

# Paul Willis podcast series: transcript

## Part 3: What does good social work practice look like?

---

Access the podcast audio and other resources related to the LOASCA project here: <https://www.scie.org.uk/older-lgbtq-people-and-social-care/loasca/>

### **Professor Paul Willis**

Hello and welcome to the third and final part of our podcast series on collaborative social care research of older people. I'm Paul Willis from Cardiff University. In episode one and two, we looked at why and how we should work collaboratively and the benefits this brings. This time we're talking about practice. We'll be looking at what the SWOP and LOASCA studies revealed about what makes good, inclusive practice in social work. Like before we'll be hearing from our co-researchers and expert advice panel members.

### **Graham**

I would know if I felt very comfortable with the support being given to me, where I felt my voice was valued in that process.

### **Reshma**

I feel that social workers need to remember their own values, their own ethics.

### **Nargis**

The social worker needs to understand they are actually there to work with people and not for people.

### **Julian**

I think they need to walk the walk and not just talk the talk about equality, diversity and inclusivity.

### **Cecila**

They should be aware that most people do go around with heteronormative assumptions.

### **Izzy**

I spoke to a number of social workers who said 'I don't think I've ever assessed anyone who's gay or trans because I would know'.

### **Professor Paul Willis**

One of the things all our contributors picked up on, is how important it is that a social worker approaches an older person with an open mind and a keen willingness to listen and learn. As Dr Denise Tanner, principal investigator on the SWOP study explains.

### **Dr Denise Tanner**

So the heart of it for me is about getting to know the older person and what matters to them. But also understanding the context around that. So for example, how ageism might have impacted on that older person and how they see the world.

### **Nargis**

I think it's about building a relationship with them first, building a rapport with them and give them a voice, being nonjudgmental. Also making sure that if they are not able to speak the language, then not actually use the relatives of the carers to be an interpreter and try and actually talk to them directly. So direct communication.

### **Reshma**

I think it's really important that when working with social workers, they listen to what I'm not saying and enabling me to be able to voice my own opinions. And that involves very, very sensitive advocacy skills in order to enable me to do that. Let me know what's available, let me make my own choices.

### **Graham**

We don't always know what might be good for us. And in fact there were other examples where people needing support were persuaded to take an action which they were not particularly want to do, but having taken it, were delighted with the outcome.

### **Professor Paul Willis**

We found that social workers often have to overcome negative stereotypes about social work when they start working with an older person and their family. Stereotypes such as, they're there to break up families, take children away or put people in care homes. And it may be the first time in their life an older person has ever engaged with social services.

### **Dr Denise Tanner**

We saw from some of the detailed work that social workers were doing that it could take a long time to build up somebody's trust. Older people themselves don't understand what social workers do. They're fearful and they're anxious and they may well turn a social worker away even, when one does offer help because they're fearful of what that might mean, they might be forced to do something they don't want to do. So it takes a long time for a social worker to work through that and build up trust with somebody. But that's not often, you know, allowed for really in the way that systems operate. And it's expected that a social worker will go in there, do a quick assessment, set up support and then move on. And that older person is either left being managed by the system without a named worker or being passed on to somebody else.

## **Reshma**

We did have a couple of scenarios within our research project where people didn't want to accept the help of social workers and the social worker really worked hard to build the relationship and visit quite a few times, before suggesting any changes.

## **Nargis**

Just giving the example of my mother. She's a very, very quiet person. If you ask anything, she's always just with a smile to say everything is okay. But it's the social worker who should ask some open questions and get more information out of them, engage with that person and have a meaningful intervention.

## **Professor Paul Willis**

When it came to findings from the LOASCA study, problems related to getting to know an older person and building up trust often came with additional layers of complexity. And there were major gaps, as Dr Jason Schwab, principal investigator, describes.

## **Dr Jason Schaub**

One of the first things that was most shocking to me was how few LGBT people that local authorities were aware that they were working with. So for example, in a local authority that had many thousands of service users, they had less than ten that they were aware of. And this means that the services were struggling to sort of identify how they could create services around them. And that was an important and surprising finding.

## **Izzy**

I had a social worker saying to me, 'well I just don't ask that question'. Which is shocking to me. This social worker also said, 'well I wasn't sure what the gender was and I didn't want to offend them'. That wasn't unusual, sadly. Because they said, 'it's just so rude to ask someone a question like that'. But then they were saying, 'well I can't actually remember any training, specific training on gender and sexuality ever'. So that has to lie with managers. That has to lie with senior managers who are going to set up compulsory training.

## **Julian**

On a number of occasions I was told I treat everybody the same. That doesn't mean that they're getting the same level of support or insight from your assessment. So I think, and I would have thought, in training there would have been a lecture on equality, equity and equal practice and I'm sure there probably is. So that needs to be revisited by managers perhaps, in terms of their social worker continuing education really.

## **Cecilia**

They should go out of their way to have contact with, I mean I'm particularly thinking about trans people. I mean there are trans groups dotted about, especially in cities. So there's no reason why they can't make themselves aware, particularly of the practical issues that trans people encountering just living in everyday normal life

really. Particularly if they're thinking about how those people are going to adjust, should they need social work, care support or whatever in later life.

### **Julian**

Some people just get hooked up on their sexual orientation and they treat this as an embarrassing area and something that we shouldn't know about and shouldn't ask people about. It's not about asking about sex, it's about asking about your broader network and where you sit in society and what your needs are in relation to that. So I think that's quite a basic level of education that isn't being addressed with some of these social workers.

### **Dr Jason Schaub**

I think it's also important at that point to note there's been a few media stories and scandals about the difficult experience for some older LGBT people in some care homes and in other sort of care and support areas. And that heightens older LGBTQ+ people's anxieties about engaging in those services.

### **Izzy**

I mean I, despite what the world might think, I do not walk around this world saying, 'I'm gay. I'm gay. I'm gay.' I hardly tell anyone. And if I am going to tell someone, I assess where could this information go? Why is it relevant? Because it's a really difficult thing to do. Because I'm old enough certainly, to remember pre Clause 28 and Clause 28 and the marches and all of that. And they were horrible times.

### **Professor Paul Willis**

As we just heard from Izzy, some older LGBTQ+ people may be reluctant to come out to helping professionals, based on previous experiences of discrimination and hostility. That can make it more difficult to come out to new people, including social care staff.

### **Dr Jason Schaub**

So there's a sort of double bind that happens in that circumstance. And when that's combined with the service user's reluctance about coming out, that creates a circumstance where neither the professional nor the service user is willing to talk about being LGBT, which means that the service doesn't really understand that they have LGBT people that they're working with.

### **Professor Paul Willis**

While highlighting these blind spots in practice, it's important we celebrate all the good social work going on in our communities. As Denise was keen to point out, great social workers are skilled practitioners that bridge the gaps left by other services.

### **Dr Denise Tanner**

What we found is that social workers bring a very unique combination of knowledge, particularly knowledge around the law, knowledge of aging, knowledge of the life course. So particularly skills around communicating with older people, including people who may have conditions like dementia. So the level of skill in building those

relationships, building trust and then the values that they bring and the commitment to putting older people at the centre of everything.

### **Professor Paul Willis**

The SWOP and LOASCA studies have left all of our teams with an appetite for further research, so to wrap up, I asked Denise and Jason what we should focus on next.

### **Denise**

So one of the ways that we were able to recruit for this study, was that we emphasised that this was about looking at positive practice and what could be learned from that. But we know of course that all practice is not positive. So I think another area would be looking where social work is restricted and what happens before people even get through the social work door, because we've only looked at situations where older people have been allocated to a social worker.

### **Dr Jason Schaub**

So looking ahead to the next steps for this study, for me, is wanting to try to improve social care workers' practice. Taking the findings from this and exploring ways to train, support and guide social workers so that they feel more confident in asking questions around sexual orientation and gender identity and that they understand what the needs and wishes and desires for this group of people is, so that they can create more inclusive services.

### **Professor Paul Willis**

And what better way to create more inclusive services than to work collaboratively with people who may need help and support in later life. We hope you've enjoyed this podcast series on collaborative social care research of diverse groups of older people.

A big thank you to everyone on our research teams and especially our co-researchers and expert advisors who really brought the SWOP and the LOASCA studies to life. A special thanks to our podcast contributors. From the SWOP team, Nergis, Reshma and Graham and from the LOASCA team, Cecilia, Izzy and Julian. If you'd like to find out more about these research projects and their accompanying resources, please follow the links provided.