African American males have never fared as poorly as they do currently on a number of social indicators. They are less likely to complete high school than their white male and female or African American female peers, are more likely to exhibit depressive symptoms, and they have fewer sanctioned coping-strategies. Arguably, no other group in American society has been more maligned, regularly faced with tremendous odds that uniquely threaten their existence. When they do receive education, mental health, and physical health services, it is often in correctional settings. They are marginalized in public policies on secondary and higher education attainment, marriage and parental expectations, public welfare, health, housing, and community development. Yet they remain overlooked in health and social science research and are stereotyped in the popular media. Taking a step back from the traditionally myopic view of African American males as criminals and hustlers, this book provides a more nuanced and realistic portrait of their experiences in the world. The chapters offer a comprehensive overview of the social and economic data on black males to date and the significant issues that affect them from adolescence to adulthood. Via in-depth qualitative interviews as well as comprehensive surveys and data sets, their physical, mental, and spiritual health and emerging family roles are considered within both individual and communal contexts. Chapters cover health issues such as HIV and depression; fatherhood and family roles; suicide; violence; academic achievement; and incarceration.
Promising Practices

Reginald Clark, Alexes Harris, Kimberly A. White-Smith, Walter R. Allen, and Barbara A. Ray

in Social Work With African American Males: Health, Mental Health, and Social Policy

Published in print: 2010 Published Online: September 2010
Publisher: Oxford University Press
DOI: 10.1093/acprof:oso/9780195314366.003.0007

This chapter analyzes data collected from 28 after-school programs funded under the W. K. Kellogg African American Men and Boys Initiative. It examines the inevitability of massive failure and incarceration of African American males in American society, and it presents systemic evidence of alternative outcomes. It examines the role of public policy for expanding existing and new school- and community-based after-school centers. It also considers media practices in which disproportionate attention is given to those African American males who go wrong compared to the greater majority of African American males who lead upstanding, decent, and productive lives. The public policy analyses further address the lack of attention focused on individuals and institutions that assist and produce admirable, high-achieving African American men and boys, and how this neglect magnifies the issues of race and inequality in American society.

The African American Male

Earl S. Johnson and Waldo E. Johnson

in Social Work With African American Males: Health, Mental Health, and Social Policy

Published in print: 2010 Published Online: September 2010
Publisher: Oxford University Press
DOI: 10.1093/acprof:oso/9780195314366.003.0018

This chapter discusses the social and economic challenges faced by African American males. It then proposes a three-step policy process that would greatly improve the wellbeing, social integration, and potentially the economic status of African American males in the United States. These options are by no means easy to implement or even to agree upon, but they are designed to provoke discussion and to implement action — before things get worse.
Introduction
Theodore J. Stein

in The Social Welfare of Women and Children with HIV and AIDS: Legal Protections, Policy, and Programs

Published in print: 1998 Published Online: January 2009
Item type: chapter

This introductory chapter begins with a discussion of the federal response to the AIDS epidemic in its first ten years, with similarities drawn between the AIDS epidemic and venereal disease epidemics during the first part of the 20th century. The methodologies used by the Centers for Disease Control to compile data on the incidence and prevalence of HIV and AIDS are described. The impact of HIV on women and children are then reported.

HEROES OR VILLAINS?
CHERYL REGEHR and TED BOBER

in In the Line of Fire: Trauma in the Emergency Services

Published in print: 2005 Published Online: January 2009
Item type: chapter

While the initial public response to tragic events may be an outpouring of support and admiration for emergency workers, this support inevitably wanes and society begins to consider what might have been done to facilitate a more positive outcome to the disaster. Following the occurrence of a significant event, frequently a post-mortem inquiry is performed in the form of a coroner’s inquest, an internal investigation, or a specially formed public commission. Practice experience has shown that the experience of going through a post-mortem review can be extremely stressful. Emergency service workers are often faced with life threatening and uncontrollable situations where quick thinking and reasoned action is required. Failure to deal with these acute situations optimally may result in professional condemnation, community sanctions and possible legal actions. This chapter reviews experiences with public inquiries and their impact on the individual, their family, and the emergency service organization.
When interventions are seen within an ecological and eclectic context attention is directed to recognize the strengths, resources, and adaptability of people. This framework also focuses on the interaction between the needs and resources of the person and the demands and resources in the environment. The right effort is not direct to one intervention but to a range of interventions. Points of intervention can be organized on dimensions of level and timing: timing of interventions may include tertiary, secondary, primary prevention as applied to the continuum of disaster stages or phases. The level of interventions may be directed to an individual professional and their family members; to their team or department; or to larger systems such as the organizations or systems such as public policy or workplace health. The chapter reviews principles of intervention that focus on resiliency, community building, evidence of efficacy, cultural sensitivity, and sustainability. It then focuses on preventative approaches and setting the stage for intervention.

Exposure to Urban Violence
RAYMOND P. LORION, ANNE E. BRODSKY, and MICHELE COOLEY-QUILLE

This chapter focuses on the extent of urban violence and the effects of the exposure of children and adolescents to this violence. It begins with a discussion of literature on the nature, extent, and effects of pervasive community violence on children and adolescents. It presents a framework by which interventions can be categorized and organized, and then reviews literature on some of the more successful intervention programs developed to address this problem. It argues that the nation's mental health services must respond proactively to the threat or urban violence consistent with the ongoing evolution of services toward a merger of mental and public health.
Community-Based Interventions in a System of Care and Outcomes Framework

Albert J. Duchnowski, Krista Kutash, and Robert M. Friedman

in Community Treatment for Youth: Evidence-Based Interventions for Severe Emotional and Behavioral Disorders

The response of the mental health system to troubled youth and their families is in a period of transition, and changes are occurring in both the conceptualization of what constitutes effective intervention and in how services are delivered. This chapter describes the initiatives and research findings that have driven these changes within a system of care and outcomes framework. It traces the history of children's mental health services, and presents forecasts for future developments.

Departments of Public Welfare or Social Services

Patricia Brownell

in Handbook of Social Work in Health and Aging

This chapter addresses the practice of social work in public welfare and social services; settings from which the profession has retreated. A survey by the National Association of Social Workers (NASW) indicated less than 1% of membership worked in these public sector settings. The chapter describes historic and contemporary roles of professional social workers in public welfare and social services, including work in income maintenance, adult protective services, special housing programs, HIV/AIDS services, kinship care, and domestic violence programs. It describes the dilemmas and tensions inherent in these roles.

Toward Critical Social Practices

Marcelo Pakman

in Handbook of Community-Based Clinical Practice
This chapter examines the sources of strain for community-based practitioners historically, and how an understanding of the “poetics” and “micropolitics” of practice currently can help in the actual conditions of public mental health practice. It argues that poetics and micropolitics, as generative frames, legitimize the local social arena as a locus of a necessary expertise for psychotherapists. They are action-oriented frames that bring to the field the power of the mythical, generative, metaphoric word, opposed to the logos, the illusory literal word at the center of the Western metaphysical tradition that Jacques Derrida has relentlessly deconstructed. They bring poiesis, generation, to its place in a well-developed, theoretically-sound community mental health, as an area of participatory action-oriented science.

Partners for Success

Phebe Sessions and Verba Fanolis

in Handbook of Community-Based Clinical Practice

This chapter presents the work of Partners for Success (PfS), a collaborative project between Smith College School for Social Work (SSW) and an urban public school system of a mid-size city in the Northeast. In a context of widespread experimentation in locating mental health services in the public schools, this program succeeded in achieving the goals of providing multi-systemic mental health services consistent with system-of-care principles, while preparing social work interns for clinical and leadership roles in school-based mental health services. The chapter describes the impetus for the project, the initial negotiations between the two partners, the agreed-upon goals, the initial stages of entry and engagement, a lengthy period of stability and expansion, the clinical model that evolved over time, evaluative studies of the degree of satisfaction experienced by different stakeholders, and the process of adjustment to recent financial crisis in the schools, with reduction in the scope of the program, coupled with integration into the structure of the school system. The story is supplemented by integrating discussions of important issues from the literature about school-based mental health practice, as well as with case examples.
Henry Darger and the Unruly Paper Dollhouse Scrapbook
Mary s. Trent

in Phallacies: Historical Intersections of Disability and Masculinity
Published in print: 2017 Published Online: September 2017
Publisher: Oxford University Press
DOI: 10.1093/oso/9780190458997.003.0003
Item type: chapter

Grown men do not play with paper dolls; or, at least, they are not supposed to. Nevertheless, self-taught Chicago artist Henry Darger (1892–1973) worked over many decades to create an elaborate fictional world. This chapter examines a series of collage-paintings that Darger like created at mid-century to consider the significance of paper dolls to his art. It argues that domestic space and girlish crafts offered Darger opportunities for creative expression that were otherwise inaccessible to him in the public sphere due to his designation as a sexually degenerate man. In the privacy of his apartment, away from society’s judgments, Darger offered an alternative to the restrictive sexual norms of his time by celebrating ambiguously gendered children.

Mental health: safe, sound and supportive?1
Jon Glasby, Helen Lester, and Emily McKie

in Ethics: Contemporary challenges in health and social care
Published in print: 2007 Published Online: March 2012
Publisher: Policy Press
DOI: 10.1332/policypress/9781861347558.003.0017
Item type: chapter

This chapter examines the contested nature of mental health provision within the context of proposed legislative changes, exploring the key ethical dilemmas that are raised. It discusses the proposed changes to the 1983 Mental Health Act, and the resulting practical and ethical dilemmas they raise for frontline practitioners in health and social services, service users, and indeed for wider society. The chapter then considers the 2004 Draft Mental Health Bill, which raises significant ethical issues with regard to autonomy, beneficence, and individual liberty. It is argued that the proposed changes to the 1983 Mental Health Act are focused on risk and public safety rather than on the health and welfare of those people whose decision making is impaired by reason of their mental disorder. The 2004 Draft Mental Health Bill is also out of step with other current relevant government policy initiatives in this area, particularly the choice agenda, which risks disadvantaging people with mental health problems relative to other patient groups.
Roadblocks

David Donnison

The cases discussed in previous chapters show that advocates will sometimes come up against public services which, despite their best efforts, completely fail to give their clients the help they are entitled to expect. It is unfair to advocates, and useless for their clients, to send them out to ask for things we know will be refused. But advocates would be failing in their duty if they accepted bad services without trying to make them better. So what should they do? This chapter attempts to help people who encounter such roadblocks formulate a policy for dealing with them. It describes the work of the Gateshead Advice and Information Network (GAIN).

Looking ahead

David Donnison

This chapter looks back to the origins of the advocacy movement and asks where it is going, what contributions it should make to the wider society, and how it should relate to other strategies for making public-service professions more accountable and responsive. It concludes that advocacy should not become part of the systems that divide a society and disempower its more vulnerable citizens. It should help to reverse, not reinforce, the inverse care laws that so often operate within our public services. The concerns for human rights and social justice that inspired the pioneers in this field must not be forgotten.

Reconceptualising death

Paul Sinclair

in Rethinking palliative care: A social role valorisation approach
The contradiction that palliative care devalues people who are dying while aiming to value them asks many questions of palliative care. This contradiction shows a deep confusion about devaluation and its processes. Something in palliative care's understanding of death as it relates to devaluation must, therefore, intersect with this contradiction and help sustain it. This chapter explores this connection with palliative care's conceptualisation of death that, naturally, reflects rather than challenges modern values and understandings of death. The discussion analyses the romantic idealisation of the compassionate ethos of the public-health approach of Kellehear (2005a) and, by implication, the romantic idealisation of the religious ethos of palliative care. Understanding the conceptualisation of death behind this idealisation makes clear the costs, with respect to the meaning of death, of universalising death and loss. Key nuances arising from the insights of Social Role Valorisation theory enable this monolithic and universalistic idea of death to be disassembled. The chapter begins by setting the groundwork for exploring the three faces of death. Using a ground breaking and unifying concept from Wolfensberger (1992a) to contextualise the idea of death, the discussion then turns to deriving the triune face of death.

Origins of advocacy

David Donnison

in Speaking to power: Advocacy for health and social care

Published in print: 2009 Published Online: March 2012
Publisher: Policy Press
DOI: 10.1332/policypress/9781847420381.003.0002
Item type: chapter

To understand advocacy properly – or any other new development in public policy – we should first ask: Where did it come from? Who created it? And, what were they trying to achieve? This chapter describes the main kinds of advocacy available and traces the origins of these movements. It also discusses advocacy for people with mental disorders.

Scotland gives a lead

David Donnison

in Speaking to power: Advocacy for health and social care

Published in print: 2009 Published Online: March 2012
Publisher: Policy Press
This chapter addresses the following questions: Why did Scotland give a lead in setting up advocacy services? Why did it focus particularly on the needs of people with mental disorders? The chapter describes the reforms introduced by Scotland's Parliament that showed both a belief in the state and its public-service professions, and a robust capacity to challenge established authorities. One of these is the Mental Health (Care and Treatment) (Scotland) Act, which came into force in October 2005. It called for a free advocacy service that would be available to anyone with a mental disorder who wanted it - a local service provided by voluntary bodies which would not be permitted to do anything else but advocacy.

‘Pseudo-democracy and spurious precision’: knowledge dilemmas in the new welfare state

Eithne McLaughlin

in Cash and care: Policy challenges in the welfare state

Since the 1970s, consultation with service users has become an accepted feature of both policy making and professional practice. This reflects the impact of grassroots social movements on ways of thinking about welfare in Britain. The first part of this chapter locates this growth in consultation practice in a broader social and political context – the crisis of legitimacy in public services and the welfare state, and the crisis in the legitimacy of expert knowledge that characterizes social life in the age of modernity. It then reviews the nature of policy making, noting the limitations of the rationalistic What Works agenda and similar academic models of the policy-making process. The third part of the chapter summarises two main approaches to the generation of knowledge about the social world. Finally, the chapter illustrates the strengths of interpretivist social research by summarising some of its key contributions to the understanding of health, illness, and disability. The social model of disability and the critique of rehabilitation which it has generated are presented as examples of the way that social research is more likely to influence overall policy trajectories than the design of specific policies.
Independent living: the role of the disability movement in the development of government policy

Jenny Morris

in Cash and care: Policy challenges in the welfare state

Published in print: 2006 Published Online: March 2012
DOI: 10.1332/policypress/9781861348562.003.0017
Item type: chapter

In 2005, the British government committed itself to achieving independent living for disabled people and set out proposals for delivering this aim. This chapter examines the role of research evidence and the disability movement in influencing government policy, situating the discussion in the context of wider debates on citizenship, human rights, and the role of the state. It also asks whether these new proposals further an individualist and consumerist approach to meeting needs, thus undermining the collectivism and public service ethos that have been such an important part of the welfare state; or whether they will help disabled people to achieve the active citizenship which previous social policies have failed to deliver. The chapter therefore illustrates the changing role and nature of ‘evidence’ in the policy process described in Chapter Four, and extends some of the arguments on choice, consumerism, and citizenship set out in Chapters Sixteen and Eighteen.