when PLWHA do receive services, these are lower quality; they are sometimes humiliated when they receive care and they are forced to pay additional money for services (UNDP, 2008).

Other barriers include: lack of qualified personnel, equipment, medication and information regarding available services, poor coordination between services and geographical inaccessibility.

## **HIV/AIDS coordination structures**

In 2002 a national HIV/AIDS coordination council was established, consisting of government members, international development actors and civil society members in response to the Global Fund requirement as a condition of receiving a grant. Whilst many key stakeholders consider the creation of the Council to be a positive step because it serves as a good example of cooperation between government and nongovernmental organizations, the functioning of the Council has been criticised as it meets infrequently and has limited powers beyond advising and dealing with financial issues and preparing grant proposals.

The study also revealed that coordination structures at the sub-national level were particularly weak and lacking decision making authority in some regions. In Kyiv and L'viv respondents considered the regional coordination councils to be a formality without doing any specific work. Respondents in Odessa were more positive about the coordination council. For example:

*“[Officials] are trying to help with these issues somehow; and as a result financing is being allocated locally.”*

Besides the national Coordination Council, several unofficial coordination mechanisms exist. For instance, the International HIV/AIDS Alliance holds regular meetings of stakeholders and the United Nations agencies also holds thematic meetings relating to HIV/AIDS. In addition, public councils have been formed at the ministries of Ukraine where representatives of the civil society participate.

Key factors impeding the effective functioning of national and sub-national coordination structures include: frequent changes in senior official within the Ministry of Health; limited legal culture and failure to execute laws; orientation of coordination mechanisms towards processes rather than results; and a lack of effective communication between partners. Key informants reported that HIV/AIDS is considered to be an exclusively medical problem in Ukraine, thereby justifying the limited engagement of non-health government departments in HIV/AIDS-related matters.

## **Health systems capacity**

The Global Fund has had a positive impact on governance and leadership - for instance by promoting transparency among government health service providers and improved management practices. It has also contributed to strengthened systems of epidemiological surveillance and country monitoring and evaluation systems. The introduction of the Global Fund grant has led to gradual changes in regulation and legislation such as the development and publication of national clinical protocols on ART, treatment of opportunistic infections in HIV/AIDS patients

and methodological recommendations for laboratory monitoring of HIV infection and ART.

Nevertheless, several barriers to change exist and several key respondents reported that they have doubts about the extent to which the Global Fund can have a substantial impact on strengthening the Ukrainian health system. Many stakeholders stressed that the current Ukrainian health care system, which was built on the old principles of administration and financing of health services (the Semaschko model), is not ready for innovations stimulated by the international organizations.

*“The current health system was not ready for the changes that had been proposed by the Global Fund. The new processes were started under the principles and basics of the system introduced by Semaschko at the beginning of the USSR establishment. Now the Global Fund proposed to review the approaches based on the basics of modern health systems in developed countries with involvement of patients into health care provision. This position was not promoted and discussed in the Soviet Union where the patient was a sort of “experimental rabbit”, and the whole system was build on the idea that patients had no rights or demands.”*

## **Strengthening civil society**

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Many of the services financed by the Global Fund are provided by NGOs and community organizations. These are sometimes based at, or in cooperation with, government organizations. Since the Global Fund program was implemented, NGOs have played an increasingly important role in delivering HIV prevention, care and support services. In particular, this study suggests the peer-to-peer approach to providing services for vulnerable groups such as drug users and sex workers is

effective; this approach was valued by clients and helped to break down the barriers between providers and clients, thereby improving access to services.

Respondents pointed out that the Global Fund has had an impact on the development of civil society in a number of ways:

1. The principal recipients of the Global Fund grant are nongovernmental organizations. In 2007 and 2008 the majority of HIV-service organizations in Ukraine received financing through the two Global Fund principal recipients: the International HIV/AIDS Alliance in Ukraine and the All-Ukrainian Network of People Living with HIV. Both organizations have become important actors in Ukrainian policy to combat HIV/AIDS.
2. A substantial part of funding has been disseminated among NGOs. The research suggests that in Kyiv, Odessa and L'viv, between 60% and 85% of funding for NGOs is from the Global Fund.
3. NGO staff have received training, including in topics related to service provision and organizational management.
4. NGOs have become involved in decision-making processes relating to public health policy and HIV/AIDS. This is partly the result of the Global Fund's requirement that the National Coordination Committee that includes representatives from civil society organizations.

Interviewees summarized some of the ways that civil society organizations have been strengthened:

*“Civil society has got new development that manifested in technical and professional development of HIV-service organizations in the last five years. They are now a powerful force.”*

*“The significant amount of the Global Fund money was allocated to the development of civic society, strengthening its response to HIV epidemic. I was a member of expert group within tender*

*committee and I know how HIV-service organizations, local branches of the Network of People Living with HIV/AIDS fought in transparent contest with each other for the right to implement a certain project. So, it is now possible to say that civic society has potential to provide HIV services.”*

At the same time the dependence of many NGOs on support and financing from the Global Fund and other GHIs raises issues of their sustainability in the long-term.

## **Discussions**

The major strength and rationale for this paper is that it has taken a systematic approach to selecting and reviewing the evidence of the health systems effects of specific global health initiatives (the program of the GFATM in Ukraine) in what has become a politically-charged arena. It shows that major transformations were undertaken both in service provision and policy practices, including interdepartment cooperation, introduction of the national and regional coordination councils, which enforce straightening of the civil society and thus the horizontal level of public policy, changing of the public opinion regarding HIV, HIV-positive people and measures to combat HIV. The international organizations and their beneficiaries in Ukraine can be considered as the main challengers to existing practices and the driving forces for these transformations.

Despite our systematic approach, the study ran into a number of methodological problems. It has been difficult to identify the impact of specific inputs from the Global Fund as there are several national and international funding streams for HIV/AIDS programs operating simultaneously, which are at times channeled through the same organization. Understanding the problems of attribution and the multitude of influences of healthcare programs and their effects on the health system has led us to evaluate the development of HIV/AIDS services in general

and not in relation to specific international programs. Moreover, the study focused on HIV/AIDS programs in a limited number of case study regions making it difficult to generalize these subnational findings to the whole of Ukraine. Thus, the study is more oriented towards the evaluation of inputs, processes and outputs and identifying key lessons for policymakers and program implementers, and less to the evaluation of outcomes and impacts attributable to a specific program.

## **Recommendations**

A number of practical recommendations stem from the study:

### *For Global Fund Principal Recipients*

- Review the system of distributing funds among sub-recipients of the Global Fund to promote increased transparency - for example by widely announcing bid competitions and clarifying their conditions and criteria for selection.
- Increase consultation within the regions of Ukraine about their priorities for HIV/AIDS programs and adjust programs accordingly.
- Monitor and evaluate training programs for personnel development among HIV/AIDS service organizations and pay more attention to long-term and systematic training of workers, in particular within social care services and organizations.
- Evaluate the quality of the past activities aimed at preventing the spread of HIV among vulnerable groups in order to implement more effective methods and technologies; procure material and intellectual resources to introduce contemporary structural preventative work directed at motivation for actual changes in behavior.
- Give more attention to the organization of effective



preventative programs for sexually active youth, and for those who never studied after high-school graduation.

- Initiate a review of different models of integrated provision of HIV/AIDS services that currently exist and promote those models that are found to be effective.
- Continue to provide information and education about HIV/AIDS, both to extend knowledge about the HIV, where to seek help and existing services, and to form a more favorable public opinion and positive attitude of staff providing HIV/AIDS services. Cooperation with mass media is one way to achieve this.

*For Government and Governmental institutions of Ukraine*

- Increase country ownership of internationally funded HIV/AIDS programs in Ukraine by invigorating the work of the National Coordination Council for Prevention of the Spread of HIV/AIDS, engaging HIV-positive activists more actively in the work of the councils at the national and regional levels, and extending the powers of these councils.
- Consider the possibility of granting the status of non-departmentally aligned governmental structure to the Committee for Combating HIV/AIDS and other socially dangerous diseases, thus taking it out of the structure of the Ministry of Health in order to promote greater inter-sectoral collaboration across line ministries.
- Introduce specialized training courses for medical and social specialists to work in HIV-services, allocate state financing to improve the qualifications of HIV-service workers and promote standardization and quality of such training.
- Intensify work towards developing and implementing quality standards of social services for PLWHA and HIV vulnerable groups.
- Outline the norms for keeping information about HIV status confidential. This could be achieved through the development of a standard act to regulate the collection,

storage and circulation of information.

- Review the practice of criminal liability for further spread of HIV by PLWHA.
- Introduce primary prevention activities at the national level through health promotion campaigns to increase access to information about the HIV, and help overcome misperceptions of HIV.

*For HIV/AIDS service providers*

- Increase transparency and public reporting on current and projected activities.
- Provide more information to clients about the eligibility criteria for receiving services.
- Increase levels of legal knowledge among PLWHA including their rights and mechanisms for protecting these rights.
- Intensify the work with personnel towards improving their attitudes towards HIV-positive people.
- Promote increased professionalism among workers who do not have specialized education, including peer-to-peer workers.
- Increase the intensity of preventative programs and their reach of highly vulnerable groups; review the content, forms and methods of preventative programs.

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