Relational Social Work at the case level[1]

Working with coping networks to cope micro–social problems

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Abstract

The general task of social workers is to accompany people who experience life problems to more prosperous conditions of well-being. In order to do this, social workers can enter into the everyday lives of people in need in a reflexive manner to support their willingness to feel better through the actions of these people themselves, despite difficulties and vulnerabilities.
Relational Social Work provides significant operational guidance to social workers who, to understand how to support people, are confronted with important questions regarding conceptual, methodological and ethical issues. Despite social workers interact with severely vulnerable people, the basic assumption of Relational Social Work is to recognize and strengthen the motivation of these same people who are moving, or who intending to move, towards a desired improvement. This article presents phases of problem solving according to Relational Social Work through the analysis of a foster care planned in a relational way.

Keywords

Relational Social Work – Case Work – Coping Network – Relational Guide – Foster Care.

Introduction

The general task of social workers is to accompany people who experience life problems to more prosperous conditions of well-being (IFSW, 2014). This professional area is one of the most complex in social services organizations because of the complexity of the problems with which the practitioners are confronted.

Social workers' focus is on social problems, which Folgheraiter defined as «the difficulties of human living as people concerned represent these to themselves» (2007, p. 266).

People's life problems can have external causes, which can result from structural factors of injustice, such as poverty, conflicts, housing problems, social marginalization, and environmental disasters (Dominelli, 2010; 2012); they can also result from internal

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factors related to personality traits, physical or mental disorders. In many situations, internal and external factors coexist.

Very briefly, a life situation becomes the object of a social worker's consideration when people are unable to discharge their lives' tasks, meaning tasks related to both meeting basic needs and tasks arising from family and social relationships.

Folgheraiter states that:

> I have defined (in)capacity for action to be the subject matter of social work. By this I mean that a problem of interest to social workers is not a pathology, or a static state of affairs, but a dynamic difficulty: an impediment against the achievement of goals. [...] a problem arises when someone decides that an expected end has not been accomplished, with all the related implications. (2004, pp. 44-45)

Usually, a difficult situation affects more than one person precisely because the people involved are unable to connect their actions and their resources effectively to manage the tasks of life or because they are not at all related to each other, and they act in an uncoordinated manner in attempting to manage the situation.

> A social problem is a generalized difficulty («generalized» in the sense that it is felt by several people) due to a task potentially ascribable to several persons but which they are unable or unwilling to cope with adequately. (Folgheraiter, 2004, p. 62)

The shifting nature of social problems leads us to consider that the same conditions might be otherwise difficult or objectively severe in different relational situations.

To manage people's life problems, social workers can enter into the everyday lives of people in need in a reflexive manner to support their willingness to feel better through the actions of these people themselves, despite difficulties and vulnerabilities.

This article discusses social workers' functions in their case work, that is, in their work aimed at improving the situation of a specific person or family in light of the Relational Social Work (RSW) paradigm and its operational guidelines. Phases of problem solving according to the RSW are presented through the analysis of a foster care planned in a relational way.

The Relational Social Work paradigm at the case work level

The relational paradigm (Donati, 2010; Folgheraiter, 2004; 2007) provides significant operational guidance to social workers who, to understand how to support people, are confronted with important questions regarding conceptual, methodological and ethical issues (Banks, 2006), leading to reflection on the definition itself of the well-being that is desired by people seeking help from a social worker and the interventions and directions that must be undertaken to achieve it.

The ethical orientation of social workers and the ability to organize concrete help through standard provisions place practitioners in a position to read the difficult life situations of service users, to identify the problems to be addressed and to imagine what might be useful in each specific situation. This position of social workers certainly does not conflict with the opportunity to hear the same service users discuss what they themselves think of their situations and, above all, does not contradict the possibility of facilitating their participation (Beresford & Carr, 2012), first in the definition of the purpose of helping relations and later in the definition phase of completing what is needed. Despite social workers interact with severely vulnerable people, the basic assumption of Relational Social Work (RSW) is to recognize and strengthen the motivation of these same people who are moving, or who intending to move, towards a desired improvement. Working in a participatory way means adopting an approach in which the social workers, users and other actors involved are motivated to work together to identify the problems faced and how best to address them (Folgheraiter, 2004).

RSW (Folgheraiter, 2004; 2007; 2012) urges social workers to consider the people involved in a problematic situation as active protagonists in the definition of their welfare, together with the social worker. This idea is consistent with conventional social work principles and values, such as self-determination, participation, partnership and subsidiarity (Folgheraiter & Raineri, 2012).

In particular, RSW is consistent with other approaches, such as critical social work (Adams, Dominelli & Payne, 2005, 2009; Taylor & White, 2000), which suggests to social workers the need to be critical and reflective in all of their interactions with other human beings, constructive social work (Parton & O'Byrne, 2000; Parton, 2003), which outlines an approach to practice that focuses on dialogue, listening to and talking with people in a storytelling context to construct solutions to problems, and finally, developmental social case work (Van Breda, 2015), which operates from the assumption that individual problems are almost always embedded within the social environment and emphasizes the importance of an assessment and planning process that shifts from the aim of solving problems to the aim to helping individuals to grow and develop, to thrive in the face of adversity and to recognize and mobilize their strengths and capabilities.

A particular link is verifiable with the anti-oppressive approach (Dominelli, 2002; Dalrymple & Burke, 2007), which calls for the participation of service users in helping processes, which is understood not only as activities in which people are only listened to or consulted but also as an activity in which people are also able to influence and achieve changes in circumstances that affect them over which they previously had limited or no control or influence and in which social workers are responsible for helping people in a sustainable manner (Willow, 2002; Healy, 2005; Raineri & Calcaterra, 2015).

Folgheraiter (2004; 2007; 2015) defined RSW as a practice paradigm in which practitioners identify and resolve problems by facilitating coping networks (conceived as sets of relationships between people interested with a common aim) to enhance their resilience

and capacity for action at both individual and collective levels. Participative and inclusive ways of working are engaged to mobilize and develop supportive and problem-solving networks of relationships, which can include not only family members, friends, neighbours and professionals such as teachers but also health workers and social workers. RSW focuses on relationships as the basis for change. The central idea is that change emerges from reciprocal aid. The practitioner helps the network of relationships to develop reflexivity and to improve itself in enhancing welfare, and in turn, the network helps practitioners to better understand how they can facilitate the network's action, even when the matter is to oppose structural inequalities.

The opening words of the work of a relational social worker is to expand his or her view of the problem to the motivations of people to recover from the situation they are experiencing and their fatigue and to the attempts that they are undertaking to make changes in the direction of well-being. The social worker has the duty to perform agency assessments (Milner & O'Byrne, 2002) of individuals in relation to each other. The social workers must link themselves to people's motivation and facilitate joint reflections on how to find solutions, in which a possible solution indicates an improvement in a difficult situation (Folgheraiter, 2007), which is why, according to RSW, the helping relationship falls outside of the positivist paradigm that the expert is the holder of the solutions to people's problems and suggests that they ascribe to a non-deterministic logic. Social workers have to be aware of indeterminacy of solutions in meeting people, and to be confident that some solution will emerge through the shared thinking of the people concerned. (Raineri, 2004).

It should also be considered that people have the right to decide, understand and play active roles in the changes that affect them (Doolan, 2007; Morris, 2012) and that if they live in vulnerable situations, it does not deprive them of this right. The majority of people are motivated to participate in what closely concerns them if they see its utility and if they are helped to develop trust in others (Adams, 2008; Warren, 2007).

The social worker becomes the facilitator or the relational guide (Folgheraiter, 2004; 2007) of people relating to each other because they share an interest in changing the situation.

This function of the social worker as a relational guide is consistent with constructive social work (Parton & O'Byrne, 2000), which shows that solutions can be developed in the field through interaction between theoretical and methodological knowledge of the expert and the reflections of people experiencing the problem, as well as reasoning in the situation of what is occurring to define the necessary actions.

Thus, according to RSW, well-being results not so much from the delivery of proper and efficient welfare benefits by the professional or from the definition of a care package through the coordination of integrated interventions but rather from the reflections and joint actions of individuals linked to each other. In this manner, well-being takes on a re-

lational dimension (Donati, 2010), and we can consider social work to be a co-constructed process, an enterprise carried forward collectively (Folgheraiter & Raineri, 2012).

Social work as relational guidance of a coping network

The professional function of relational social workers is expressed in facilitating the relationships between active and motivated people present in complex life events, recognizing strengths, and promoting open dialogue (Seikkula & Arnkil, 2006).

The guidance of the social worker allows people who are interested in the achievement of a common aim to focus on this mutual interest and therefore, to decide to work together, forming a coping network (Folgheraiter, 2004; 2015). Any person acting in the network to solve a problem will achieve more if his/her action is directed by someone who assumes this task specifically.

What does it actually mean to guide a coping network?

To identify and to catalyse the coping network

First, the social worker asks who the people are who feel that a certain situation is worrying, and consequently, who are interested in doing something to change it or are already doing something to change the situation. The situation is «read» not only in order to identify the problem to be addressed but also to observe the action in place and the people involved in the same problem because they are personally affected or because they have a duty to intervene. The social worker identifies the people who work and produce positive power in the coping process, although they still do not relate to each other, and joins these social relations (Folgheraiter, 2004).

To inform, to raise awareness, to receive, to organize

Relational guidance should facilitate conditions so that motivated people can come together in one place, organize network sessions, and then help members to see a positive shared task and to think together intentionally about the tasks to be faced and the possible routes of overcoming the identified problem. When a face to face meeting is not possible, a vicarious link between members of the network is needed, in which the facilitator acts as a communication bridge so that people feel that they are acting within a network with a common task.

To orient, to bear the aim in mind, to safeguard the common good

A good relational guide pays attention to the joint action of the network members being directed towards the good, without defining in advance the good towards which they should strive. The facilitator becomes the guarantor that the action of the network is aimed at an ethical outcome. The relational guidance is not translated, then, in an attempt of the practitioner to direct the action of others in a default way. «An expert who must mobilize a social reality for helping purposes cannot act contrary to the wishes of this reality or stimulate anything that is rejected» (Folgheraiter, 2004, p. 182). Rather, an expert must facilitate the conditions so that people are motivated to achieve a task, share the same goals and act in networks intentionally connecting their actions along a path of aid aimed to achieve well-being as defined by the members of the network, whatever it might be.

To provide feedback, to express and overcome doubts, to relaunch, to meditate

Reformulating what occurs in the network is a facilitator's task. Reformulation is a basic technique of the help interview. In Relational Social Work, the reformulation passes from the relationship between the helper and helped to the facilitation of coping networks (Folgheraiter, 2004). The facilitator observes and reformulates what occurs in the network, promoting the process of identifying the problem and purpose as interests of the entire network; additionally, the facilitator pays attention to the feelings that emerge and reformulates them to render them visible to the network; they place importance on certain aspects of reasoning so that they can be recirculated and subjected again to common reflection; and they capture the ideas that emerge in the network to continue reformulating and reflecting on action strategies or new problems to face (Raineri, 2004).

The coping network

A coping network is represented in Fig. 1 (Folgheraiter, 2015), which highlights its structural components.
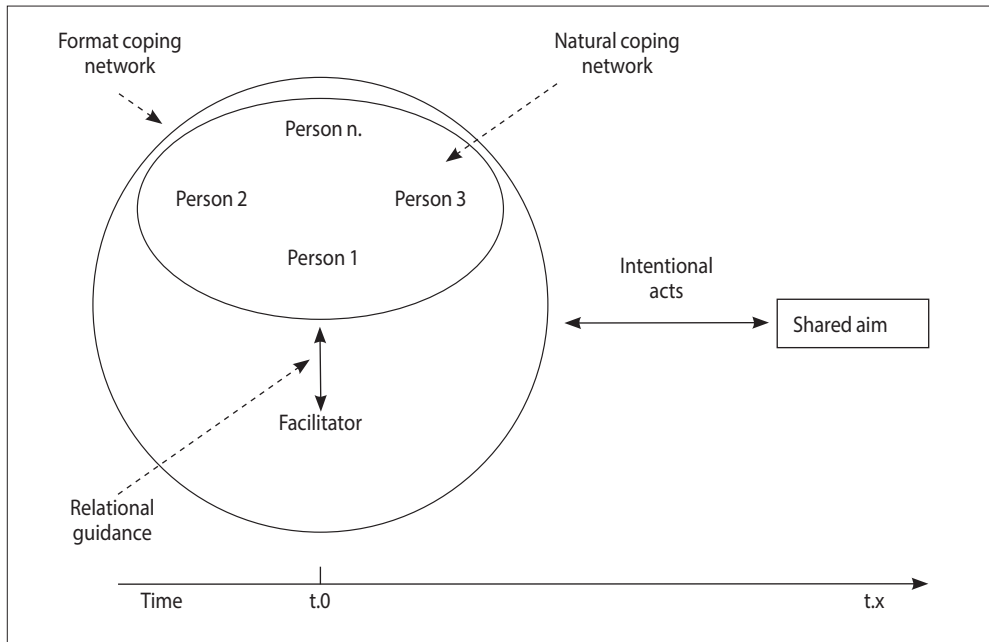
Fig. 1. The graphical representation of a coping network.

Coping networks are structurally defined as follows.

– *Shared aim*. What allows people to recognize each other's concerns to act in a network is sharing an aim towards a common good. The aim is, in fact, the element around which the coping network forms. It is important that the social worker proposes an aim to potential network members without attempting to convince them at all costs to share it. What the facilitator can do is build the conditions for this participation to be realized. To this end, the relational paradigm suggests the importance of formulating the aim in «open» and broad terms (Folgheraiter, 2015, p. 225). Leaving the aim open allows it to be reasoned and redefined by the parties concerned and effectively shared. The more that the aim is shared by the members of the network, the more that the members will be motivated to act relationally to attain it (Raineri, 2004, p. 39).

– *Time*. Network interventions consider relationships in the procedural sense. The graphic moves on a time line that recalls the dynamism of coping networks. At time T.0, the relationship between the facilitator and the network starts, and the coping network takes shape (formal coping networks); however, the potential still exists of a path of ignorance towards the goal. It moves in the direction of a time not defined a priori (t.x) that is open to the possibilities of solutions that emerge from the joint reflection of the network members. The relational approach, in

fact, does not focus on the past, seeking the causes of a given situation of unease and believing itself able to repair it; rather, RSW focuses on the «here and now» and on the future actions of motivated people to cope.

– *Reticularity among people interested in the problem*. Person 1 might be one who brings a particular problem to the attention of an expert, either his/her own or one expressed by others (family member, a friend, etc.). Importantly, person 1 should not automatically be considered a member of the network because he/she makes a referral of the problem; rather, he/she will be part of the network only if he or she expresses some interest and motivation to consider the problem. The relationship between person 1, motivated towards coping, and the facilitator is the first dual coping relationship characterized by reciprocal elements (Folgheraiter, 2007, p. 51). Other people can also be added (person 2, 3, … n), including potentially interested and pre-existing members of a network, which, of course, is moving towards a shared aim (natural coping networks). The facilitator does not consider that a single person has a problem but rather a network has a problem; the focus will be to observe and to concentration the action towards a goal of the well-being of those persons who are aware of the problem and who of course are attempting to do something in response.

– *Reticular actions around a shared aim*. Members of the network are effectively networked with each other when they act intentionally and are aware that their work is related to that of others. The connection of the network subjects promotes reflexivity, first as an opportunity to reflect on their actions and learn from each other through exchanges with others. The identification of a shared aim towards a common good allows the subjects in the network to target actions intentionally towards achieving the same goal in connection with the actions of others (intentional action).

– *Relational guidance*. The social worker who guides the network has a double position: she/he is located both inside the network and outside the network because she/he is, at the same time, an active member of the network and a guide. The guide function does not exclude the possibility for social workers to participate in networks as member who reflect with others what can be accomplished, by expressing their opinions and by providing resources. However, it is important that the relational guidance be prevalent and that the social worker contribute to the reasoning about what to do without exercising his/her decision-making power and ideas for change rather than facilitating joint reasoning among all of the members of the network. When this relational guidance occurs, it is likely that the network will decide to implement different strategies from those that the social worker imagined at the beginning of the process.

An example: defining a foster care project for Lisa and John

A social worker from a local authority is in charge of the family situation of Ms. Maria, who has two children: Lisa (9 years old) and John (7 years old). Maria is a former alcoholic who suffers from depression. Maria turns to the social services of the local authority to ask for help in the care of her children in the afternoon. Maria works in the morning as a school janitor and spends many hours in the afternoon sleeping due to the effects of some medications prescribed by a psychiatrist. Lisa must also care for her younger brother during the afternoon hours. At home with them lives Alex, Maria's adult son who works all day and contributes with his salary to the household expenses. The children's father lives in residential care for people with addiction problems. There are no other relatives who care for the children.

In this part of the article, there is an example of a relational social case work (the case is a real one) and an analyse of the work undertaken by the social worker who has been working in the situation according to the phases of relational problem-solving (Folgheraiter, 2004)

Defining the problem and the potential coping network

The social worker is concerned that the two children might not be sufficiently protected in their growth. After a home visit, it is clear that Maria has several difficulties in responding appropriately to the children's educational, emotional and behavioural development. John still wears a diaper at night, and he does not want to sleep in his own bed, and Lisa has difficulties at school. Therefore, the social worker speculates on how to improve Lisa and John's life condition and to determine who else is interested in the welfare of the two children so that they can reason together about how to improve their life situation.

The social worker believes that the people interested in this situation could include the following:

 – *The children's mother because she turned to social services asking for help in the management of the children in the afternoon out of her fear that the children could be removed from the home if the situation worsened*
 – *Alex, Maria's adult son, because he helps with the household expenses and with his younger siblings*
 – *A psychologist from the Child Protection Service) who knows Maria and has the duty to address the situation.*
 – *The same social worker who is thinking about Maria's family situation and expresses an institutional and professional concern*

Therefore, she intends to contact each of these people individually to determine whether they are actually interested in the welfare of the two children.

The problems that are perceived in this description, although brief, seem to occur at many different dimensions, and they will probably require technical operations and the help of individual provisions.

The organization of aid, according to an approach centred on experts' skills to diagnose problems and identify solutions, would lead the social worker to investigate the difficulties to understand how and how much the practitioner of a public welfare service should intervene to solve them.

First, she should consider whether and how the children are properly protected in their home, which is why the social worker might decide to meet Maria individually to ask about her life story and determine whether and how well she is aware of the difficulties of her children, whether she cares adequately for their school performance, and whether she is able to care for them economically and give them the attention they need for their growth. Finally, Maria's psychiatrist might be contacted for an update on the health situation and to bring together different information to evaluate the severity of the situation.

Once the situation has been diagnosed, the social worker should decide what action the local authority could take to substitute for parenting and to alleviate disability hardships. For example, the social worker could provide help for Lisa with her homework in the afternoon, as well as to provide a home care intervention for John in the afternoon; the social worker could start monitoring Maria's treatment plan at the Mental Health Service or even consider placement of the children in another, more suitable family to care for them.

All these actions may be legitimate options; however, Maria might not agree with the assessment of her situation made by the practitioners and/or with the path of aid that is decided for her. For example, she might not agree with the idea of opening their home to a practitioner to help the children in the afternoon; she might prefer to receive income support so that she can find a babysitter for the children while she is sleeping. Alternatively, Maria may not want to share her psychiatric treatment plan with the social worker, or she might not be interested in her daughter's school performance, instead preferring that Lisa participates in a sports activity to strengthen her health.

In summary, there could be many different readings of the same situation.

If a social worker wanted to indicate the needed changes to a family and, through such actions, reach them, he/she should be able to connect specifically to what the people involved believe is best for them.

RSW calls for curbing the action of diagnosing problems and the definition of actions to be delivered in favour of families in need, even if these approaches are chosen by listening to the people involved; rather, RSW invites social workers to take a step back and take a position of confident uncertainty in social action (Folgheraiter, 2015).

According to RSW, the helping process is relationally oriented from the start, so the relational social worker identifies a change in purpose, determines who is doing something

to contrast the problems and connects with them also to find help in planning the path of aid, which entails identifying whether there exist natural coping networks.

An important operational indication is leaving the aim «open»: the more that this aim is expressed and viewed broadly, the more that it will be possible for the practitioner to identify people who are interested in exerting their own energies to achieve this goal.

In this situation, the social worker was asked, who was involved in the situation for various reasons and who showed concern, both those who explicitly expressed their concerns and claimed to be willing to help and those who did something to help, which suggested that they had concerns although not declared directly to the social worker.

Catalysing the coping network around a shared aim

The social worker invites the mother, the adult brother, and the psychologist to meet together to discuss the situation. All of these people accept the invitation and meet at the social worker's office. The practitioners explain to Maria and Alex their concerns that affect the woman's ability to care for the children and to provide for their protection at times when they are alone in the afternoon. The mother shares the concern of the practitioners because the children are alone in the afternoon; she says she considers herself a good mother, but she does not always have sufficient strength, and she says she is aware that she is leaving her children on their own. Alex says he is concerned about the health of the mother and that his siblings will not miss anything. After an intensive discussion, the social worker summarizes the situation that everyone is worried about Lisa and John's living situation, although in different manners; therefore, the social worker proposes meeting at another time to collaboratively determine what to do.

The social worker, after learning about Lisa and John's situation, considered who might be interested and invites those involved to meet and sit around the same table to share their concerns and to collaboratively discuss the aims that they want to achieve.

Methodologically, this is the catalysing phase of the coping network, when motivated individuals can meet and realize that they are all involved in reaching a common aim because they are all concerned about the same situation, albeit in different manner.
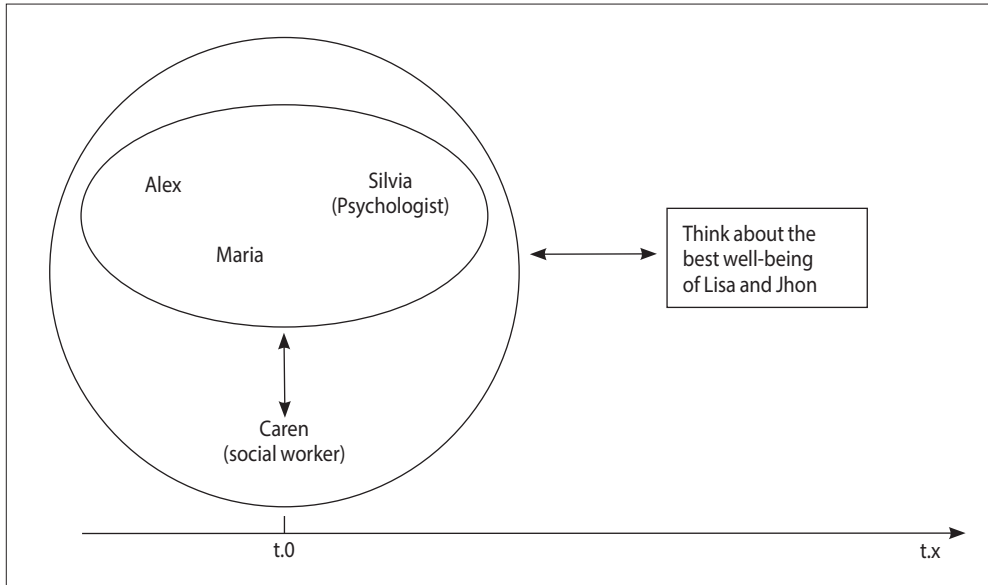
Fig. 2 T.0 network graph.

At T.0, the network takes concrete form through the action of the practitioner, who after having established a personal relationship with the people concerned, invites them to come together physically in the same place to talk openly about the situation, to share in the purpose and define it more precisely and to determine their availability to work together to understand the best way to cope these problems.

The practitioner guides the members of the network to recognize and decide to work together.

In this situation, the social worker attempted to identify an open aim, which could catalyse the coping network in understanding what to do to ensure greater well-being for the two children.

In Lisa and John's situation, it is important to note that the mother and older brother were present from the start of the work. Both expressed their concern for the children. However, the people who gathered at the meeting had different points of view regarding the seriousness of the situation, and they most likely imagined different interventions to improve the situation.

Maria asks for aid for the children only for the afternoon and does not ask for help for herself. Alex is aware of the material needs of his siblings, what they eat, and their materials for school. The practitioners, in addition to the concerns related to the children's primary care, are also concerned about their mental and physical growth.

At T.0, the presence of the mother and the older brother of the children indicates that they participate together with the practitioners in the decision-making process about

the goals and how to attain them. They are not only considered service users but also active contributors in defining the path of aid and the coping strategies.

This partnership between service users and experts can be tricky for practitioners if they are not very confident in the skills of the people and for people if they believe they should be the practitioners who solve their problems or, conversely, if they fear practitioners invading their homes and defining what they must do.

Therefore, it is important that the relational guidance of the social worker, from the outset, must help people who come together to recognize each other's motivations to do something towards a common good and to recognize the specific skills of each participant.

The social worker must bear in mind that he/she will participate in the network and as a facilitator of the network itself, as well as being an active contributing member to the discussion of aim as a person concerned with the situation and as a member who brings professional expertise to the definition of the coping strategies for the problem.

Accompanying the coping network in brainstorming process

The social worker starts the second meeting and reminds everyone of the aim: to collaboratively understand how to improve Lisa and John's living situation. The psychologist explains that, from her point of view, it might be useful for the children to be placed in another family to ensure their protection and to alleviate for the mother the fatigue of their care. Maria states that she is against the removal of her children and instead asks for help in the afternoon and also declares her willingness to receive help for herself to avoid having the children removed. By the reasoning of the network, the opportunity is discussed of finding a family that can accommodate Lisa and John in the afternoon until after dinner. This solution reassures the practitioners regarding the protection of children and the mother with their returning home in the evening. Maria asks that the family be not too far away and that it have other children. She explains that an older woman in their neighbourhood helped them some afternoons, but the children were bored, and they no longer wanted to go. They could instead play with other children. Maria also agrees to meet with a youth worker to determine how to address certain issues related to the growth of children. However, she asks for the youth worker to visit her at home in the late afternoon so that she can sleep after work. The social worker agrees to talk to a family who knows and lives close to Maria. The psychologist will endeavour to arrange a meeting with a youth worker at the mother's home to define the work plan. The older brother is committed to picking up the children after dinner in the foster family home when the foster care project begins.
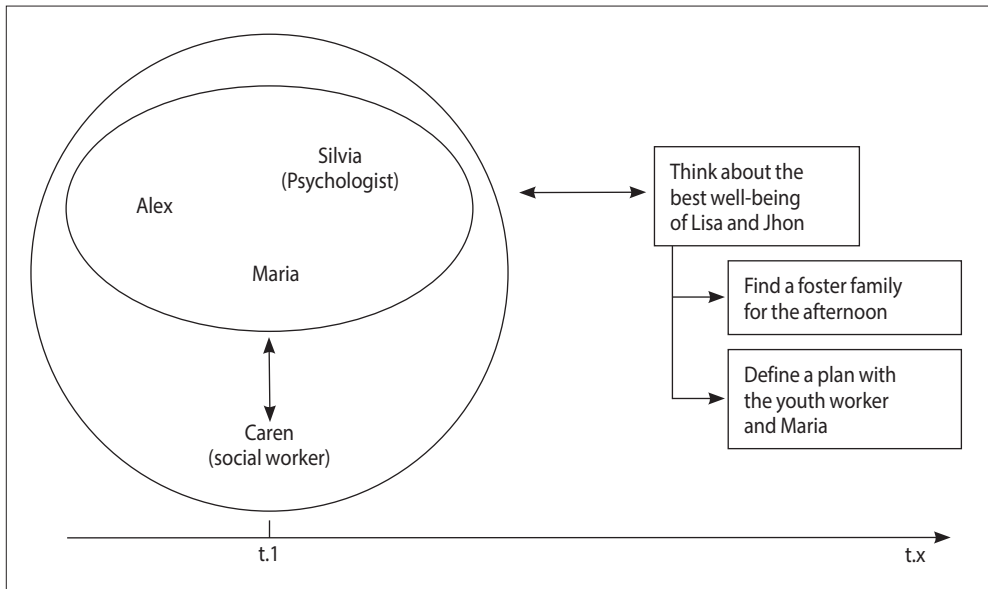
Fig. 3 T.1 network graph.

RSW tells us that the solutions to life problems cannot be pre-established and that the coping strategies work best when they emerge from motivated people who reflect together. Respecting the principle of self-determination, which regulates the work of social workers with service users, asks that people be given a voice in decision-making processes about their lives, even if they are experiencing difficulty, which is why the social worker hopes that people who are interested in the change of situation discuss the difficulties and determine together what each is willing to do.

At this stage, the questions that guide the coping networks are: What problems are we facing? How can we achieve the goals that we share?

The relational guide helps network members to identify their different points of view with regard to the problem that must be addressed by a common explicit aim.

Additionally, this relational guide allows the social worker to make it clear that the problem belongs to all of the people who have come together to discuss it and not only to the practitioners; hence, the solutions to this problem might emerge from the dialogue of the network members, which will be much more creative because the members of the network will bring different ideas based on their different skills.

The practitioners will contribute to the decision-making process with expert/technical skills, while the service users will bring their experiential knowledge from their own lives, what they have already tried to do, and what worked and what did not work, in addition to contributing to the definition of what they consider good for themselves and for their families.

The more that the solutions are discussed together as well as to their addressees, the more that they will be considered to be good and therefore, practiced by all.

The task of the relational guide is to ensure that all of the network members can freely express their ideas and that these views are carefully considered and evaluated without censure.

It remains the duty of social workers to define the limits to ensure the protection of the children. It is important that the social worker clearly state this limit, explain the reasons to the people involved and ask them to consider the actions that make it possible not to exceed this limit to avoid possible referral to a Court, which would have the task of imposing decisions to safeguard the children.

In this situation, the two children are not present because they are young. However, the RSW approach recognizes that even the children have the right to express their points of view and that they have important things to say that can guide the decisions of adults, although it remains to the adults the decide in the best interests of the children.

When the children are invited, it is important to pay attention that it is not always easy for them to participate in decision-making processes. For this reason, it can be important to guarantee the support of an independent advocate for the children (Morgan, 2008; Boylan & Dalrymple, 2009) with the task of helping them to present their voices to the adults responsible for their protection and well-being.

Accompanying the coping network in the implementation of strategies

The social worker determines the availability of the foster family to welcome the children during the day, while the psychologist agrees with the mother regarding the intervention of the youth worker. The social worker organizes another meeting and also invites the youth worker and the foster family. At that time, the two families know each other and make arrangements regarding Lisa and John's care. Maria describes how her children are, explains what they prefer to eat and tells the diseases they have had in recent years. The foster family attends and explains its motivations in wanting to help another family. The youth worker suggests that, one afternoon per week, the children stay at home when she is also there to work well together with the mother. The mother says that she would like help to arrange the children's bedrooms so that each can have his or her own space even if it would be small. The youth worker proposes performing this work in the afternoon when they are all together. Everyone accepts this proposal.

A time is then coordinated when the mother can present the children to the foster family and the start time of foster care. Finally, they decide to meet together once per month to monitor the plan.
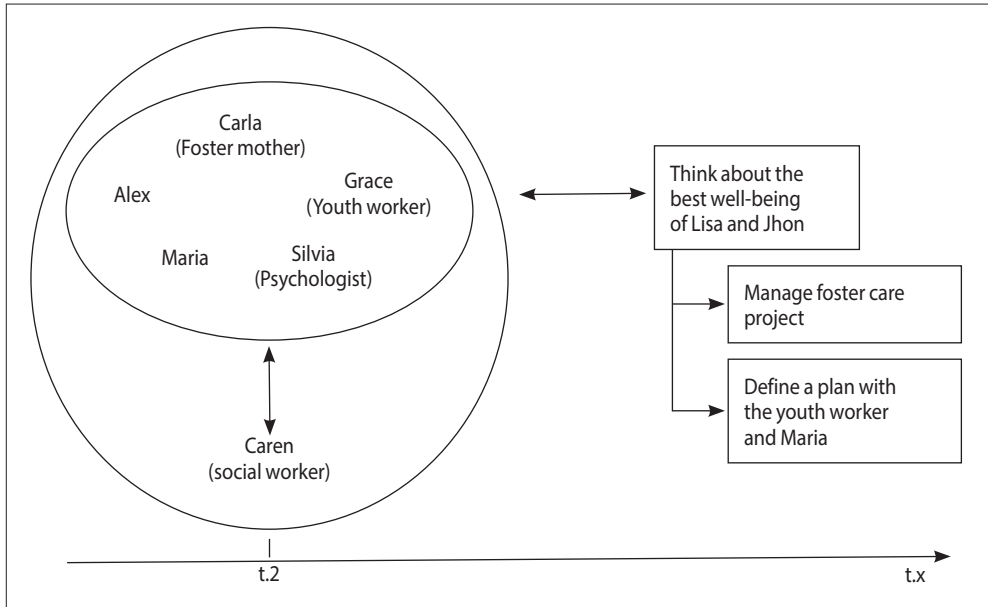
Fig. 4 T.2 network graph.

At time T.2, the coping network is expanding because the foster family and youth worker are also participating in the reflections.

Whenever new people are invited to a network session, the relational social worker's responsibility is to remind the members of the shared aim and the tasks undertaken to achieve that aim.

In this situation, social workers advocate for the demands of the network regarding the foster family and the youth worker, who have agreed to cooperate for their own specific reasons in the aid, consistent with the needs expressed by coping network.

The foster family and youth worker were then invited to participate in the discussions of the network regarding how they can achieve the shared aim of improving Lisa and John's life condition.

It is very important that the facilitator solicit the members of coping networks to respect each other's competence in the implementation of the decisions undertaken.

This example shows the importance of the presence of the children's mother at the time of their presentation to the foster family. Lisa and John's mother knows her children, and no one other than her can tell the foster family what they are like. This experiential knowledge cannot be replaced by the technical knowledge of the practitioners, who do not know the children in their daily lives.

In the absence of this competence brought by the mother, the relational social worker cannot adequately describe the children to the foster family; they would have

only been able to describe their concerns about the situation and to define the required support to the foster family.

This intersection of expert and experiential knowledge allows the parties to help each other understand how best to implement the decisions made for the protection of the children.

Reciprocity in help is even more necessary in defining aid interventions to be undertaken to address the children. The youth worker who attended the meeting was able to discuss with Maria the work that they would do together, and they built the proposed work together, engaging the interests of the children's mother.

Participation in a meeting saves time and makes it possible not only to check with the people involved regarding the feasibility of the strategies but also to consider new strategies that the social worker alone could not have imagined. Without the participation of all of the parties to the meeting, such a detailed plan could not have been developed; the social workers would have proceeded using a trial and error method, and they would have considered the different things to do and then offer options to those concerned until they had their consent and therefore the willingness to cooperate.

Accompanying the network in monitoring the plan and coping with further problems

At a monitoring meeting, a few months after the project has started, the foster mother, Carla, indicates her effort in helping John to do his homework. Carla also explains her concern that on weekends, when John stays at home with his mother, he never does his homework for Monday. On more than one occurrence, on Mondays, John has received a demerit at school for this reason.

Maria says that it is difficult to convince John to do homework over the weekend, so much so that, most of the time, he does not do it, and Maria does not insist because she prefers to pass the time peacefully with her son.

Carla does not agree that only she should make this effort and is upset that John receives demerits for this reason. The social worker asks Carla to state how she helps John with homework, what strategies work and what does not work with the child. Carla says that for John, it is very important not to have any distractions around, such as having the television on or other people running around the house. She therefore found a room in the house where the child could perform the tasks in peace and agreed to devote up to one hour per day to do homework with him; afterwards, then he can possibly play. Carla also says that she attempted to sit next to John but that doing so stirred him too much, so she decided to use a stragety of checking his homework but not always being present in the room. The social worker asks Maria to try to do the same thing with John for at least one hour during the weekend. The mother says that she will try without a guarantee of success. In addition, the psychologist suggests asking John's

teachers to meet with Carla and Maria to explain to them the difficulties she has experienced with John and to verify the possibility of not always giving him demerits. The social worker assumes the task of calling the teachers and making an appointment. The network session ends with agreement to meet in the following month to determine how this plan has worked.

Once a foster care project has started, the purpose of the meetings of the network is to discuss the plan together and the issues that emerge and to understand the strategies that can facilitate a positive trend.

According to RSW, in addition to a project starting in a shared manner, its realization must also proceed in a shared manner. It is the responsibility of the relational social worker to accompany the work of the network and to guarantee time for discussion of any issues that arise from the implementation of the tasks determined in the network. At these meetings, the practitioners have the responsibility to facilitate communication, to secure a space for the speech of all participants, to help those present to address any conflicts by recognizing the legitimacy of different points of view, to facilitate the dialogue so that the participants at the conclusion of meeting achieved shared agreements and to remember any commitments from previous meetings.

In the example, we see that the two families have different views about the issue of John's homework. It is legitimate that they have different opinions because they live in different situations; however, they are involved in the same path of aid because they share the same aim It is therefore necessary that they can speak openly about the difficulties they perceive in working together and they can consider how to address these difficulties.

It is precisely in the participation in the network that it is possible to identify strategies to cope with the consequent problems at the start of foster care without the two families coming into conflict.

Monitoring a path of aid by organizing regular network meetings might seem more expensive in terms of time and effort for the practitioners, but the network meetings respond to the operating principle that every problem, as large or small as it might be, does not relate exclusively to the individuals who are directly involved for various reasons or those who realize it or have statutory responsibility for the project; rather, it concerns everyone who has built the path of aid. Therefore, the solutions to the problems of implementation of approved strategies can only be identified if each member of the network brings his/her contribution according to his/her point of view and expertise. In addition, it should be said that the problems that exist in the activation of a concrete path of aid with a family can be very different because it is impossible to know exactly the development of a plan that involves people's lives, often because the help is based on the action of the same people who have different experiences and different capabilities.

It would therefore be impossible for a social worker to predict from the beginning all of the difficulties that might occur and to address them. Instead, it is possible and ethically correct to discuss difficulties as they arise.

In the present situation, it is clear that the two women place different weight on the same care task, helping John with his homework; consequently, they have different thoughts about what they should do. However, both are involved in addressing this aspect of John's life, and the more that each of them is aware of the mutual intention of doing good, the more that they will be able to discuss how to devise and share strategies for action that move in the same direction, although with different variations and commitment to action considering their experience and their role in the project , as well as their personal resources. Unlike the social worker, who would listen, on the one hand, to the complaints of the foster mother about Maria's disability and on the other hand, the complaints of John's mother about the foster mother requesting that she devote the little time she has over the weekend to spend with her son fighting with him to force him to do his homework, if the situation were not discussed together, the problem could exasperate both members of the same network and place them in a situation of potential conflict. Thinking together about the problem allows them to refocus the aims of both women, women who are invested in sharing manageable strategies in helping John to stay healthy and to avoid receiving demerits.

Accompanying the network in facilitating itself

The coping network has been at work for several months, and it seems to be working. The mother has prepared the children's bedrooms with the help of the youth worker. The two children are doing well with the foster family. The foster mother and Maria have agreed to help John with his homework over the weekend. Together with the youth worker, the two women spoke with both of John's teachers, and one of the teachers started to participate in the network meetings to determine how to best work with John at school considering his family situation. Lisa started to attend volleyball one afternoon per week. Lisa has difficulty relating to her teammates, and her coach has participated in the last network meeting to determine how to help her interact with the other teammates. When there are problems, the two mothers turn to the youth worker, who, on two occasions, has called for a network meeting to determine together how to proceed with the plan.
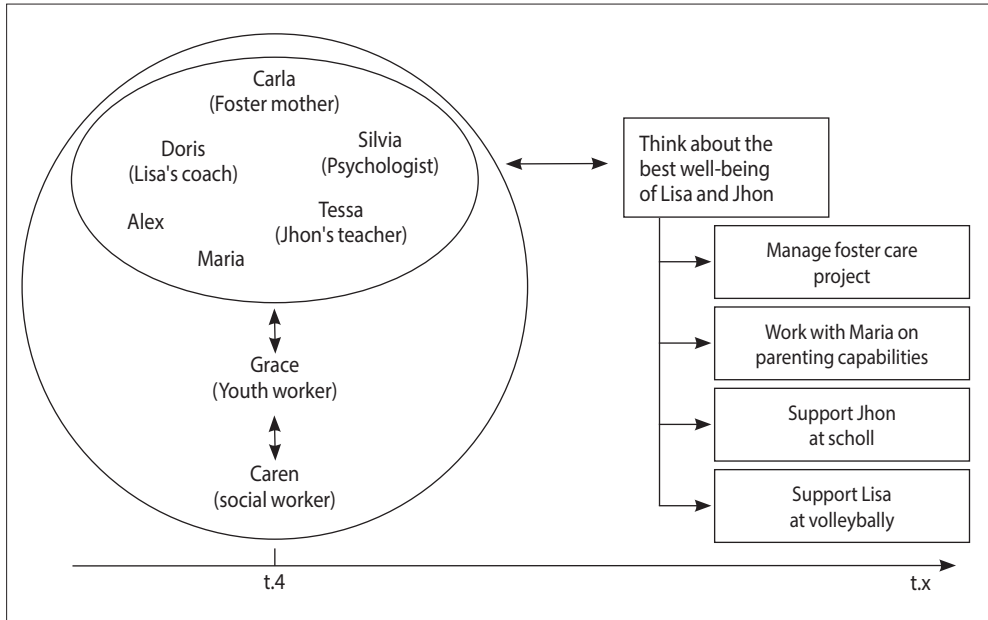
Fig. 5 T.4 network graph.

In the described situation, we see that to implement the shared plan, the coping network has expanded the participation to two new members who are available to join the discussion with the others on how to improve the children's life conditions. In addition, it shows that the youth worker has been identified by members of the network as a significant point of reference to discuss the problems that arise.

According to RSW, a helping relation ends not only when people solve their problems and achieve the desired change but also when the professional's relational guidance is no longer necessary to the coping process, and the network can continue to work towards and achieve the shared aim by itself.

A pillar of RSW is recognizing that the coping network is the actor in the helping process, which is why the social worker focuses less on solving people's problems and more on supporting relationships and facilitating the network in coping with its problems. Once the coping network works, the facilitator must reflect with and help the network to understand when it can continue to work towards and achieve its aims without the social workers' guidance.

Once the coping network is functioning, it means that social worker shares and when possible, gradually cedes the relational guidance of the network to one or more members who have demonstrated skills in facilitating relationships among members; social workers can remain in the network, offering their support to solve technical problems or providing standard provisions when necessary. This phase will work much better

the more that the social worker manages it in a relational manner, which means that the social worker should share the possibility of the passage of the functions of guidance with the network and should reason with the network members regarding who would be most capable of accepting this task.

Conclusions

RSW provides operational guidance to social workers in their work with people and families in need. The participation of service users together with social workers characterizes every stage of the problem-solving process that is conducted in a relational manner. In fact, the strategies to cope with people's life problems, the solutions to which are, by definition, indefinable a priori, are all the more identifiable, and as much as possible, the solutions emerge from the joint reflection of the people who are interested in improving a specific condition of difficulty. RSW conceives of the functions of the social worker as a relational guide. Relational guidance is understood as «the reciprocal influence between a network in motion and an expert who seeks to intercept and deflect that motion» (Folgheraiter, 2004, p. 175). Generally speaking, the relational approach maintains that every interaction between a professional and a social network, including the individuals within it, should be authentically and radically reciprocal.

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