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Carolyn Goossen & Michael J. Austin

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ABSTRACT

Forming partnerships with service users became a requirement for social work education programs in the United Kingdom as of 2003, leading to the development of innovative approaches to social work education that involve service users as experts who are helping to teach the future generation of social workers. This article examines the perceptions of service user involvement and how it is implemented in the United Kingdom in the social service sector and the university setting, and concludes with implications for the United States.

ARTICLE HISTORY

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Service users have increasingly become involved in the planning and delivery of social services in the United Kingdom. A new and substantial body of literature examines service user participation in the government-run and community-based social services sector, and many scholars make the case that this involvement is necessary for social service reform (Beresford, 1994; Beresford & Croft, 1993; Webb, 2008). Indeed, it is seen as a key step in moving away from the bureaucratization of social services where the social worker becomes distanced from the service user's perspective (Askheim, 2011; Järvinen & Mik-Meyer, 2003). Forming partnerships with service users has also become a requirement for social work education programs in the United Kingdom as of 2003, leading to the development of innovative approaches to social work education that involve service users as experts based on experience, which is valuable for the education of future social workers. This article examines the different ways service user involvement is perceived and implemented in the social service sector and the university setting in the United Kingdom. It begins with the definition of service user involvement and related legislation followed by a discussion of the impact of service user involvement. The focus then shifts to social work education in the United Kingdom and concludes with implications for the United States.

Defining service user involvement

Service user describes people who use, or have used, services such as mental health services or disability-related services. In the United Kingdom's Department of Health, the term refers to "anyone who has experienced mental distress, may or may not access mental health services and chooses to define themselves as a service user," as well as "people with previous experiences of distress and/or services and consider themselves 'recovered' but who still identify with the issues experienced by those with mental distress" (Health and Social Care Advisory Service, 2005, p. 11). In the United States and Canada, terms such as *consumers* or *clients* are commonly employed in a similar context. The literature from the United Kingdom suggests that the term *service user* is preferred because people who "use services" are perceived as having some control over those services, similar to the relationship between consumers and businesses (Coldham, 2012, p. 4), although others dislike the term because they feel that *user* implies being a passive recipient of

services (Gupta & Blewett, 2008). McLaughlin (2009) explores the use of all the terms and advises us to keep searching for another term.

Involvement, another term that has numerous meanings, is used to describe someone becoming active in one's own care and in the care of others in similar situations. Some prefer *participation* instead, as it implies being actively and voluntarily involved (Coldham, 2012). Others argue there is a continuum of engagement, especially when service users are more extensively engaged with service providers, leading to a shift from a more passive sense of "user involvement" to a more proactive role of "user participation" (Kjellberg & French, 2010, p. 2). Some choose to distinguish between "management-centered user involvement" where service users take part in a preexisting structure using a process defined by professionals, and "user-centered user involvement," where service users help define the organization's objectives and priorities (Moriarty et al., 2007, p. 15). Indeed, the way service users become involved—or are asked to become involved—is a contentious area because it either becomes a mechanism to help service providers do their jobs in a more effective way within the current power structure, or it can be a truly empowering way to share power between service users and service providers. In either case, the focus of user involvement is fundamentally about involving people who use human services in the planning and decision making regarding their care and the care of others.

Support for user involvement

Service user involvement in the form of client self-determination and strengths-based practice are key principles of social work practice and can be attributed to a number of factors. First, service users who have increasingly voiced their criticism of the way services are delivered or of discriminatory practices have become effective at pressuring organizations to involve clients in the decisions that affect them. Second, government policies have begun to explicitly promote service user involvement, which can be linked to various scandals highlighting failings in services in the United Kingdom that were followed by citizen outrage (Coldham, 2012).

Participation is also seen as a way to illustrate good intentions and responsiveness on the part of government and as a way to revitalize civic engagement and the potential to increase service user voting behaviors as well as participation in political parties (Social Care Institute for Excellence, 2007; Webb, 2008). Thus, it is a way policy makers can show their commitment to a participative democratic process (Beresford, Green, Lister, & Woodard, 1999). Some also see the importance of this movement as extending beyond the scope of social services and political involvement. For example, the notion of "nothing about us without us" has been a central theme in the international disability rights community and now also in various service user movements (Coldham, 2012, p. 7). Such movements "constitute the most important and far-reaching force for more liberatory social work and social services so far" (Beresford & Croft, 2004, p. 62). Liberatory social work is a framework that recognizes that "there must be some understanding of the links between people's personal experiences of oppression and the structural reality of inequality" (Gupta & Blewett, 2008, p. 460). The service user movement is liberatory in that it goes beyond organizational changes and service modifications to more significant transfers of power and decision making (Beresford & Croft, 2004).

Relevant legislation in the United Kingdom

There have been explicit requirements for user involvement in the United Kingdom since the 1989 Children's Act (United Kingdom Parliament, 1989) and the 1990 NHS and Community Care Act. The requirements call for involving service users in assessments, complaint procedures, service management, and planning (Beresford & Croft, 2004, p. 61). Significant legislation in the United Kingdom regarding the involvement of service users also includes the provision for making direct payments to disabled service users, as reflected in the Health and Social Care Act (2001) (Social Care Institute for Excellence,

2007, p. 8–14). Attention has been focused on the role of user-led organizations that are controlled entirely by current and past service users and are viewed as more responsive to the needs of clients (Prime Minister’s Strategy Unit, 2005; Social Care Institute for Excellence, 2007). The National Health Service Act of 2006 (Section 242, 1B) empowered patients and social service users in the following way:

Each relevant English body must make arrangements, as respects health services for which it is responsible, which secure that users of those services, whether directly or through representatives, are involved (whether by being consulted or provided with information) or in other ways in: a) the planning of the provision of those services; b) the development and consideration of proposals for changes in the way those services are provided, and c) decisions to be made by that body affecting the operation of those services. (Coldham, 2012, p. 8)

The spectrum of involvement ranges from sharing information to active involvement in planning the provision of services (Coldham, 2012). The British legislation on user involvement clearly reflects the process of valuing the perspectives and engagement of service users.

Impact of service user involvement

Several theoretical and practice-based outcomes have emerged from the UK experience with service user involvement. One of the biggest impacts can be seen in the way in which service user involvement has challenged traditional regulatory notions of social service provision by featuring a more “liberatory position where social workers are viewed as allies of service users” (Beresford & Croft, 2004, p. 3). This rights-based approach to social service delivery emphasizes the human and civil rights of service users rather than focusing on them as people with “needs” who must go to outside experts for help (Webb, 2008). This approach has created the opportunity for creating new ways to provide individual and collective services to clients, including new procedures for providing direct payments, service delivery, and advocacy. It is also helpful to reframe the traditional power relationship between service users and service providers (Beresford & Croft, 2004, p. 62).

Individual level change

Service user involvement in the United Kingdom can lead to increased confidence, self-esteem, and knowledge and skill acquisition for young people, the disabled community, the mental health community, and other groups (Moriarty et al., 2007). For example, Share in Maudsley Black Action, established by three Black mental health service users at Maudsley Hospital in London, involved members by using art, poetry, and music to advocate for changes in services and by offering their expertise of experience on their own terms (Kalathil, 2011). Although the members of the group do not claim their involvement led to lasting systems change, they viewed the involvement process as an enriching experience for all involved (Kalathil, 2011).

Organizational change

Service user involvement has had the largest organizational impact in the realm of knowledge creation in institutions. For example, it has changed how research on mental health and aging issues are perceived and implemented. Research projects are increasingly conducted in partnership with service users. As the authors of a 2007 government report noted, “service users have a particular role to play in the production of knowledge for health and social care because of the experiential nature of their knowledge and through their positions as ‘experts in their own experience’” (Branfield, 2009; Branfield, Beresford, & Levin, 2007; Moriarty et al., 2007, p. 17). Service users also contribute to internal knowledge in organizations and are sometimes called on to participate in staff training programs to share their expertise with professionals in a way

that affects organizational culture and provides feedback on how services are perceived (Moriarty et al., 2007).

Changes in service delivery

The National Institute for Mental Health England, established in 2002 as part of the Department of Health, has initiated different approaches to service user involvement and found that service users involved in service-level decisions have been most effective at the regional level where they have connections with local networks and across multiple service programs (Health and Social Care Advisory Service, 2005). In this context, service users are paid for their involvement and have their expenses covered, although there were some concerns about the complications of receiving payment while simultaneously receiving welfare payments (Health and Social Care Advisory Service, 2005).

The Social Care Institute for Excellence (2007), with the assistance of the University of Leeds in England, identified the following changes in service organizations as a result of user involvement:

new and expanded services (e.g., adding direct payments, increased outreach services, and parenting support), policy change (e.g., using fees for services, defining service quality standards, and defining a charter of rights for older people), personnel issues (e.g., involving service users in employee selection interviews, training programs, and staff performance reviews), and creating mechanisms for service user involvement (e.g., advocacy, program planning, and research. (pp. 43–44)

Direct payment to service users was also found to have increased service user's control over their use of services as well as adding a sense of independence to their own lives (Social Care Institute for Excellence, 2007). The direct payment legislation was largely the result of advocacy efforts by disabled service users frustrated with the prevailing system of service provision. Indeed, direct payment is more widespread in areas where service users have enhanced power through participation in user-led organizations (Social Care Institute for Excellence, 2007).

Barriers to service user involvement

Involving service users in agency-based decision-making processes includes many challenges when seeking meaningful participation in the United Kingdom (Rutter et al., 2004). Service users and professionals often have different priorities, and a power imbalance underlies the relationship (Social Care Institute for Excellence, 2007). For example, in one study of user involvement in planning and delivery of mental health services in the United Kingdom, professionals wanted to improve service user participation by hearing from a larger and more diverse cross-section of service users as part of the involvement process. In sharp contrast, service users were more concerned with expanding user involvement in smaller numbers by engaging in specific policy and practice reforms (Rutter et al., 2004).

The spectrum of service user involvement is often limited to mere consultation where the professionals control the involvement process and outcomes instead of creating a true partnership in which power, status, and decision making are shared (Chadderton, 1995; Rutter et al., 2004, p. 1974). As a result, service users continue to be concerned that their participation tends to be token, superficial, and sometimes unproductive (Beresford & Croft, 2004).

Involving the most marginalized service users also continues to be a challenge. Many feel that the emphasis on voluntary participation has prevented the involvement of low-income service users who have neither the time nor the resources to participate (Kalathil, 2011). Service user advocates in communities of color also note the high levels of discrimination in mainstream service users' organizations along with the stigma they experience in their own ethnic communities that can lead to feelings of isolation from both communities as well as a sense of powerlessness to make real changes (Kalathil, 2011). As Kalathil (2011) noted, "With at least three decades of user involvement behind us, why is there no significant change in the way [Black and ethnic minority] people

experience mental health service delivery?” (p. 45). Although many minority service users feel frustrated by the lack of change in their lives, they do express hope for change in the future.

Years after the United Kingdom announced its commitment to service user involvement, real change is yet to be realized. The impact of various service user involvement efforts have been difficult to measure. Most of the literature focuses on the perspectives and experiences of service users and service providers rather than measurable outcomes. Since the breadth and depth of the impact of remains unknown (Rose et al., 2002), robust evaluation mechanisms are needed to track service user involvement and its long-term impact (Doel et al., 2007).

Service user involvement in social work education

Since 2003 the UK government has mandated for service users to be involved in all aspects of social work education and training in England, Wales, and Scotland (Beresford & Croft, 2004). The mandate requires educational institutions to involve service users in the implementation, practice, and evaluation of social work programs at all levels (Askheim, 2011). The *Requirements for Social Work Training* (Department of Health, 2002) include service user involvement in student selection and assessment, readiness for fieldwork and a learning agreement, teaching and learning related to preparation for practice learning, and design of the degree and quality assurance. Each university develops its own approach for addressing these requirements. Although the focus of the social work training requirements is on service users and caregivers (e.g., foster parents, adult caregivers of aging family members, etc.), this article features primarily the roles of the service users.

The initial focus of service user involvement included social work curriculum (assistance with developing curriculum and teaching in the courses) and shared governance (student admissions and performance assessment) (Webber & Robinson, 2012). Although little rigorous evaluation took place during the first 10 years of implementation, multiple case studies suggest that the curriculum approach has proven to be easier to implement than the shared governance approach (often seen as the prerogative of university faculty and staff and not service users) (Robinson & Webber, 2013). Moving beyond case studies of local innovations, there is growing consensus in the midst of declining resources that large-scale evaluations are needed to assess the impact of service user involvement on students, faculty, the service users themselves, and ultimately on those served by a wide range of human service programs.

The experiences of service users are viewed as a source of experiential expertise and therefore an important source of knowledge for social workers to acquire (Beresford et al., 1999 in Kristiansen, Lahti Edmark, & Kerstin, 2009). The process of incorporating service user perspectives into the curriculum encourages social work students and faculty to examine critically the “worker-client” relationship within its hierarchal agency structure where service users experience considerable powerlessness (Angelin, 2015; Denvali, 2008a, 2008b; Kristiansen et al., 2009). A number of innovative programs and practices have emerged from service user involvement in social work education including service users as teachers and curriculum developers.

Teaching through home visits and service user conferences

An innovative collaboration that involves service users as teachers and trainers was developed by Simon Stevens, a service user and advocate with cerebral palsy, and Denise Tanner, a social worker turned university lecturer at the University of Warwick (Stevens & Tanner, 2006). After the university received funding to support user involvement as part of the new social work degree, the social work faculty identified and recruited service providers interested in collaborating with the school to discuss how they could to be involved in teaching social workers and to identify the issues worth addressing, namely, helping social work students understand the lives of service users and to appreciate the importance of the relationship between a social worker and service user (Stevens & Tanner, 2006).

Although some service users choose to lead discussions in social work courses, others prefer to interact individually with students in the community and outside the university setting. As a result, the social work education program initiated a community-based home-visiting program in which students visited service users in their homes. Prior to these visits, students were trained by social work professors and service user lecturers in preparation for these visits. The service users taking part in the visits were also given a detailed description of what was expected and were asked to provide feedback about how well the student had reacted and listened to them. The students then wrote a reflection piece about the experience and shared it with the service user and their instructor (Stevens & Tanner, 2006). Finally, interested service users were invited to participate in a service user conference at the university (as presenters, discussion group leaders, or participants). Social work students attended the workshops as conference participants and discussed various issues with service users.

The combination of the community-based home visits, the campus-based classroom presentations by service users, and the service users' conference helped to challenge student assumptions about service users and how service users are labeled. Moreover, after these interactions, student written assignments reflected a more nuanced understanding of the relationship between peoples' problems and the broader social context (Stevens & Tanner, 2006). Service users felt increased confidence as a result of these initiatives and felt they had a better understanding of the concerns and perspectives of social workers (Stevens & Tanner, 2006).

One of the lessons learned involved the emergence of user types, namely, lay users, who become involved to help others or to gain skills, and expert users, who are interested in becoming professional trainers (Stevens & Tanner, 2006). Paying expert users at a rate that reflects their skills and expertise is an ongoing challenge for academic programs.

Coteaching with service users

In another university-based initiative, service users, academics, and practitioners collaborated on the development of a curriculum module that examined the lives of chronically poor families that had become involved with the child welfare system in some way. The goal was to involve service users to describe the reality of family poverty as a way of increasing the understanding of social work students (Gupta & Blewett, 2008). A working group was created that included 10 service users from different families (half from communities of color and 90% women), two academics, three social workers, three representatives from antipoverty organizations, and two representatives from government departments (Gupta & Blewett, 2008). All service users received small payments for their time in a combination of vouchers and cash reimbursements for child care and travel. During the first few meetings service users were asked to reflect on their feelings about working with the group and their reasons for getting involved. Later meetings focused on what they would teach and share in the curriculum module, how it would be evaluated, and how to celebrate the accomplishments (Gupta & Blewett, 2008).

This project gave service users the chance to contribute their knowledge and expertise as recipients of family-related social services as well as parents raising their children in circumstances of chronic poverty (Gupta & Blewett, 2008). Given that 10 members of different families participated in sharing their service user perspective, they each provided emotional support for one another during painful and deeply personal discussions. The presence of multiple service users also enabled people to talk about their own stories as part of a collective experience rather than focus on one family or difficult situation that could also be easy to dismiss as unique and not representative (Gupta & Blewett, 2008). This partnership model for course development and instruction can contribute to improved practice in service user involvement in social work teaching as well as expanded understanding of how to work effectively with poor families.

Service users as in-service trainers

At Salford University in Manchester, two service user groups collaborated with the university to develop a service user trainers group devoted to providing training events for social work students about service user experiences (Rimmer & Harwood, 2004). One of the groups, Citizens as Trainers, which included adult service users and members of Young Independent People Presenting Educational Content, consisted of young people with experience in the child welfare system. By working together, the members of these two groups gained the confidence needed to “overcome the barriers which institutions have (consciously or unconsciously) erected to exclude us” (Rimmer & Harwood, 2004, pp. 312–313) and realized that they had much in common.

This group of future trainers initially went through a year-long period of peer training and support to develop strong relationships, gain experience in public speaking, and learn about relevant laws and policies. As one participant stated, “For us, this time together provided the foundation we needed to build a collective strength, to trust each other and to articulate our vision for the future and (develop a) ‘partnership [with] social work’” (Rimmer & Harwood, 2004, p. 313). The experience also helped the service users become more effective advocates. This newfound empowerment and close involvement with the university gave them access to those in power. Thus, when a member was not “getting good service,” he or she would write a letter to the director of social services as a member of a “citizen group” that was helping to train the future social workers and thereby would be taken seriously when raising their concerns (Rimmer & Harwood, 2004, p. 315).

After its initial preparation period, the group began to advertise its role as trainers and to work with other university social work programs. Members divided their work between preparation and planning for the training sessions and management of their service user group. They spoke in classrooms, facilitated conference workshops, and worked as social work curriculum consultants. To help themselves become professionally accredited trainers, they joined the Open College Network and received nationally recognized certification (Rimmer & Harwood, 2004).

Although the program has been viewed as successful, other challenges persist. This group of service users wants to be treated as a professional training group based on its members’ “expertise of experience” and therefore deemed worthy of appropriate compensation. The logistics of payment can also be difficult because institutions of higher education are accustomed to paying by check, and service users often lack bank accounts and need to be paid in cash to avoid disruption of their government assistance (Rimmer & Harwood, 2004). In contrast, other service users hold the view that “gaining a voice at the table” should be recognized for its “personal reward alone” (Rimmer & Harwood, 2004, p. 316).

Another major challenge involves student discomfort when service users are in positions of power inside and outside the classroom. Sometimes students react negatively to this role reversal and refuse to accept the service user as someone with valuable knowledge to impart. Accessibility is also an ongoing issue, as noted by one service user: “Professionals exclude us from full participation by their use of jargon, masses of paperwork, consultation meetings planned at 9:30 am when for some of us, our personal assistant does not arrive to help us out of bed until 8:30 am” (Rimmer & Harwood, 2004, p. 317).

In contrast, the overall response of social work students and faculty to the involvement of service users has been very positive, especially when service users function as trainers and demonstrate a sense of empowerment when contributing to the goal of improving social work training and practice. In the words of one service user trainer:

The group has given me confidence to become vocal about personal experiences and encouraged me to fight for our rights. At the end of the day, the best way for students to learn isn’t from books but from the “horse’s mouth.” What we teach is empowerment and in fact we are the embodiment of empowerment. (Rimmer & Harwood, 2004, p. 320)

Contributions of service users to curriculum design

Service users have also become engaged in the transformation of social work education through curriculum development. At the University of Central Lancashire in England, service users were given the opportunity to share their stories electronically through an e-skills lab in the Department of Social Work. This lab contains think pieces about a variety of topics from service users, caregivers, practitioners, and academics who contribute short essays about how to communicate effectively with service users, especially substance abusers. These think pieces are meant to help students reflect on the complexity of communications in social work practice by examining narratives designed to “raise issues and questions, not provid[e] simplistic answers to complex questions” (Huntington, 2006, pp. 92–93).

The faculty contacted staff and service users at a local residential substance abuse treatment program to generate think pieces (Huntington, 2006). For example, all the women in a treatment program were invited to participate, and 11 women agreed to be part of a taped discussion that focused on how social workers had, and should, communicate with women who had abused drugs or alcohol. This discussion was transcribed and used as the first draft of a think piece. Copies were distributed to the women and staff participants, who provided edits and feedback. Once a final version was produced, the women consented to have it distributed (Huntington, 2006). The service users involved in this project were able to try out the roles of expert and adviser as they shared their experiences and their recommendations with future social workers.

All the preceding examples of service user involvement in curriculum design illustrate the different ways universities, in partnership with service users, have incorporated service users into social work education. A number of challenges that remain are noted in the following section.

Challenges

Many implications that can be drawn from the UK social work education experiences for the United States. One relates to student exposure to the lived experiences of vulnerable populations. Although most entering MSW students bring some experience in the human services (e.g., in traditional agencies like women’s shelters and youth group homes), even those with exposure to poverty, with groups such as the Peace Corps or AmeriCorps or Teach for America, arrive with limited exposure to the experiences of service users. One approach to addressing the exposure issue can be found in medical schools whose medical students participate in grand rounds and hospital service rotations related to particular populations (pediatrics or geriatrics) or disease entities (cancer or HIV/Aids) or specialty centers (emergency rooms or psychiatric centers). They assume responsibilities for specific patients only later in their learning experiences. Given that social work fieldwork placements do not generally match the breadth of experiences built into the clinical exposure provided for medical school students, it seems feasible to consider the UK approach to service user involvement as a way of increasing the exposure of social work students to a diverse population of service users.

Some of the challenges related to developing analog experiences to the medical school example can be seen in the following array of social work education issues: understanding the expertise of experience of service users, understanding the power held by service providers when engaging with service users, managing the development of an increased understanding of self along with an understanding of others, participating in venues where service user voices (and staff voices) are amplified for increased understanding, and updating our understanding of client self-determination in its relationship to strengths-based practices. Each of these issues warrants a separate article, but it is important to elaborate in a limited way prior to identifying the key links between service user involvement in social work education and the competency standards developed by the Council of Social Work Education for use in accrediting social work education programs in the United States.

With regard to expertise of experience, consider a 37-year-old homeless women on the streets who has been in and out of shelters for the past 20 years and a 22-year-old male BSW student

outreach intern interacting with one another. The woman arrives at the encounter with an achieved level of expertise from her life on the streets, whereas the social work student arrives with an ascribed level of expertise derived from his or her social work education program. Without multiple learning opportunities to interact with service users (e.g., much like hospital grounds), it is difficult to imagine how the social work intern will develop as wide ranging an understanding of the lives of service users as possible.

In a similar way, most social work students enter the profession with a strong passion to be of service to others and arrive on campus with a similarly strong interest in learning the knowledge and skills of effective evidence-informed practice. Without a specific focus on the nature of the frequently involuntary bureaucratic encounter between service users seeking help and social work service providers, it may be difficult for social work students to truly understand the power they exert as representatives of a human service organization over the lives and opportunities of service users. Although there has been considerable interest and research on the nature of service provider discretion, less attention has been given to the service user's perceptions of power and the actual power exercised by service providers.

The hallmark of a professional social worker has been and continues to be the capacity to make effective use of self when working with service users and other service providers. It could be argued that much of the informal, unstated curriculum of any social work program is taken up by the time and reflection needed to really understand oneself (and in some cases, through the use of therapy) beyond the ongoing efforts to understand transference and countertransference. For some social work students, it is a major challenge to interact with service users as human beings or neighbors as well as individuals who bring a different form of expertise to the service user-provider relationship than that of the social worker. The desire to be of service on the part of the service provider can be challenged by the desire to be empowered and independent on the part of the service user. As noted later, much more attention needs to be given to exploring and redefining the bureaucratic encounter between service users and service providers.

Although few human service agencies create venues designed to amplify the voices of service users (beyond traditional service evaluation questionnaires), the opportunity to move from a focus on individual cases to hearing from a population of service users can be challenging. When client or service user advisory committees are established and maintained, they can be used more as opportunities to share service user complaints than as opportunities to gather data needing analysis, further study, and action related to change. For example, when a public information officer for a county social service agency was asked about her role in communicating messages about the agency to the community (e.g., recruiting foster parents using signage on bus stop benches), it was clear how messages were sent but not clear how messages were received, especially from service users. In further conversation, it was learned that the agency operated about 15 different advisory committees (e.g., foster parents), but these committees (often legislatively mandated) were not seen as a means for capturing service user voices for future planning and action. In contrast, this same agency pioneered the use of in-house Intranet surveying to capture the voices of staff on emerging issues facing the agency and then provided feedback on the major findings to all staff.

And finally, the need to update our understanding of client self-determination in its relationship to strengths-based practices is also complex. With the growing interest in identifying new and better ways to empower service users through the acquisition of increased coping capacities (e.g., find employment, reduce substance abuse, find suitable housing, or find better ways to communicate successfully with others), the role of the social worker is shifting more in the direction of case management, short-term crisis intervention, and community (rather than residential) treatment services. Empowering service users requires a unique set of skills rooted in strengths-based practice in which the strengths of the service provider are needed in equal measure to the strengths of the service user. For example, in Nordic countries, there is less focus on identifying service user problems and more of a focus on the shared worries of the service provider and service user. As two human beings addressing the challenges of everyday living, each has legitimate worries related to

the self-determination of the service user and the provision of strengths-based services. However, their worries may be different (e.g., finding a job versus finding the next meal) but are frequently related.

Potential impact of service users on educational standards

In the light of these challenges, what role can the national social work curriculum standards of the Council on Social Work Education (2015) play in preparing social work students to demonstrate practice competencies related to service user involvement? Several aspects of the 10 major standards were selected to address this question and raise more questions.

Competency 1: Identify as a professional social worker and conduct oneself accordingly. With the exception of advocating for client access to service, most of the behaviors related to this competency focus on the practitioner (self-reflection and correction, maintaining role boundaries, maintaining professional demeanor, engaging in lifelong learning, and effectively using supervision and consultation). Little attention is given to the role of the other, in this case, the service user. What can social workers learn from their clients? What is the nature of mutual self-reflection? Do clients have boundaries? How are help-seeking behaviors modeled for others, service users and service providers. to learn from?

Competency 2: Apply social work ethical principles to guide professional practice. Although it is clear that social work practice is guided by a set of ethics, the emphasis on separating personal values from professional values raises interesting questions about the role of values held by service users (e.g., a homeless person placing a higher value on sleeping on the street than in a homeless shelter). Although this competency calls for tolerating ambiguity in resolving ethical conflicts, what role does ambiguity play in balancing the power relationship between service users and providers? How is ethical reasoning by the service provider modeled for the service user?

Competencies 3 and 6: Apply critical thinking to inform and communicate professional judgments and engaging in research-informed practice and practice-informed research. The focus on evidence-informed practice in social work education calls for more balanced attention to research (often related to interventions), practice wisdom, and the views of service users. How are the views of service users reflected in the readings required of social work students? What might be the connection between critical thinking and the language used to involve service users? If the research used to educate social workers does not sufficiently reflect the service user's voice, how might this situation be corrected? (See the emergence of survivor research where service users define the research questions, design the data collection tools, analyze the findings, develop interpretations and recommendations, and disseminate the results, all in consultation with social science researchers; Sweeney et al., 2009.)

Competency 4: Engage diversity and difference in practice. Building on the social work practice behavior of using the people social workers work with as informants, the service user is obviously a key informant in the process of problem solving. Given the enormity of the social work task to address diversity issues with respect to gender, race, ethnicity, age, sexual orientation, ability, life styles, family histories, countries of origin, language, religion, and customs (the list is rarely exhaustive), how might we find ways to capture the voices of informants? In this case, thinking more about service users as members of a population in need, what might be some venues that could provide a forum to amplify the voices of service users? What are ways to prepare social workers for managing difficult conversations when service users express anger, complaints, frustration, and negative views of the agencies that seek to serve them?

Competencies 5 & 8: Advance human rights and social and economic justice and engage in policy practice. Given the increasingly strong commitments to human rights and social justice that

entering social work students frequently possess, it is challenging to think about the role of service users in advocating for human rights and social justice. To what extent are social work students equipped to document the nature of oppression and discrimination when presented with information by service users? To what extent are the social justice issues related to assessing human capabilities part of service intake procedures that address the promotion of social and economic justice (Grant & Austin, 2014)? How knowledgeable are social work students about local coalitions designed to address human rights and social justice issues? How are social work students assisted in making the transition from acquiring an understanding to actively engaging in advocacy that advances the causes of social and economic justice?

Competencies 7 & 9: Apply knowledge of human behavior and the social environment and responding to contexts that shape practice. Given the decades of investment in social work education related to drawing on the social sciences to support theory-informed practice (e.g., human behavior and the social environment), the increasing prominence of the service user provides new challenges. These challenges can be viewed in terms of the social psychology and the political economy of the bureaucratic encounter between service users and service providers. What concepts are helpful for understanding the transition of the service provider from expert to participating partner and the service user from passive recipient to worthy *expert with experience* (Carnochan & Austin, 2015)? How is the helping relationship transformed from the exercise of asymmetrical power between the service provider and user to a relationship of shared informal dialogue in safe spaces? How do the concepts related to intersectionality inform the very different worldviews of service users and service providers?

Competency 10: Engage, assess, intervene, and evaluate at multiple levels of practice. This competency serves as the core practice competency that links to all the others. It involves the essential skills of interpersonal relations and empathy as well as the capacity to mutually identify and act on shared goals and outcomes. The process of empowering service users includes continuous monitoring of the power held by service providers. In particular, finding safe spaces (outside official offices) takes on increased importance along with (a) the use of informal interactions as in sharing or preparing a meal, (b) taking walks to discuss shared issues, and (c) searching for informal ways of communicating so that the expertise of the service user can be identified in relationship to the service provider's expertise.

In essence, there is a need for increased attention to the nature of dialogue in a service delivery context. According to Seikkula and Arnkil (2006), the goals of dialogue between a service user and a service provider include (a) generating safety and minimizing anxiety in order to increase predictability in communications by focusing on the future, (b) demonstrating a genuine interest in what service users are saying by focusing less on what the service providers think that service users need to know, (c) responding to what is said through active listening and paraphrasing in search of the natural rhythm of the dialogue in which to participate, and (d) seeking to capture the service users' own subjective view of their situations in order to guarantee that everyone in the dialogue is able to maximize the authenticity of their own voices.

In addressing these service delivery issues and the social work education competencies, there is a need to transform the traditional language surrounding "client problems" where the focus is primarily on the service user to the newer language of "shared worries" (subjective zones of worries from small, medium, and large) (Seikkula, Arnkil, & Eriksson, 2003). In this context, service users and service providers bring their own shared worries to the dialogue (normative for everyone to possess worries) to explore, clarify, and create the mutual understanding needed for shared efforts to address the needs of service users. The goal is to explore the shared process of helping each other reach a goal (e.g., self-sufficiency related to employment or well-being related to health and behavioral health) where the service user's network of resources is as important as the service provider's network of services. This process of mutually

assisting each other through shared worries can lead to transformative experiences for all parties that emerge from the experience of learning from one another.

Implications and conclusions

Although much can be learned from the involvement of UK service users in social work education, several cautionary notes are needed. Baldwin and Sadd (2006) describe some student feedback about the presentations of service users as “too personal, too anecdotal, and/or too professional when claiming to represent the views of other service users” (p. 357). A similar concern emerges when funds need to be found to pay service users in a way that is similar to paying other guest lecturers because the extra income could affect their eligibility for continuing to receive benefits.

In a different way, Anghel and Ramon (2009) identify the need for guidelines in the form of a protocol and ethics to protect the interests of service users and students when it comes to sharing personal information. They also identify the need to help the service users with “gaining confidence, [acquiring] effective presentation skills, dealing with disclosure, and [dealing with] issues related to expectations and students’ learning” (p. 196).

At this juncture, service users appear to be rarely involved in social work education in the United States outside the internship program in which students interact with service users. There is currently no formal mechanism for accounting for service user involvement in required BSW or MSW courses in the United States. Although it is possible for service users occasionally to be included as guest speakers or panelists in classrooms or in a department, it is not known if schools or departments routinely involve them in schoolwide colloquia or conferences. Also, some courses may in fact include service user voices through the use of specially selected curriculum materials. And, indeed, many social work programs in the United States attract diverse student bodies that include some students who have interacted with social service systems themselves and therefore offer a dual perspective of service user and student. It is clear that more research is needed on the involvement of service users in American social work education. Indeed, without the existence of legislation or funding aimed at strengthening the involvement of service users in social work education, U.S. social work education programs appear unlikely to adopt any broad-scale initiative to include service users. However, based on the UK examples, several options for incorporating service user involvement are presented in [Figure 1](#).

It is also clear that the process of adopting or adapting innovations from the United Kingdom and other countries raises many questions that call for focused research, including, What are the actual financial and human resources needed by a social work program to promote the development of service user involvement in social work education? How might a program evaluation design capture the start-up and institutionalization phases of the innovation related to curriculum development and instruction as well as the governance dimensions of service user involvement in assessing student entry and exit competencies? To what extent would service user involvement challenge the power and privilege dimensions of social work education related to client self-determination, intersectionality, and the human capabilities dimensions of social justice (Grant & Austin, 2014)?

This article seeks to capture some of the innovations emerging from service user involvement in the United Kingdom over the past decade. It begins with the definition of service user involvement and the reasons for its prevalence in the United Kingdom along with policy mandates. By examining the impact of service user involvement on social service organizations, it is possible to see its influence on current social work practice and its movement toward a more emancipatory approach to service delivery. In addition, there have been a number of positive outcomes for service users and the organizations they rely on. And finally, the persistent barriers to implementing meaningful and inclusive user involvement are noted as well as the barriers to measuring the quality and quantity of involvement.

The discussion of service user involvement in service delivery provides the foundation for exploring service user involvement within the university context. Since 2003 all higher education

Option 1: Service users as invited guest speakers

Classrooms or departmental presentations may be the easiest way to incorporate service user perspectives into the social work curriculum, but finding the best presenters and sustaining their involvement over time may not be easy.

Option 2: Service user conference

A conference devoted to service users and attended by social worker students would be an opportunity to delve into an array of issues from service user perspectives (e.g., Field Placement Orientation Day with representatives from local service user organizations).

Option 3: Expanding the curriculum content to include service user voices

Similar to the think pieces described in this article, service users could be included in the curriculum by incorporating their voices through the use of written essays, poems, audio recordings, photos, or videos. Students could be involved by working with service users to create think pieces or digital stories.

Option 4: Home visits to service users

Home visits could be arranged with local agencies for students to explore real-life situations (e.g., homeless, elderly, hospital emergency rooms, youths in residential care, etc.) as well as exploring the nature of communications between service users and service providers. Home visits also provide an opportunity for social work students to collect first-person narratives from the service user outside of their own fieldwork-related worker-client relationship.

Option 5: Service users as costudents along with MSW and BSW students

The idea of peer learning in classes where students learn alongside service users is a complex and rich way to reimagine a traditional social work class (Angelin, 2014; Askheim, 2011; Denval, Heule & Kristiansen, 2008; Kristiansen, Lahti Edmark, & Kerstin, 2009; Kjellberg & French, 2010). Although it requires considerable effort from faculty, this form of learning leads to a rich and memorable experience for students, service users, and faculty.

Figure 1. Options for U.S. social work education programs.

institutions in England, Wales, and Scotland that offer social work degrees are required to involve service users in the design and delivery of their programs as a means to feature the expertise and life experience of service users. All these developments provide important implications for the future of American social work education.

Notes on contributor

Carolyn Goossen, MSW, is a Legislative Aide for Supervisor David Campos who represents District 9 on the elected San Francisco Board of Supervisors. *Michael J. Austin* is the Mack Professor of Nonprofit Management and Director of the Mack Center on Nonprofit and Public Sector Management in the Human Services in the School of Social Welfare, University of California, Berkeley.

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