
Evaluation of Efficiency in Social Work Practice and Supervision: Empirical Approach

Efektivitātes novērtēšana sociālā darba praksē un supervīzijā: Empīriskā pieeja

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Efficiency assessment of social work and supervision demonstrates in a direct way the integrative link of social work research and practice. Assessment gives possibility to analyze systematically and systemically both the processes of social work intervention and processes, methods and techniques of supervision, as well allows determining the potential benefits for clients or systems of clients that have originated from the professional activity of social worker. Nevertheless, there exist cardinal differences regarding empirical evidences between efficiency assessments of social work practice and efficiency assessments of social work supervision. Efficiency assessment of social work practice has developed in the period longer than hundred years. Meanwhile there are developed different assessment theories during this period, in the practice there are used different assessment models, and for the assessor of social work practice there is nothing for it but to choose the most appropriate from assessment strategies and simply to use it. Article provides empirical overview on modern approaches, separate models of efficiency assessment of social work practice and their substantiated connection with benefits of social work clients. In the field of efficiency assessment of social work supervision with the means of research data it is given a characterization of situation, and it is concluded that there exist empirical evidences for positive influence of supervision on social work professionals and institutions, but there exist next to nothing empirical evidences on influence of supervision on the results of social workers and on the benefits of social work clients.

Keywords: social work research; social work efficiency; efficiency, assessment of social work supervision.

Introduction

Social work has reached a significant developmental milestone in its professional identity as it collectively celebrates over a century of professional practice that targets individual and societal transformation (Popple & Leighninger, 2014). Historically, social workers have used a combination of research and practice strategies to advocate for improved social conditions for underserved populations (Day & Schiele, 2013). Social work research and evaluation continue to evolve as a mechanism that gathers data, which can be used toward enhancing well-being and socially just outcomes (Wronka, 2008). Since the beginning of the profession, research in the form of the scientific method has been used to understand individual and social problems and assess and evaluate the outcomes of social work. Research and evaluation comprise a central feature of social work practice that can foster and appraise the profession's progress toward its mission (Wronka, 2008). Research and evaluation is important because it enables social workers to be curious and creative, as well as systematic and thorough in their activities, which involves prevention and intervention work with individuals, families and communities as well as evaluation. Use of scientific methods with the aim of creating a specific information to be applied to practice in the profession has historically made social work research and evaluation unique. William Reid has articulated three main functions of research and evaluation in the social work practice.

First, scientific perspectives and methods can provide a framework for practice activities and help obtain the best results possible. It is a way of thinking that offers strategies for action. Reid proposed that such a way of thinking encourages 1) to use concepts that are clearly connected to empirical events; 2) to collect data systematically; 3) to be cautious while drawing conclusions and to consider alternative explanations of events; 4) to use research-based knowledge as much as possible, and 5) to evaluate critically results of one's activities.

Second, research is an essential tool for acquisition of knowledge that can be used in practice. Research can serve as a generative tool, which develops and clarifies the use of theory in practice and can be used to assess the effectiveness of the practice. When knowledge is empirically based, it strengthens the practical decisions.

Third, research helps to fulfil social workers function to evaluate their practices in working with people, groups, or communities. It should be a routine part of social work practice to perform a needs assessment, quality assurance, evaluation of intervention programs and practices, assessment of social programs. If there is no such social work practice assessment, then social workers can reflect on the fruits of their work only by reference to altruistic imagination, i.e., to assume that the clients' situation has improved as we have so much work invested and dedicated ourselves to others.

Evaluation in social work practice

Social work research and social work evaluation is not the same. Social research can be defined as the systematic investigation of phenomena. During any social work research there is process of inquiry, which includes at least 1) defining a research problem or question; 2) reviewing literature and theory pertaining to the problem/question; 3) collecting data; 4) analysing data; and 5) concluding about the phenomena. The ultimate goal of social research conducted by social workers is to seek new generalizable knowledge about issues emerging from the practice and existing in the practice, namely, problems of individuals, small groups, families, communities, and the

social environment. Some of the more commonly used quantitative methods of social research used by social workers include exploratory studies, quantitative-descriptive studies, quasi-experimental studies, descriptive studies, and meta-analyses. Especially common is application of qualitative methods in social work research, such as field studies, phenomenological studies, case analyses, ethnographies, and action research.

Practice evaluations, in their turn, assess interventions to determine their potential benefits to clients or client systems (i.e., the systems or context, in which clients find themselves, such as a family unit, school, community). Social work practice evaluations also follow a process of inquiry that includes at least 1) defining the problem of client system; 2) defining the intervention(s) used; 3) collecting data about the intervention's impact; 4) analysing data; and 5) concluding about the intervention and its benefit to the client system. The goal of practice evaluation is to assess the potential benefit to client systems, and, while the development of generalizable scientific findings is desirable, it is of secondary importance and can be omitted at all (Bloom & Orme, 1993). The primary scientific methods used by social workers to evaluate their practice outcomes involve single-system designs (see Bloom, Fischer, & Orme, 1999) and simple group research designs (see Royse, Thyer, Padgett, & Logan, 2006).

As one might expect, the vast majority of social work research and practice evaluation, which is carried out and published by social workers, use hypothetical-deductive approach to research in three stages: the objective, method and conclusions. As a result, it is often difficult to distinguish between these two research processes, because they both use similar research process structure. *Table 1* presents a set of criteria differentiating social work research from social work practice evaluation.

Table 1

Distinguishing features of social research and practice evaluation in social work

	Criteria	Social research	Practice evaluation
I.	<i>Purpose</i>	To develop and test hypothesis To seek new knowledge	To assess how practice benefits clients/ client systems
II.	<i>Doctrine</i>	Value free	Value laden
III.	<i>Theoretical basis</i>	Theoretical	Atheoretical
IV.	<i>Intended audiences</i>	Other researchers Academics Other social workers Funding bodies	Clients Agency staff Other social workers Funding bodies
V.	<i>Methodology</i>		
i..	<i>Sampling</i>	Multiple (n > 10)	Singular (n = 1)
ii.	<i>Instrumentation</i>	Standardized	Crafted and standardized
iii.	<i>Statistics</i>	Descriptive and inferentia	Graphs, percents, descriptive
iv.	<i>Generalizability</i>	High	Low
v.	<i>Design</i>	Much variability in rigor	Rigorous
vi.	<i>Dissemination of results</i>	Optional Academic conferences	Clients Agency staff

(Holosko u.c., 2009)

Assuming that the goal of social work practice assessment is to evaluate whether and to what extent social work professional intervention has led to changes in client or client system, it becomes clear that the key issue of social work practice evaluation is the question of efficiency, or in other words, does social worker's activity reaches its goal? According to the *Social Services and Social Assistance Law* of the Republic of Latvia, object of social work is to assist a person, family and group of people in determining, solving or reducing of social problems by developing person's own resources and involving in support systems (Article 40), but the professional activity of social worker and caritative social worker is focused on the achievement and promotion of practical solution of individual's social problems and enhancing individual's quality of life, social inclusion, the ability to help oneself (Ibid., Article 45).

There are a variety of evaluation strategies that can be used to assess the effectiveness of social work at all levels – micro, meso and macro levels, and for the sake of visibility they all can be combined in four models –

- scientific-experimental model;
- management-oriented model;
- qualitative anthropological model;
- client-oriented model.

Scientific-experimental models are historically the most widely used assessment strategies. Using scientific values and methods they put primary emphasis on objectivity, accuracy, desirability of objectivity and data reliability. Experimental and quasi-experimental designs, goal-centred research and theory-guided evaluation designs are evaluation designs most commonly used in scientific-experimental models.

Different strategies are used within *management-oriented models*. Two of the most common techniques used in these models are PERT (*Program Evaluation and Review Technique*) and CPM (*Critical Path Method*). Both of these techniques are widely used not only for evaluation and assessment but also for different purposes in different areas of the economy. By contrast, the next two – UTOS model (an abbreviation of the English U – *unit*, T – *treatment*, O – *outcomes*, S – *setting*) and CIPP model (C – *context*, I – *input*, P – *process*, P – *product*) – are developed directly by evaluators for specific evaluation needs. These management-oriented models emphasize comprehensiveness of the evaluation, including assessment into broader context of organizational performance.

The third type of evaluation strategy are *qualitative-anthropological models*. These models focus on the importance of observation, the need to maintain the phenomenological characteristics and quality of the context, and value of human subjective interpretation in the evaluation process. The so-called naturalistic or “fourth-generation” evaluation, various approaches of qualitative schools, critical theory approach, and Glaser and Strauss' grounded theory approach are most commonly used within the framework of this evaluation strategy.

Finally, the fourth type of assessment strategy are *client-oriented models*. As already the term itself shows, central place in this model is occupied by participants of evaluation, especially clients and users of the service or program, and within this strategy client-centred approach is the most commonly used approach.

Use of these strategies can bring us closer to the answer of the question – “What kind of social work intervention approaches, methods, and techniques work with the certain kind of clients?” However, questions like – “How well does the

intervention work?” and “How much does the given intervention costs?” – are being asked more and more increasingly.

Because resources are limited, the benefits and costs of social-work interventions must be not only assessed but also must be compared with the benefits and costs of alternatives. Unfortunately, evaluations of social-work practice – like evaluations in any field – rarely can measure all the relevant variables. In particular, benefits are extremely difficult to measure. Costs are simpler to measure, but even so, few evaluations measure costs. In the end, all evaluations are inevitably incomplete and so must make subjective judgments about unmeasured factors. The key to evaluation, then, is not certainty nor objectivity but rather explicitness (Schreiner et al., 2004). As a result, there are far more studies of program outputs and outcomes than of program costs (Tolley & Rowland, 1995), for at least two reasons. First, techniques for cost accounting are more familiar to economists, businesspeople, and government bureaucrats than to social workers. Second, it is usually easier to quantify costs – at least costs of service provision – than to quantify benefits. Because cost measurements are quantitative, they seem objective and thus tend to carry disproportionate argumentative weight when compared to benefits, which usually cannot be quantified. On the one hand, ignoring costs can be a stratagem to perpetuate inefficient services that benefit favoured groups (either clients or service providers). On the other hand, measuring costs can also be mistakenly used to discontinue high-cost (but high-quality) services in favour of low-cost (but low-quality) services (Schreiner et al., 2004).

In order to avoid erroneous judgments and mentioned shortcomings, the *7-aspect model* has been introduced in evaluating the effectiveness of social work in relation to the cost-benefit assessment. This model reduces the possibility of forgetting to measure costs or forgetting to measure not only the costs of service provision but also the costs to clients of service use. It highlights that benefits may be worth more to the poor than to the non-poor. It also makes explicit the idea that – all else constant – a larger program enhances social well-being more than a smaller program, that multiple services are better than a single service, and that longer programs are better than shorter ones.

As one might expect, this model consists of seven aspects or elements:

1. *Cost of service provision.* These costs are mainly comprised of social worker salary, as well as any other costs that are related to the provision of a service, for example, transport costs, office supplies, etc.
2. *Cost to clients.* Although not often acknowledged, clients bear costs when they use services. These are mostly transaction costs, that is, the opportunity cost of the time spent using the service, attending meetings, filling out paperwork, and so forth. There may also be monetary costs, such as account-maintenance fees or bus fares to travel to required classes. Even evaluations that do measure the costs of service provision tend to ignore the costs to clients of participation, making interventions appear less costly than they are (Barnett, 2000). Furthermore, for some clients, costs of participation are so high that they preclude participation. Because non-participants do not participate, they do not incur these “barrier” costs, so these costs are rarely considered in evaluations, but of course, their existence affects the benefits that the program can confer. Finally, from the perspective of evaluation, what matters are social costs, that is, costs of provision plus costs to clients. There is little social value in simply shifting costs from providers to clients.

3. *Benefits to clients.* Benefits to clients are the third aspect of the seven-aspect framework. These benefits are the change in well-being with the intervention versus without it. Changes in wellbeing, of course, are nearly impossible to measure; a given change in outcomes may affect the well-being of different clients differently, and there are no simple, standard units by which to measure well-being. In practice, most evaluations use changes in outcomes or outputs as proxy measures of changes in well-being and most often qualitative change assessment is being converted to quantitative indicators based on subjective judgments. It should be noted that, as in most of the evaluation models, the 7-aspect model does not take into account the potential benefits of a social worker.
4. *Weight of net benefits to clients.* The difference between costs to clients and benefits to clients is net benefits to clients. Social-science professionals such as economists and social workers – if not society as a whole – weigh a given net benefit differently, depending on who gets it (Deaton, 1997). For example, greater weights are assigned to a given increase in well-being for a child, a woman, or a racial/ ethnic minority than for an adult, a male or physically and mentally healthy individual.
5. *Number of clients is the fifth aspect of this model.* This matters because of budget constraints; usually, the number of people who could benefit from a given social-work intervention far exceeds the resources earmarked for that intervention. Thus, holding all else constant, interventions that reach more clients are preferred to those that reach fewer clients.
6. *Number of services.* 7-aspect evaluation model defines that multiple-service interventions are preferred to single service interventions. This is so not only because more is preferred to less but also because there are often economies of scope in service provision. For example, once the client is in the office to take a class on financial education, the marginal cost of also providing social support through peer meetings with other savers is low. Although most social-work interventions involve a bundle of related services, evaluations typically focus on just one service in isolation.
7. *Time of provision.* The time frame of provision matters because social work cares about helping people both now and in the future. Programs that do a lot of good but that burn up quickly help people now at the expense of people not helped in the future. Furthermore, some of the most important benefits (especially of Individual Development Accounts, IDAs) are subtle, indirect, and long-term and so may become evident only after several years of participation or even only after participation has ended. Time also matters because programs vary in duration. For example, early childhood intervention programs may be provided on half-day, full-day, part-year, or full-year bases. To make fair comparisons across programs or program sites, evaluations must account for these time variations, for example by estimating cost per participant-hour or per participant-month (Schreiner et al., 2004).

Certainly, just described *7-aspects evaluation model* is not perfect, but it seems to take into account the various aspects of social worker's practice better than others do, and it helps to make clear and sensible trade-offs in deciding, which of the seven aspects

can be measured in a given situation and which aspects can be assessed quantitatively, which qualitatively. In real life nothing is constant, thus the increase in the number of clients served (or increase in number of services or service time increase) means the increases in service cost. Low-cost program set within the budget can operate in the long term, but it can also lead to lower benefits per client and higher client costs. The choice between the different programs and different intervention designs are bound to be associated with such a compromise decisions. Evaluation can help to make and accept such decisions based on a comprehensive assessment of the facts.

Evaluation of social work supervision

Situations where social work professional's work with clients has not gone well most commonly cause deep confusion in mind of a reflective practitioner – *is it my responsibility, do I have to take a guilt, could it have been avoided?* The dilemma is very direct. Furthermore, according to studies, social workers are reluctant to recognize their merit for the good work and often takes the blame for failure. However, as described above, results of the work of social worker, both good and bad, is impossible to predict, and social workers are clearly aware of this uncertainty. Supervision as consulting support for social workers on issues related to work and professional activities can help to reduce such uncertainties.

The value and importance of supervision are taken for granted in social work and has variously been described as the cornerstone, as the safety net of good practice (Social Work Policy Institute, 2011). Nevertheless, the practice of supervision has been subjected to significant criticism. For example, it is contended that in response to a restrictive fiscal environment, a managerialist approach to supervision has emerged, which is preoccupied with efficiency, accountability and worker performance (Noble & Irwin, 2009). It is also argued that supervision must refocus on the emotional impact of the work and use a reflective learning model to foster professional development (Gibbs, 2001). Both supervision supporters and critics consider the need for revitalization of supervision. However, is the belief in supervision justified? What results can we expect from it? Whether and how supervisor's work efficiency is assessed and evaluated?

Comparing the available data on the evaluation of the effectiveness of supervision with the data available on evaluation of social work practice efficiency it must be admitted that empirical evidence of evaluation of supervisor's performance is scant. If the ultimate goal of social work supervision is to improve the social worker client's condition, then direct client's benefits from the intervention of supervised social worker is one of the main criteria for the evaluation of effective supervision. However, to prove that supervision have a direct impact on the client is extremely difficult because there are many other factors that could have an impact on changes in the client's condition (Kilminster & Jolly, 2000).

Despite the many models of supervision, few, if any, are based on empirical research. This is ironic since many supervisors actively seek to promote evidence-based practice (Carpenter et al., 2015). To date, there can be found four reviews of studies on the results of supervision of social workers and similar professionals. Spence et al. (2001) examined research on clinical psychology, occupational therapy and speech pathology as well as social work. They concluded that it was not clear whether supervision had any effect on workers' practice or it had led to improved outcomes for consumers. There was some evidence to suggest that directive, as opposed

to un-structured, approaches were preferred by less experienced practitioners and also by the more experienced when faced with new challenges. All supervisees preferred a supportive style of supervision. The authors also observed that supervisors reported little or no training in how to supervise. Nevertheless, those from the different professional disciplines were engaging in very similar supervision practices. Although supervisors claimed to adapt their supervision styles to the needs of individual supervisees, the majority did not appear to do so (Spence et al., 2001).

Bogo and McKnight (2006) reviewed 13 articles, all from the US, based on 11 separate studies; three of these were in child welfare, all published before 2000. Like Spence et al. (2001), they found little evidence concerning the outcomes of supervision, but concluded that there was emerging evidence about the aspects of supervision valued by supervisees – specifically availability, positive relationships, mutual communication, support and delegating responsibility (Bogo & McKnight, 2006).

Most recently, Mor Barak et al. (2009) conducted a meta-analysis of data from 27 studies, that provided information about the relationships between three dimensions of supervision and various outcomes for social workers, child welfare and mental health workers. The dimensions of supervision were:

- task assistance, defined as the supervisor’s ability to provide tangible, work-related guidance;
- social and emotional support in responding to emotional needs, including stress;
- interpersonal interaction, which reflects the supervisee’s perceptions of the quality of the relationship and the extent to which this has helped them be more effective in their work.

All these three dimensions of supervision were all positively and significantly associated with beneficial outcomes for workers, including job satisfaction, workers’ commitment to the organization, wellbeing and perceived effectiveness. Conversely, they were negatively associated statistically with detrimental outcomes for workers such as stress, burnout and intention to leave (Mor Barak et al., 2009).

Evidence for Mor Barak’s meta-analysis was drawn from correlational and cross-sectional studies, where large number of variables were investigated for their statistical associations with outcomes for workers. This evidence is not causal: it does not prove that the observed effects at the time the data were collected are attributable to the provision of supervision. However, this study provides good circumstantial evidence on supervision’s impact on social workers as well as provides useful definitions of the main dimensions of the supervision and framework for the analysis of results (Carpenter et al., 2013).

Forth review is based on papers published in peer-reviewed journals only between 2000 and 2012. Fifty papers were identified, reporting of 48 separate studies. The literature is predominately US-based, 19 with another seven studies reporting data from Australia, Canada and Israel. Just three studies were based in the UK. The importance of supervision to outcomes for workers was the focus of most of the studies reviewed. The conceptual model by Mor Barak et al. identified both beneficial and detrimental outcomes associated with the dimensions of supervision and provided a framework for the forth review (Carpenter et al., 2015). The findings were as follows:

1. *Job satisfaction.* The quality of supervision is consistently associated with positive worker outcomes, with a significant number of papers addressing the impact of supervision on job satisfaction. Job satisfaction coheres around the following three themes:
 - a. *Structure, focus and frequency of supervision.* Where reported, greater frequency of supervision is associated with higher levels of satisfaction, with one study reporting a minimum of two hours per week as a prerequisite to job satisfaction.
 - b. *Task assistance.* It involves a supervisor's tangible, work-related advice and instruction to a supervisee and focuses on training, skills and solutions for practice. It is primarily related to job satisfaction in this review, underlining its importance to positive outcomes for workers, supporting them to perform effectively. Task assistance was of particular importance to workers in terms of role clarity, supporting them with perceived role competence and with task knowledge and problem-solving.
 - c. *Support to access resources for service users.* Studies show that task assistance is connected to accessing resources for service users and its impact on job satisfaction. The helpfulness of 'administrators' (i.e., budget-holders) in resolving difficulties between patient access to services and financial priorities contributed significantly to greater job satisfaction. The authors conclude that 'administrative' supervision, whereby supervisors help their staff access resources to meet patient need and thus resolve their own ethical conflicts or uneasiness about not being able to offer the services needed, is more important than 'emotional' supervision focused on professional development and mentoring in this cost-conscious context.
2. *Social and emotional well-being.* Supporting the social and emotional needs of workers entails listening to them attentively as they discuss job difficulties and making empathic comments. It may also include relating to the emotional needs of workers when they feel overwhelmed, stressed or confused about their work. Studies demonstrate that social and emotional support is valued highly for social workers, because that way they are feeling themselves being valued as a unique members of a specific discipline, being supported in clinical decision-making by supportive comments of supervisors that 'back you up'.
3. *Self-efficacy and empowerment.* According to the results of studies, where supervisors are socially and emotionally supportive to supervisees, self-efficacy is related to job satisfaction and intention to stay. Studies also show that supervisors' empowering behaviours significantly affected workers' sense of empowerment, specifically increasing their ability to make decisions.
4. *Organisational commitment and intention to stay.* Organisational commitment to the development of supervisory practice, the willingness of supervisors to help employees carry out their jobs effectively and provide aid in stressful situations, and whether supervisees feel emotionally supported by supervisors – are all associated statistically with workers'

decision to stay employed. The degree to which employees feel supported by their supervisor affects their emotional satisfaction with the job and contributes to the appraisal of how the organisation values them and cares about them. Studies show that supportive supervision was associated with both job satisfaction and perceived organisational support.

5. *Stress, burnout and role conflict.* Supervisory support has clear associations with worker stress, burnout and role conflict. Lack of emotional support, inadequate supervision and feeling out of one's comfort zone are associated with higher burnout. Job-relevant communication, another facet of task assistance, is also reported as important to positive worker outcomes. 'Supportive relationship communication', defined as informal and supportive interaction between supervisors and social workers, appeared to reduce worker stress and indirectly reduced burnout and intention to leave. 'Job-relevant communication', defined as performance feedback, information about rules, policies, work schedules and assignments, task-specific instructions and goals, was found to be more effective if a supervisor and a worker interact with each other in a supportive way, directly reducing intention to leave. Professional development through supervised practice was also associated with workers' attachment to the organisation. Where frontline workers were readily able to communicate their opinions and feelings to management, this reduced the role of stress on burnout.

Many of the studies also consider outcomes of supervision that are beneficial to organisations. Supervision focused on task assistance for the worker may improve performance, while supervision, which provides social and emotional support, may reduce staff turnover.

However, the impact of supervision on outcomes for service users and carers has rarely been investigated. In part, this may reflect the difficulties of unravelling the distinct impact of supervision on service user outcomes, but may also reflect a preoccupation with outcomes for workers and organisations. This means that the literature presents only a partial picture of the outcomes that count, with no attention paid to the potential differences between professionals and users. It also means that any changes to the supervisory process are not informed by the perspectives of service users and carers and miss a crucial aspect of understanding how supervision affects practice (Carpenter et al., 2015).

Conclusion

The best social work practice includes not only the skills to identify and obtain the relevant and necessary knowledge, but also an understanding of what to do with it in different practice situations (Gordon, et al., 2009). Consequently, social work practice and supervision efficiency evaluation is not an end in itself but rather a means of effective service improvement for clients. The aim is to promote quality of social work practice or supervision evaluation, no matter how valuable it may be. The aim is to promote the quality social work and supervision, where the evaluation is an integral part of the practice. Such evaluation once more puts social work with a client in the centre of practice and enables radical criticism of this practice and evidence-based improvement.

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Efektivitātes novērtēšana sociālā darba praksē un supervīzijā: Empīriskā pieeja

Kopsavilkums

Sociālā darba prakses efektivitātes un supervīzijas efektivitātes novērtēšana vistiešākā veidā demonstrē sociālā darba pētniecības un prakses integratīvo saikni. Novērtēšana dod iespēju sistemātiski un sistēmiski analizēt kā sociālā darba intervences, tā arī supervīzijas procesus, metodes un tehnikas, un ļauj noteikt sociālā darbinieka darbības rezultātā radītos potenciālos ieguvumus klientiem vai klientu sistēmām. Tomēr pastāv kardinālas atšķirības empīrisku pierādījumu ziņā starp sociālā darba prakses efektivitātes novērtējumiem un sociālā darba supervīzijas efektivitātes novērtējumiem. Sociālā darba prakses efektivitātes novērtēšana ir attīstījusies vairāk nekā gadsimtu ilgā laika posmā. Ir izstrādātas dažādas novērtēšanas teorijas, praksē tiek pielietoti dažādi novērtēšanas modeļi, un sociālā darba prakses novērtētājam atliek vien izvēlēties atbilstošāko no novērtēšanas stratēģijām un likt to lietā. Rakstā piedāvāts empīrisks pārskats par sociālā darba prakses efektivitātes novērtēšanas mūsdienu pieejām, atsevišķiem modeļiem un argumentēta to saistība ar sociālā darba klientu ieguvumiem. Savukārt sociālā darba supervīzijas efektivitātes novērtēšanas jomā ar pētījumu datiem sniegts situācijas raksturojums un secināts, ka pastāv empīriski pierādījumi supervīzijas pozitīvai ietekmei uz sociālā darba profesionāļiem un institūcijām, bet tikpat kā nemaz nav empīrisku liecību par supervīzijas ietekmi uz sociālo darbinieku darba rezultātiem un uz sociālā darba klientu ieguvumiem.

Atslēgas vārdi: sociālā darba pētījums, sociālā darba efektivitāte, sociālā darba supervīzijas efektivitāte, novērtēšana.



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