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Anchoring social care and social work practice in structured reflection: introducing a model of group reflective practice

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ABSTRACT

This paper explores the provision of a psychoanalytically informed reflective practice space to a multi-disciplinary social care and social work team in Ireland. The reflective model is closely aligned to the Tavistock's Work Discussion Group (WDG). The authors explore the selection and preparation of a case and case presentation by one of the authors. This paper examines this process, what it looks and feels like, showing with supporting theory, how refined engagement with case material offers an opportunity for deep thought and reflection. The paper draws on Bion's concept of 'attacks on linking' referring to a phenomenon that occurs when intolerable experiences sever the capacity to think. Facilitated group reflection offered emotional containment to the worker and supported a deeper understanding of his complex connection with and understanding of one foster family. This experiential paper is written in support of the potential for reflective practice spaces.

KEYWORDS

Reflective practice; fostering; work discussion; learning from experience

Introduction

Research studies and written reflections from practitioners and academics show that child protection settings contain some of the most anxiety provoking and emotionally intense interpersonal and systemic processes (Ferguson et al., 2021; Bailey; 2015). Thinking and practicing reflectively in these spaces is recognised as a central, but complex part of social care and social work (Ruch, 2007; Schon, 1983). Recently there has been a small but steady growth in practice near research, knowledge and writing on the experience of reflecting or not reflecting at work, particularly in child protection settings (Lees & Cooper, 2021; O'Sullivan, 2019; O'Sullivan & Cooper, 2022). This paper aims to contribute to that literature from a practice and experiential point of view in line with this Special Issue.

There are limits to what can be thought about while working in social care and social work (Ferguson, 2018), and afterwards, when reflecting (O'Sullivan, 2019). In fact, in psychoanalytic terms, non-reflection as a form of defence can emerge to protect the worker from unbearable levels of anxiety (Cooper, 2018). In practice, this can sometimes

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look like an intense preoccupation with blame, accountability and retribution (Shoesmith, 2016); a focus on doing rather than thinking and attention to completing tasks rather than processing experience.

This paper will consider a particularly stressful aspect of social work and social care practice, that of the ongoing intervention in family situations where young infants have been seriously physically harmed and die. The demands of such a case on an individual worker are often not spoken about and can be 'confined exclusively to the inner psychological world of the individual practitioner' (Dwyer, 2007, p. 50). Defences against thinking about and getting in touch with such experiences are understandably complex and sometimes necessary (Scanlon, 2017). However, such defences can interfere with the work, in ways that include distortion in practice, and division: in teams; and across agencies; and within foster families and in the internal worlds of siblings who have survived the death of a sibling. It is this complexity which academics allude to when writing about the horrific abuse and then subsequent death of children, including Victoria Climbie and Peter Connolly (Cooper & Lousada, 2005; Rustin, 2005).

Reflection on emotional experiences at work is recognised by some 'as a necessary precondition for good practice' (Cooper & Lousada, 2005, p. 6). However, it requires stamina and the capacity to get in touch with-, and stay in touch with sometimes very difficult thoughts and emotion. Scanlon suggests that, as practitioners, when we look beyond the surface of the families as they present, we are:

> 'immediately brought face to face with psychosocial realities of poverty, prejudice, hatred, social exclusion, child abuse, domestic and social violence, and to do this is always distressing and painful . . . [but] to look away . . . and only see the behaviour is to ignore the patients essential humanity [running] the opposite risk of becoming retaliatory, neglectful, ineffective, and abusive, and this, too, is distressing and painful' (2017, p. 117).

In this paper we follow the detailed presentation of case work by one of the authors, a social care worker, Tom*. The case involved the non-accidental death of a baby and Tom's subsequent work with the relative foster family and the living sibling they cared for. We explore how the more unbearable aspects of the case became known and available for thought – through the provision and use of a reflective space and afterwards during ongoing reflection.

Bower suggests that practitioners can only know a few theories, but must know them well, contending that 'being emotionally open to our clients but able to link a helpful theory to understand what is going on is the essence of clinical social work' (2010 p. 119). In this paper we argue for the utility of systems-psychodynamic theory (including *attacks on linking* and *containment*) in deepening thinking and practice with foster families. We acknowledge the central role played by anxiety in human relationships and the importance of learning from experience. Work underpinned by systems-psychodynamic theory acknowledges the psychosocial and organisational systems and contexts in which practice and reflection takes place. Social work research and practice present the challenge of holding onto an understanding of human capacity and intimate experience, while simultaneously taking cognisance of the effects of real life structures on the behaviour and experience of families and social workers. Employing a systems-psychodynamic approach to understanding families, workers, their teams and organisations, can go some way towards maintaining these dissonant positions (Gould et al., 2001). The

discussion and analysis in this paper offers one potential lens with which to think and reflect creatively upon the work, and we argue that it has the potential to complement and support workers engagement with foster families.

Emotional experience at work

Relationship-based therapeutically informed work with foster families is complex and uncertain and it depends upon a strong relationship with oneself and with the other (Ruch et al., 2010). Often the intensity of the work and the strength of emotion associated with that work may disrupt our capacity to think. Emotions may be so intense, disturbing and unbearable that we develop defensive processes to deal with those emotions. Arguably, foster carers and the children they care for develop similar defensive processes (Lobatto, 2016). These defensive processes can also be recognised in teams and across organisations and have been written about extensively elsewhere (Dartington, 2010, O'Sullivan, 2017, 2019).

Sometimes, defensive processes in practice serve to protect workers and foster carers. If they did not have these defences, they could not endure the work, but an absence of understanding them and the need to relinquish them when appropriate, can disrupt practice (Munro, 2011). For foster carers, and those practitioners who are working with them, the difficulty with just expelling disturbing experiences and feelings without reflection is that there is limited opportunity to make sense of them, to deepen and broaden the meaning of the work and to potentially offer another way of looking at what is happening for children and families.

Systems-psychodynamic theory suggests that, although it may not be communicated in a conscious way, the emotional experience of witnessing abuse or knowing about the death of a baby, if undigested, will still impact upon the workers capacity. Furthermore, it will infiltrate the organisation in ways which are much more harmful, if not understood (Dartington, 2010). We argue with reference to case material and theory that making sense of such experiences and aspects of the work goes some way towards understanding the experience of children and their birth parents, of foster carers and workers, and the child protection system.

Learning from experience

When we consider how we are in our work and attempt to make some sense of that experience, we are bringing together reflection (reflection-on-action and reflection-in-action; Schon, 1983) and *learning from experience*. Learning from experience refers to 'our experience, to our learning, which means that we are talking about changes within' (Stapley, 2006, p. 1). It is as important as learning (i.e. acquiring Knowledge) about something, but has not been privileged in Western cultures (Stapley, 2006). Froggett et al. (2014, p. 135) contend that students attending their psychosocial theory courses in the UK, Norway and Quebec need to 'think *from* experience with concepts which help them think *about* experience'. This kind of teaching, also encountered at the Tavistock and Portman NHS Foundation Trust, England, happens beneath the surface and is unique to the individual.

Wilfred Bion saw learning, i.e. the kind of learning that contributed to development, to be an emotional experience. Bion's theory of thinking (1962), put emotionality at the psychoanalytic centre. He argued that emotional experience – from which it is possible to learn or not learn – is rooted in bodily and somatic experience. A position which has since come to be supported by neuroscientific research (Porges, 2007). This information is proving increasingly important for organisations and professionals working with children and families in caring environments, where emotional experience might be squeezed out in favour of more rational, less painful working processes (Dartington, 2010).

Bion (1961), and others (Cooper & Lousada, 2005) maintained that, in certain states of mind, having knowledge can become a substitute for learning. This can run counter to any genuine quest for understanding. Taking these ideas further, Cooper and Lousada (2005) suggest that using the learning generated from emotional experience in our professional work, for example, with children and families, has the potential to add significant depth to our thinking, practice and policy development in this field. But Kraemer (2014, p. 146), reminds us that, in this type of work, there are incentives not to take emotional risks, not to reflect like this: 'it is not obviously helpful to discover [how we are affected by the work] or that there are fundamental flaws in the wider organisation'. Further, Hood (2008), and Yip (2006) argue, that the invitation or requirement to be reflective may be felt to be a burden rather than a support in psychosocial environments which: may be oppressive; have highly critical managers; are uncertain and insecure; have ongoing emergencies, and where there are emotionally draining court appearances.

Nonetheless, both Kraemer (2014) and Cooper (2018) strongly argue that if we do not consider and reflect upon our emotional experiences at work then we run the risk of struggling on with them. Cooper (2018, p. 26), maintains that this is ultimately harmful: 'we miss vital information about how to help service users with their difficulties, and we become psychologically burdened and deskilled ourselves'. But Hood (2018, p. 98) reminds us that we must be careful not to place the onus on individual practitioners to 'think their way out of problems caused by the institutions they work for'. Finally, and importantly Ruch (2007), reminds us, that for social work to be effective, emotionally informed thinking must be aligned to practical and procedural thinking and, in reverse, a clear and safe organisational context is required for emotionally informed thinking.

Containment and attacks on linking

Bion's (1970) original theory of the dynamic interplay of 'container' and 'contained' with respect to emotional experience is particularly helpful in understanding one mechanism for supporting workers to reflect. His concept of containment describes an emotional and dynamic process; the container – who he refers to as being the more mature person (parent/supervisor) – has the capacity for observation, reflection and the transformation of overwhelming yet unmeaningful emotional experience into something more manageable for the contained mind (infant/supervisee).

With reference to the parent-infant relationship, Bion (1970) suggests that it is with the provision of a containing space and a container, that the infant can begin some of its communication with its mother by means of *projective identification*. The infant projects

its frightening feeling-states into the mother, who contains them and in an attuned way, gives them back to the infant in a digestible form, a function which, if repeated over time, the infant becomes able to do for himself (1962). The mother's 'reverie' – or capacity to experience and acknowledge the feelings and respond appropriately – enables the process of containment. If this containing experience is unavailable, the frightening states must be pushed back inside and may give rise to overwhelming anxiety, or a 'nameless dread'. Practitioners working in environments with children and parents where abuse, neglect, deprivation and death is present, sometimes engage in actively not thinking. It is a protection, a defence. In moments of great distress, including survival and bereavement of the kind written about herein, it is hard to connect with experience, to make sense of it and to trust another with that experience.

Workers' capacity to engage with their own emotional experience as well as that of the families they work with is complicated by the processes we use to destroy thoughts and feelings associated with distressing and frightening experiences. Sometimes as a protection or defence against thinking about such frightening states, workers and foster carers can destroy the links between thoughts. Bion refers to this phenomenon as '*attacks on linking*'. This occurs when intolerable experiences sever the capacity of the worker to think about them (1967). He suggests that humans can make attacks on linking, especially in a state of mind where emotion is feared or felt to be too powerful to be experienced by the psyche, like the death of a baby. These attacks on the linking function leads to 'an over eminence of links to logical, rational, abstract links which are void of emotion' (Bion, 1967, p. 109).

Where a worker finds themself the recipient of unbearable, intolerable feelings from families, they sometimes identify with what is projected, lose a sense of themselves, and their decision making capacity and objectivity can be compromised (O'Sullivan, 2017). We, and others (Solomon, 2018; Lobatto, 2016 argue that there is a value for workers, children and families to be in receipt of emotional receptiveness and containment. But it is difficult to offer containment in spaces where there are disturbing psychosomatic experiences being communicated. Miller (2017, p. 10) argues that any offer of containment involves 'a tension between the distance required to allow productive reflection to occur, and the intimacy needed to be available and useful as a container'. It is our view that one way to attempt safe reflection on the emotional experiences that are an everyday part of social work, is by offering a containing, reflective space, such as that provided by a WDG.

Work discussion

There are many theoretical models with which offering a reflective practice group space is compatible. Jones (2014) identified a number of such models, including: Online Critical Reflection Dialogue Groups (Baikie et al., 2013), Critical Reflection (Fook and Gardner, 2007), Relationship-Based Model of Reflection (Ruch, 2007), and Work Discussion (Rustin & Bradley, 2008). There are other group supervision and reflective practice models and methods described outside of social work that have helpful theories and methods which could provide support in social work settings (Balint, 1957; Morelen et al., 2021; Proctor, 2009; Hawkins and McMahon, 2020; Kurtz, 2019).

The reflective space referred to in this paper is closely aligned to the WDG. The WDG developed at the Tavistock and Portman NHS Foundation Trust has formed a major part of their teaching provision over the last number of decades. WDGs are founded on the work of Martha Harris and Wilfred Bion who developed Esther Bick's approach to infant observation to facilitate observations of dynamics in work situations. The model has been used and evaluated in social work settings (Lees & Cooper, 2021), school settings (Jackson, 2014) and amongst early years workers (Elfer & Wilson, 2021). Lees and Cooper (2021), described a mixed-methods, longitudinal evaluation of WDG's in one local authority children's social work services department in the UK. In their study they describe a 'whole system' approach to establishing WDG's, to include frontline and managerial practitioners. The 2015 study was evaluated at year 1 and year 3. While there were positive results, these were conservative and the study highlighted some of the more negative aspects, which included: a lack of disposition to reflect in some group members, which the authors felt might be individually or organisationally located. In addition, social workers' reasons for non-attendance included time pressure and emotional overload relating to being already busy. This notwithstanding, the quantitative organisational data pertaining to the number of children subject to a child protection plan, the number of looked after children and the number of referrals showed a downward trend 'indicative of an improvement of services to children and families' (p. 10).

The WDG was chosen by the author/facilitator especially because it has been articulated as a useful model for meeting the developmental potential of child protection social workers (Warman & Jackson, 2007). Given the largely prescriptive climate in which social care and social workers are working, it was anticipated that the WDG might provide a space in which workers could be invited to: slow down their thinking; consider themselves in their work role and deepen their sensitivity to the people they work with. Potentially making a positive difference to the quality of a human service. Further, the WDG method is highly particular, depending on a worker observing themselves while actively involved in a work situation and reflecting on the implications of what is being seen and experienced (Rustin & Bradley, 2008). It is primarily the application of psychoanalytic ideas and methods to the emotional and unconscious life of individual workers and the organisational settings of work with children and families' (Rustin & Bradley, 2008, p. 267). The WDG is unique in its attention to beneath-the-surface phenomena, free associative thinking and inviting here-and-now reflection. Attention is drawn to the emotional and unconscious aspects of work settings, through detailed descriptive presentations. This can be felt to be helpful as we will see in this paper, because these work experiences are often felt to be disturbing to practitioners and there is sometimes a deep wish to understand them.

The WDG offered invites workers to pay attention to their experiences at work, and to become conscious, partly through their own responses, of the emotional experiences of families. The group facilitator is focused on the groups' reflection and on the group process rather than solely the search for a solution. The sole task of the WDG is not to examine its own dynamics and process as within an experiential group. However, during those occasions when complex issues can become enacted in the group and the atmosphere starts to feel intensely difficult, a carefully thought out, non-critical comment

about what is happening in the here and now can offer containment (Rustin & Bradley, 2008). The model expressly includes the concept of projection, considering the way in which the feelings of the reflecting worker, presenting a detailed narrative, can arouse the same feelings in the group participants (Rustin & Bradley, 2008).

However, it is also important to note that this method – and reflective practice groups in general – do not suit everyone, and there are times when practitioners are unable to engage for many complex reasons both to do with the work and the organisation (Ferguson, 2018). Kraemer (2014) suggests an obstacle to reflective practice might be the discovery within social workers of their relationship to authority, coming to terms with difference, and their own sense of omnipotence. Finlay (2008), argues against adopting reflective practice methods unquestioningly, highlighting that not everyone wants to reflect. Furthermore, for many practitioners who are new to this way of thinking, and processing of experiences at work, these spaces can be felt to be demanding, difficult, disturbing, depressing and requiring too much time and patience (Scanlon, 2017). Invoking Vygotsky's (1978) zone of 'proximal development', Scanlon (2017) highlights that the role of the facilitator, as the scaffolder, is an important one: working with the group and with the individuals in the group; not leaping ahead or delving too deep too quickly; attending to the group contract at all times and adhering to the group task.

Context

The piece of practice presented herein took place in the context of a medium-term therapeutic fostering support service established in 2014 and offered in one region in the Republic of Ireland. The fostering support service provides assessment, therapeutic intervention and support using a home visiting model. The service sits outside the Child and Family Agency (Túsla) but is funded by them and has an established working relationship with the Agency. Indeed, the success of the service depends on these professional relationships and strong professional networks.

The WDGs were offered monthly to the fostering support team, to social workers on the children in care team and to fostering social workers. All decision-making powers are retained by the respective line managers of each team. Membership is supported but not enforced by the management teams; members of the group are asked to attend regularly in order to help promote a sense of cohesiveness, trust and safety in the group. Limitations of this model are similar to those outlined above and include also the organisational environment and the challenging and competing demands of the social work teams, particularly those who are required to attend court.

The group process begins with the establishment of a learning agreement. This is revisited regularly with management and group members by way of addressing some of these limitations. A case is selected by a worker. The facilitator meets the worker and discusses the case in brief. An appropriate short scholarly article is selected which is thought to support the case presentation. The group reads the short paper prior to attending the WDG, with the aim of building a theory base in the group over time. The participant presenter brings a detailed written practice experience. The presentation is made. The group and facilitator listen, a practice referred to by Ruch (2007), as 'emotional listening' in which participants are encouraged to listen without taking notes – to become emotionally connected to what is being expressed verbally and

nonverbally. Following the presentation of the case, the group discuss their immediate feelings and thoughts with the presenter now acting as observer. The facilitator invites any free associative responses from the group. Following a short break, the presenter is invited back for a whole group discussion. Each seminar lasts two hours. It was within this context that Tom brought the Plaid* family and foster child Alex.

The case

Tom, an experienced social care worker, brought the Plaid foster family to the WDG in 2020. Mr and Mrs Plaid are relative foster carers. They are white Irish. They were fostering Mrs Plaid's niece, a 4-year-old child, Alex, who was living with them since she was a young baby. Alex was one of two siblings in her birth family. Alex's sister Jo was killed by one of her parents. Alex's father and Alex's mother were suspected of being involved in Jo's death. No one is sure of who killed this baby and both parents denied it was them. Alex continued to see her birth parents who have since separated. There is a new baby who lives with one of the parents.

The Plaids have the complicated task of caring for Alex, remembering or suppressing the death of their niece, perhaps mourning her death, and supporting Alex to see her birth parents. With this complicated fostering task in mind, Rustin (1999, p. 55), reminds us:

> 'once humans get close to each other, their internal worlds are in dynamic relation to each other. All of their earlier experiences . . . contribute to the landscape of the new relationship'.

The Plaids have been caring for Alex for a number of years in precarious circumstances: the stability of her placement with them is unknown; there have been several changes in personnel across the system and there has been a forgetting of some of the key facts about the case. Along with this is the known but unspoken-about death Jo and the relationships they hold with Alex's parents as relative carers.

Tom was assigned the case with the objective of supporting the couple in their caring of Alex. In the referral information to Tom, there were some key case details missing. Tom learned in his early work that Alex was two months old when Jo was killed. She was present and living in the household. She remained there for several months after Jo's death before moving to live with her aunt and uncle. Along with changes in personnel, some members of the professional network were on long-term sick leave, and there was an addition of a manager who was new to the case and did not know it well. All of which had led to a dilution of the history, to an extent where there was increasing anxiety amongst the carers about Alex's court directed increased contact with her birth parents.

Presentation

Tom had been working with the family for over six months before presenting them at the WDG. The work had been frustrating Tom, he felt the foster parents were overly anxious. He felt they provided really good care. He was confused about his role, and described: finding it hard to think; feeling 'helpless', and not being able to use his 'usual skills of relating' (Tom, case presentation). He opened his presentation describing this:

> 'I'm working with the family now for six months, I feel a sense of stuckness, like I'm frustrated by the foster carers . . . The carers are excellent and providing very good care to Alex. Something feels like it isn't adding up in my work with the family, I am not sure why I am involved really because they are so good. I can't think. They live in a house that is warm, they are kind and gentle people. Outside the house is a fortress, an electric gate, very big walls and large dogs. The foster father is feeling increasingly distressed at the increase in contact, they worry that Alex will return home. There are so many people involved and it's always changing, at a care order hearing [the social worker] forgot a report . . . leaving a vital piece of information out. (Tom, case presentation).

Early in the case presentation we became aware of the complexity of the case. Tom's stuckness and his attempt at bringing together two pictures, the warm and kind picture with the high levels of anxiety and the fortress. The group's initial response was one of anxiety, the missing pieces in the court space and their confusion about things not adding up. They used words like 'dreading' and 'escaping' this kind of work. As the WDG progressed Tom began to process the emotional content of the work experience via the group and he remembered Jo:

> 'I'm remembering Alex's birth parents. Yes, actually there is another child in this family. I have forgotten to mention her. She died at 10 months old as a result of Non-Accidental Injury when Alex was a baby. I forgot her' (Tom, case presentation).

> 'Can you remember her name?' (Facilitator)

> 'I cannot remember her name, [*it takes a moment*] it's Jo, I just realised I haven't really thought about her being dead and part of this, how did I forget this?' (Tom, case presentation).

In order for Tom to have the best chance of containing and making some sense of the Plaid's and Alex's experience and indeed his own, he uses the WDG to begin to think about what it is that is being projected into him. It is impossible in this instance for the carers to put words on what they want help with, so the unbearable feelings get pushed into Tom (Moylan, 2019). Tom continued to stay in touch with what had up until then been known but unthought about:

> '[Foster Mother] and I had discussed the implications of Jo's death during my early visits. It took a lot of effort for me to bring up this matter with her, we jumped between topics. It was hard to keep the thought of Jo for long. The fact that [foster mothers] brother may have killed her niece - it is even difficult to say now. I feel a little sick. I was pleased and relieved that I had got it out of the way at that visit so we could move on. But now, really, there is no moving on. [Foster Father] was not present during that meeting unusually, it is only now that I can wonder whether the facts of Jo's death were too much for him to even be present for' (Tom).

Tom's description, above, might be understood in the context of what Bion (1959) describes as an *attack on linking*, the disruption or destroying of links in Tom's mind and in the carers and Tom's communications, allowing extreme and possibly unbearable anxiety to be fended off. Tom uses the group to think with him in an open way. Some thoughts that were unthinkable take shape and some sense is made of Tom's experience at work:

> 'Where was Alex during the days and moments leading up to Jo's death?' (Tom).

Tom is overcome with emotion. He had a sense of taking in something of the carers experience and Alex's experience that had formerly passed him by. Tom continues:

> 'How can we understand such an act? How can we square it with our hope for humanity? It is very difficult material. It is extremely painful to bring to mind the violence that Jo experienced, her last few moments before dying, her body broken . . . There's such darkness there. Is it that these emotions that arise are simply too much for me? Too much for all who come in contact with this. Maybe it is a topic that must be avoided at all costs' (Tom).

There was silence in the group, initially, in response to what Tom presented. The facilitator spoke to the silence, and perhaps disbelief, belonging to both the group and Alex. The group members talked of imagining, for a few painful moments, what it might have been like for Alex to have somehow known about Jo's death. The group members reflected on their reactions individually to the material. Some of the group brought their own case material into the space, briefly making links to their own work. The disappointment and sadness and disbelief is explored safely outside of real world practice.

Tom is open to being supported to process some of this experience at work, with some distance created so as to allow the worries, anxieties and potential disappointments as well as the satisfactions be 'amplified, condensed and more safely explored' (Scanlon, 2017, p. 127). In this case, Tom finds himself in receipt of intolerable feelings from the family. He might identify with what is projected; the loss, the despair and the anxiety. His thinking is compromised. These phenomena are well documented Bower, 2010.

In responding to the anxiety associated with caring for Alex – supporting her to see her birth parents while holding in mind her dead sister – we can imagine the carers erected the necessary defences of splitting and projection. Projection is a recognisable defence which happens unconsciously between people. It is how painful emotional states that can sometimes be unbearable are communicated and gotten rid of (Waddell, 1998). Attempts at linking or thinking about Jo, her death and its significance for the work are attacked in the presence of powerful projections by the Plaids.

For Alex, part of her identity is that of a little girl whose mother or father killed her sister. Tom, in the group presentation, describes Alex as being treated as, and living like, 'a princess in a castle'. Perhaps her relationship to her birth family invites distress for Alex and her carers and so a new identity with a new family as a 'princess' feels essential to her survival. There may be a desire to 'split off' the unpalatable parts of Alex and the situation and locate them in Tom or in other members of the system. For Alex and her foster carers, these experiences are difficult and complicated, and working through these feelings, while living together and supporting Alex's ongoing relationship with her birth family, requires considerable support and emotional containment (Lobatto, 2016). In the absence of this, these deeply held feelings and anxieties about death are split off – projected into something or someone. By splitting this aspect of caring for Alex off from themselves, the carers are freed temporarily from the painful task of their own and Alex's mourning and recovery. Cooper (2018, p. 270), suggests that ' . . . the mobilization of fears about dying that loss engenders, and the work of mourning that is required to negotiate such losses is the link to dying and death and the permanent undertow in our work'.

A deeper connection

Bion (1967), contends that thinking arises from curiosity, which is prompted in part by frustration at not knowing and a longing to understand:

> 'I had forgotten Jo. Her death is at the core of this case because her death sets off a chain of events [*internally and externally*] . . . the death of a baby is extremely hard to contemplate. The killing of a baby . . . .' (Tom, Case presentation).

Smith (2010, p. 104) argues that because distressing experiences '*remain*' with the worker, it is critical that they are understood and shared. Particular projective experiences in the work can feel recognisable at an unconscious level. We might have an affinity for certain projections. Bion (1961) used the term 'valency' to describe our capacity for 'instantaneous combination' with others. Practitioners will vary with regard to which kinds of projections they are most likely to identify with and self-awareness is thought to be critical for 'using feelings as data accurately' (Trainor, 2019, p. 202). In Tom's case he is in touch with the painful loss of his own baby:

> 'In working through this case, I am blindsided by something hiding in plain sight; over twenty years ago my own baby son died from heart failure. He was ten days old. I had buried this deep down. I am connecting with the death of my own infant son' (Tom, post group reflections).

According to Cooper (2018, p. 27), 'our task as workers is to know ourselves well enough, so that we can disentangle the influence of others upon ourselves, and us upon them, and thus make sense of how their anxieties, conflicts and distress are being communicated'. In human work, such as that described by Tom, what needs attention 'is the listener's own experiences, or the *countertransference*, as the story is told' Moylan (2019, p. 20). The processes we write about herein reflect the ongoing effort in Tom's work to attune to his emotional experience of himself at work:

> ' . . . how arbitrary is the separation between our personal and professional lives. We certainly cannot boundary the unconscious. I now see another reason why I may forget about the death of Jo, and her name. To remember brings me to my painful personal experience that happened a long time ago but has never gone away' (Tom, post group reflections).

Tucker (2016, p. 276) maintains 'our historical lives and the associated emotional experiences, both conscious and (largely) unconscious, underpin our current emotional states, but they are also resurrected by them in response to pressures (and projections) in the here and now, both personal, organisational and systemic'. Having a human experience of loss and expecting that one can separate it out from practice with children and families in distress is naïve at best. Roberts (1994), suggest many of us are attracted to working in particular settings because they offer occasions to work through unresolved personal issues. If this is correct, then staff with similar internal needs find themselves in similar settings. The needs that workers bring to the work interact with the needs that families bring. Roberts, 1994, p. 113) refers to the self-imposed, often unarticulated, but powerful task, as 'the self-assigned impossible task'. Anchoring one's practice approach in the personal experience of development contributes to deeper and less awkwardly artificial ways of working (Obholzer, 2021). Reflecting on the impact of the WDG, Tom says:

> 'Probably the most compelling benefit of the group for me is being understood, having my feelings validated and accepted. An opportunity to reflect on how this case got under my skin, how my personal life may affect a case; an opportunity to show my vulnerability . . . most importantly it offered an opportunity to deeply think about the meaning of this case and to take this meaning and consider it for the other families I work with' (Tom, post group reflections).

Discussion

This is a highly selective presentation of a case and the experience of a WDG as presented by three authors and members of the group. Nonetheless, we believe it illuminates particular aspects of practice in social care and social work. The presentation of detailed case material in a WDG environment illuminates the complex particulars of practice including the performance of distinctive tasks and the anxieties and defences associated with them. The provision of a WDG to this multi-agency team sought to:

(1) Invite workers to move closer to the experiences of families and themselves. In this case, the WDG facilitated a connection between the symptoms the family and Tom presented with and their source.
(2) Invite workers to examine unconscious processes at work and make the connection, where appropriate, to situations where interventions with families are influenced by workers unconscious processes.
(3) Make space for workers to gain clarity in approach to working with families, inviting opportunities for reparation.
(4) Attend to and support the evolution of change and perception within the worker and the group.
(5) Offer an ongoing opportunity to reflect on practice experiences and develop a robust theoretical framework for further thinking about families and workers.

Work Discussion Groups are not the only mechanism for peer support and group thinking, however we argue with reference to the practice material written about herein, that the model does provide a robust structure which allows for engagement with the more complex and painful aspects of practice. Specifically, the WDG offered Tom the opportunity to develop his capacity to preserve his emotional availability without retreating, enabling him to make contact with and talk about his sadder feelings. This resulted in Tom moving closer to the family and their experiences. Distancing ourselves from the experiences of families and workers is recognised as a form of depersonalisation by Hirschhorn, who suggests that: 'we act out and stay out of touch with reality by discounting the reality of other people and ourselves' (1995; 67). The result is that the meaning of the work becomes progressively less clear with workers finding it difficult to find reparative opportunities. In this case the WDG offered the opportunity to stay in touch with the reality of Tom's experience and that of the Plaid family. In the face of powerful projections and unprocessed emotions belonging to Tom and the Plaid family, Tom was left feeling confused about the work. This was inextricably linked to the conscious and unconscious meaning attributed to the task by Tom and by the Plaid family. The WDG afforded an opportunity for Tom to make sense of this, with the bringing of detailed case material which he shared with the group.

Conclusion

Managing the business of human service organisations and supporting learning from experience 'though recognised as systemically related, are also viewed as distinct activities, utilising irreducible forms of knowing that need to be developed through different

types of conversation in different spaces and places' (Scanlon, 2017, p. 122). We have tried to demonstrate the potential benefit of a WDG in supporting practitioners to think about the anxieties stirred up by their work and the impact of these anxieties on them. We contend that experienced workers, like Tom, may have deeply held personal feelings and experiences that this work can trigger. Not attending to these feelings and their impact on the work and the worker renders workers, like Tom, vulnerable to repeating ways of working and responding to families (Rustin, 2005). Teams and organisations should recognise that no individual worker can easily manage the extent of the trauma they meet in families and systems alone.

Notes

The names of the parents, infants and workers referred to in this article are not their real names. Some identifying characteristics have also been changed.

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References

Bion, W. (1959). Attacks on linking. In *International Journal of Psychoanalysis*, *40*, 308–315. [reprint in: Bion, W. R. (1967). Second Thoughts, London: Heinemann]

Bion, W. (1961). *Experiences in groups*. Tavistock Publications.

Bion, W. (1967). A Theory of Thinking. *International Journal of Psychoanalysis*, *43*, 306–310. [reprint in: Bion, W. R. (1967). Second Thoughts, London: Heinemann]

Bion, W. (1970). *Attention and interpretation. a scientific approach to insight in psycho-analysis and groups*. Tavistock Publications.

Bower, M. (2010). Clinical Social Work. *Journal of Social Work Practice*, *24*(2), 115–119. https://doi.org/10.1080/02650531003743724

Cooper, A. (2018). *Conjunctions; social work, psychoanalysis, and society*. Karnac.

Cooper, A., & Lousada, J. (2005). *Borderline Welfare: Feeling and Fear of Feeling in Modern Welfare*. Karnac.

Dartington, T. (2010). *Managing Vulnerability*. Tavistock Clinic Series.

Dwyer, S. (2007). The emotional impact of social work practice. *Journal of Social Work Practice*, *21*(1), 49–60. https://doi.org/10.1080/02650530601173607

Elfer, P., & Wilson, D. (2021). Talking with feeling: Using Bion to theorise 'work discussion' as a model of professional reflection with nursery practitioners. *Pedagogy, Culture and Society*, 1–19. https://doi.org/10.1080/14681366.2021.1895290

Ferguson, H. (2018). How social workers reflect in action and why they don't: The possibilities and limits to reflective practice in social work. *Social Work Education*, *37*(4), 415–427. https://doi.org/10.1080/02615479.2017.1413083

Ferguson, H., Disney, T., Warwick, L., Leigh, J., Singh Cooner, T., & Beddoe, L. (2021). Hostile relationships in social work practice: Anxiety, hate and conflict in long term work with involuntary service users. *Journal of Social Work Practice*, *35*(1), 19–37. https://doi.org/10.1080/02650533.2020.1834371

Finlay, L. (2008). Reflecting on 'Reflective Practice' PBPL discussion paper, Paper 52, Open University.

Froggett, L., Ramvi, E., & Davies, L. (2014). Thinking from Experience in Psychosocial Practice: Reclaiming and Teaching 'Use of Self'. *Journal of Social Work Practice*, *29*(2), 133–150. https://doi.org/10.1080/02650533.2014.923389

Gould, L., Stapley, L., & Stein, M. (2001). *The systems psychodynamics of organisations*. Karnac.

Hood, R. (2008). *Complexity in Social Work*. Sage.

Jones, J. (2014). *A Report for the Centre for Social Work Practice on Reflective Practice Group Models in Social Work*. Centre for Social Work Practice.

Kraemer, S. (2014). Anxiety at the front line. In D. Armstrong & M. Rustin (Eds.), *Social defences against anxiety: explorations in a paradigm* (pp. 144–160). Karnac.

Kurtz, A. (2019). *How to run reflective practice groups: a guide for healthcare professionals*. Routledge.

Lees, A., & Cooper, A. (2021). Reflective practice groups in a children's social work setting – What are the outcomes, how do they work and under what circumstances? A new theoretical model based on empirical findings. *Journal of Social Work Practice*, *35*(1), 93–109. https://doi.org/10.1080/02650533.2019.1700494

Lobatto, W. (2016). Working with professional systems. In S. Barrett & W. Lobatto (Eds.), *Surviving and Thriving in Care and Beyond* (pp. 21–45). Routledge.

Moylan, D. (2019). The dangers of contagion. In A. Obholzer & V. Z. Roberts (Eds.), *The unconscious at work; a Tavistock approach to making sense of organisational life* (pp. 19–27). Routledge.

Munro, E. (2011). *The Munro review of child protection: Final report, A child- centred system*. Department for Education. HMSO. Retrieved March 2011, from www.education.gov.uk/munroreview.

O'Sullivan, N. (2017). The dichotomy of 'thinking' and 'doing' in social work practice with neglected infants and toddlers. How do social workers respond to neglect and abuse in infancy, and does this change with the introduction of a sustained case discussion forum? *Professional Doctorate thesis*, Tavistock and Portman NHS Foundation Trust / University of East London. http://repository.tavistockandportman.ac.uk/1729/

O'Sullivan, N. (2019). Creating space to think and feel in child protection social work; a psychodynamic intervention. *Journal of Social Work Practice*, *33*(1), 15–25. https://doi.org/10.1080/02650533.2018.1460589

O'Sullivan, N., & Cooper, A. (2022). Working in complex contexts; mother social workers and the mothers they meet. *Journal of Social Work Practice*, *36*(1), 101–117. https://doi.org/10.1018/02650533.2021.1944072

Porges, S. W. (2007). The polyvagal perspective. *Biological Psychology*, *74*(2), 116–143. https://doi.org/10.1016/j.biopsycho.2006.06.009

Roberts, V. Z. (1994). The self-assigned impossible task. In A. Obholzer & V. Z. Roberts (Eds.), *The Unconscious at work; individual and organisational stress in the Human Services* (pp. 110–118). Routledge.

Ruch, G. (2007). Thoughtful practice: Child care social work and the role of case discussion. *Child and Family Social Work*, *12*(4), 370–379. https://doi.org/10.1111/j.1365-2206.2006.00466.x

Ruch, G., Turney, D., & Ward, A. (2010). *Relationship-based Social Work: Getting to the heart of Practice*. Jessica Kingsley.

Rustin, M. (2005). Conceptual analysis of critical moments in Victoria Climbie's life. *Child Family Social Work*, *10*(1), 11–19. https://doi.org/10.1111/j.1365-2206.2005.00351.x

Rustin, M., & Bradley, J. (2008). *Work Discussions: Learning from reflective practice in work with children and families*. Karnac.

Scanlon, C. (2017). Working with dilemmas and disappointment in difficult places: Towards a psychosocial model for team-focused reflective practice. In A. Vaspe (Ed.), *Psychoanalysis, the NHS, and MENTAL HEALTH WORK Today* (pp. 115–133). Routledge.

Schon, D. (1983). *The reflective practitioner*. Basic Books.

Shoesmith, S. (2016). *Learning from Baby P, the politics of blame, fear and denial*. Jessica Kingsley.

Smith, M. (2010). Sustaining relationships: working with strong feelings. In G. Ruch, D. Turney, & A. Ward (Eds.), *Relationship-based social work* (pp. 102–117). Jessica Kingsley.

Solomon, R. (2018). A Psycho-educational group for foster carers. In M. Bower & R. Solomon (Eds.), *What social workers need to know: a psychoanalytic approach* (pp. 149–164). Routledge.

Stapley, L. (2006). *Individuals, groups, and organisations beneath the surface*. Routledge.

Trainor, K. (2019). Feelings as data. In M. Rustin & J. Bradley (Eds.), *Work discussions: Learning from reflective practice in work with children and families* (pp. 196–204). Karnac.

Tucker, S. (2016). The missing link – putting the organisation back in working relationships. *Journal of Social Work Practice*, *30*(3), 267–281. https://doi.org/10.1080/02650533.2016.1215976

Warman, A., & Jackson, E. (2007). Recruiting and retaining child and family social workers: the potential of work discussion groups. *Journal of Social Work Practice*, *21*(1), 35–48. https://doi.org/10.1080/02650530601173599

Yip, K. (2006). Self-reflection in reflective practice: a note of caution. *British Journal of Social Work*, *36*, 777–788. https://doi.org/10.1093/bjsw/bch323