

## **LOOKING AFTER ONESELF AND TAKING CARE OF OTHERS IN THE SOCIAL PROFESSIONS. Towards the construction of a culture of the care in the professionals.**

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### **Abstract:**

Professionals are the most valuable resource of the social service system and they must take care of themselves to be able to care about others. Every day they have to deal with self-improvement stories, but also with pain and frustration, which make them question themselves.

Professionals have to become aware of the effects that working with situations of psychosocial risk produce in order to be attentive and proactive rather than settle themselves in the discomfort zone. If they do so, this discomfort goes inside the work teams and, at the end, to the persons they have to care about.

This article is the result arisen from an investigation made during the practice of supervisions with 10 professional teams and a total of 60 professionals of the psychosocial field. We will contribute to generate ideas, strategies and set aside resources to found a care culture in global sense: towards the people we attend, towards the colleagues and to oneself.

**Keywords:** Professional cares, supervision, professionals, tiredness.

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Professionals of the social field talk about the tiredness they feel, they speculate about the discomfort they feel. They talk a lot about it but the barrier of the comment is not crossed without a true consciousness. Some say "If we have do to it" and others say "I will do what I can", but in practice it is considered that taking care of oneself is related to maintaining good health and physical exercise.

This article runs away from the physiological focusing and is a first contribution to a new perspective; to a new look fruit of the supervising experience that tries to generate specific strategies to favour professionals' mental health, at the same time that it maximizes their competence with the attended people. It also tackles the problems and proposals made from a psychosocial perspective, based mainly on the authors orientated from the psychoanalysis such as Bleichmar (2009), Dejours (2006), Leal (2003-2006) and Molinier (2013-2015). The treatment of the problems is set aside from an orientation of the fatigue by compassion or by the vicarious trauma expressed by Rothschild (2006) in his work *Ayuda para el profesional que ayuda*, as well as by the psychophysiological positions considered by Figley Adams, Boscarino (2008) and Figley (2014).

Debates about stress and its effects are old in the social professions and also how commitment and responsibility can lead to changes in their psychological, physical and spiritual well-being. In the social work field, maybe the most classic and mentioned author is Herbert Freudenberger (1974), who has become a cardinal guide to approach tiredness in the social field. Precisely in Puig (2005) these phenomena and their professional expression are analysed.

The construction of a culture of the care is based on the idea that the symptoms of professional exhaustion, proposed by Freudenberger (1974), are a pressing problem and that help is possible when professionals expand their conscience and actively practise some of the indicated psychosocial proposals. For that different processes and practical proposals are created and delimited, which are chiefly based on the mentioned authors.

Equally necessary is to make problematic and perhaps raise awareness about the effects they suffer professionals in the psychosocial field to work with people and situations of violence, vulnerability and poverty and, at the same time attend the job sufferings and, in general the relations between subjectivity and job “the sufferings of the job have been unattended and, in general, the relations between subjectivity and work” (Dejours, 2006, p.35).

It is also necessary to recognize this risk in the people care jobs and how it influences the professional behaviour.

The developed approach, even though it collects health and physical well-being as cares, it is not limited to this. We believe that to attend people well it is not enough to talk about physical care, it is necessary to get into some psychosocial considerations that contribute to such cares. Perhaps the reading of this article is a good way to start the reflection of how to look after oneself in order to be able to take care of other people.

The goal I propose is to share the first results and reflections of an inquiry carried out during the practice of supervisions with psychosocial professionals. I also wish this contribution favours the construction of a more collective look and so to generate ideas.

The research has been developed during the years 2013 and 2014 in dialogue with more than 10 teams of professionals. Altogether about 60 professionals who have clearly shown their need to take awareness of the necessities and the effects that working with situations of social crisis produces and thus to generate, whenever possible, new practices and instruments to be attentive towards others and towards oneself. Doing so, we avoid and prevent to settle in

the personal discomfort, in the discomfort in the meetings with the person we attend to or inside the teams.

The attention focus researched is the professional one but we will also discuss about how we take care of the attended people, since the proposals that will be developed are based on three axes: the right to take care of others, take care of oneself and that others take care of you. Professionals are the most valuable resource of the educational, health and social services system, and face every day overcoming stories, but also pain and frustration ones which are hard to bear and that make them confront with themselves.

My participation in processes of supervision and care of professionals, in the sense of concern and attention to generate well-being in work teams, begins at the end of the 1980s. It was a moment of full construction of the of the social services system, so far non-existent in the Spanish State. We had to reflect on how to act, since the given situation was dual. On the one hand, the social services had to be built up and the first structures of the welfare state of the country had to be generated and on the other hand professionals had to design and schedule this task. But the features of the moment:-scarce economic and personnel resources, lack of institutional strategy, youth of the system and professionals - allowed something important for the conceptualization of what concerns us, like reviewing and discussing the dynamics of teams and the options of intervention that these used.

The coexistence of these two vectors, the construction of a social services system and the reflective revision on how to act, was very revealing. The technical-political collaboration was pursued with the aim to offer a good attention to citizens (that they had not had before) at the same time that young professionals had to be cared of in order they could have a long professional life.

Another axis that bases the current work is that it is multidisciplinary and conciliatory. It reports the involvement in processes of supervision since the end of the eighties and the trajectory of research made on this subject. It is placed in the intersection of different theoretical frameworks: social work, systemic theory, psychoanalytic theory, the ethics of the care that Gilligan (1985) proposes, and the transforming capacities described by Sharmer (2007) and Kofman (2007), who integrate arts, practices and sciences that help to evolve individual and collective competences from diverse axes: one from “the being” (more intern) and the other “the acting” (more external).

All this is realised through the systematization of the practice of the supervision sessions. This one is understood as the theoretical reconstruction of a practical, specific and realised experience (Gagneten, 1987, Aguayo, 1992, Ayllón, 1995).

Indeed, through the practical systematization of the sessions and the contents of the supervisions, the experience as supervisor and of the supervised has been analyzed. Different proposals developed in this article have been also been worked out.

This line of integration of knowledge enables the study on the quality of care, which are the forms of social intervention that professionals use to care for the people they attend to, the supervision of professionals and discovering new practices and transforming knowledges such as: collective intelligence, learning communities, art of hosting, collaborative dialogues, full attention.

Finally, we expound our reflections as a result of this systematization of supervisions with professionals of the psychosocial field. Their contributions have led the guidelines of the formulated proposals, which do not have any other target than amplifying the awareness on the professional needs and especially of the effects that it produces to work with situations of social crisis and so to generate, whenever possible, new practices and instruments to be attentive towards others and towards oneself with the aim to avoid and prevent to settle in the personal discomfort, in the discomfort in the meetings with the other or inside the teams.

Thereby we try to favour the construction of a more collective look and thus to generate ideas, strategies and assign resources to found a culture of the care on global sense: towards the people taken care of, towards the colleagues and towards oneself.

## **1 – INTERDEPENDENCE**

People are interdependent, we need each other to survive, to grow up when we are young, to feel that we are part of a group when we are adults and to care of each other when we are old.

We are continuously exchanging and interacting. It is precisely in this exchange where the most brilliant and the most miserable effects in the relationships arise. We are all part of this network of dependencies since we all help. To help is a phenomenon of everyday life. All of us act as a person who helps, cares of and is cared of..

The ethics of care, born in the United States by the hand of Carol Gilligan recognizes the vulnerability as a common condition of humanity. In her work she underlines that we are vulnerable, extraordinarily fragile and dependent human beings throughout the different stages of life. It is necessary to accept

that we are vulnerable, that we need us mutually (Gilligan, 1985). These statements are opposed to the neo-liberal value of total autonomy and the independence of the need of the other. Gilligan tells us that we are interdependent.

With the prevailing neoliberal approaches and the public policies decreasing, the guarantees of the welfare state are endangered. On the other hand the use of methods of management of the industrial world, based on the challenges of economic competition, are more present than ever in the public sectors through social services, healthcare and university management. They are all regulated by the rules of the *good governance*. This is essential for the administration of resources but it does not take into account the actual work of taking care of people.

This situation makes that we have to resume and highlight the culture of care, in the sense of worrying about attention, treatment of others, which is always full of exchanges. It is not enough to treat well *technically*. People want to "be informed, feel safe, that their problems and concerns are attended" (Molinier, 2015, p.2). This is more necessary than ever. We all need it to feel well, to give others and give each other well - being.

Well-being goes beyond the individual and involves professionals who work together, within the teams of different institutions that work disconnected and with little communication. We need to exchange knowledge and ideas. This has always been important but it now occurs as indispensable because the spaces of exchange of attention, of conscious and shared knowledge, transform our way of living and they are healthy, they heal and do well.

## **2. COLLECTIVE INTELLIGENCE. Neither all depends on me, nor does everything depends on others**

A second premise would be "neither all depends on me, nor does everything depends on others". I have observed that the events and the insufficient development of the welfare state have been swallowing a lot of collective intelligence of the professionals, which is now loose and scattered, and does not find ways to rethink the situations. "The feeling of defeat is so great that has left professionals and intellectuals defeated, not only politically, but speaking of thought." It is as new options might not be thought. A reality has been imposed, not the reality" (Bleichmar, 2009, p.30).

Neither all depends on me, nor does everything depend on others, so it is. This attitude refers to initiatives and new forms that one can exercise on oneself and its environment to make it more balanced. The idea is that not everything

comes given from outside of me. To be able to take good care of others begins with oneself and its immediate environment.

This requires being able to ask oneself, with whom? Where? In which way and how do you want and they want to be cared for? How to establish relations, debates, combined building of ideas? In which times do you want and can you do it? Not everything depends on the other.

### **3. DOUBLE CARE: TOWARDS US AND TO THE ATTENDED PEOPLE.**

Professionally we are focused to work very attentive in a double care: on one hand our experience is supposed and it acts as a confidence resource for the people we attend. We are facilitators of social actions for the benefit of the attended persons. But as Tronto says, care is structured as a continuity with what each one needs and never as a dichotomy between those who are attended and carers. We, professionals need to be able to recognize our vulnerability and interdependence. Perhaps so we will be able to rethink about our role and responsibility " [...] the care is not a moral of good feelings, it is a social project... " (Tronto, 2013, p.44).

To keep attention to ourselves is absolutely necessary in order to be able to help people and not to cause them harm. We must be attentive to what we are feeling and not transfer it (whenever possible), to the attended people (bad mood, frustration). All that in order to have under control the professional expectations which can not be fulfilled because people do not have to act or think as professionals do and finally because these ones can be happy.

To be able to take good care it is important to let go the idea that working for and with others, enabling access to services, satisfies entirely the personal-professional sphere. They are often required to take distance and separate life and work in an artificial way, but this mandate is counterproductive because it denies reality and risk. What we need is to be aware of the moment we are in life and in work, and give value to the own subjectivity. Professionals, always subjective as individuals, suffer, feel and have hopes and dreams. It is from this individual that they empathize and can attend others. There are no formulas in the psychosocial field; the key is the human factor. Awareness of risk and limits is what allows listening and coming closer to the other, and that involves the need to think and generate protective resources.

The proposal, according to Leal (2003), would be to live with more positive and above all more careful positionings. It is about to understand that caring of the people we attend is doing something useful, it's a job, but this one is neither spectacular nor full of resources, but attending is part of everyday life. "To take care is to attend daily life of the human being" (Molinier, 2015.p. 6).

This attentive work mobilizes knowledge and a discreet task, sometimes invisible but valuable. An image that helps to understand the concept that Molinier points out, it would be: "(...) to offer a glass of water before you feel thirsty. The perspective of care is to attend ordinary relations such as the mother or father ones to their son, of a nurse to a patient, of a social worker to a user of the service despite they do not involve a physical task" (2015 op.cit., p.6).

#### **4 - ATTENDING SUBJECTIVITY**

Social transformations are so fast that sometimes it is not possible to assume them; they cannot be perceived in subjective terms, nor making them ours so fast. Everything has to be understood and assumed very quickly. The problems must be overcome and solved very fast; everything is asked for right now. It is a contagion that happens to the people we attend, to the colleagues and to the ensemble of the social relations.

Professional response is often to act, to do, getting partly great satisfaction of the work done, in spite of the fact that we know that to take care of the people is not just acting, giving benefits, doing reports or handling.

To attend the subjectivity we have to recover the waiting time which it does not mean passivity; it is not delaying the answer, but being serene and like that to investigate alternative forms of action and being able to understand what we want to do or guide.

To maintain the waiting time implies that a psychic process of reflection and anticipation in the professional is mobilized. It can be useful to develop the own irritation that occurs when it is about doing nothing, not providing a resource or respecting another professional pace. To attend carefully our subjectivity is not to dance to the rhythm of the urgent, of what is on the news. It requires a lot of professional decision and attention not to yield to the pressure of the alert.

Being informed is not to conform gathering much information about people, since the best information to work situations is not the immediate one but the one that is developing. We know that being aware, having too much or only few information, sometimes, can spread out interventions and decisions. Although we also we know that the multiplication of ideas demands a critical attitude and take enough distance to allow the flow of reflexivity and calm.

The individualistic context, based on the search for satisfaction of oneself, and that often avoids the meeting with the other, made us believe in a welfare state

that replaced the own responsibility because "someone", institutions or professionals, for example, they already looked after and for the citizens. Perhaps in the social imaginary we did not need the other and today we discover that the positions of the caregiver and the one who is cared are not fixed and both have something to offer each other. They are based on the relationship and they are not reducible to an activity nor an attitude of one person but it relies on the common work.

We have to come back to the collective, to believe and feel that my life depends not only on me, but on all those around me. In this sense, the job, the personal development, the people we can act with, are essential. We depend on the collective, on what is common, in order to be able to value our collective potential. An alternative would be to carry out a work based on cooperation, in the shared attention paid to little things.

## **5 – PROVIDING A MOLECULAR LOOK**

Social care needs to apply to a more molecular look, more attentive to the minimum changes that occur in the subjective processes of people. It precises to concentrate, to stop and to support the intervention in the minuscule processes that happen to people, also in the moment of crisis. In terms of care we should pay close attention on relationships, connections, networks, that these people do. The main value is to be able to live a human life and there are many kinds of human life.

On the one hand we ask for more quality in the services and simultaneously the logic of handling and evaluation based on objectively criteria increases. Undoubtedly it is obvious that we try to have a good attention and care at the same time that we optimally handle the resources of citizens. But, on the other hand, the evaluating objectivity is not always compatible with the reality of care work.

The culture of care implies discrete skills, emotional adaptability and being able to consider small, unspeakable things. That means an intertwined conversation in daily life or in the texture of daily life, as Oury (2007) underlines. Sometimes it is difficult to evaluate this work because it often only makes sense in the long term or in unexpected ways. Time management does not always coincide with the more flexible and discontinuous time of care.

## **6 - CONFIDENCE TO THE PEOPLE THAT WE SERVE AND TO OURSELVES**



Trust is a basic factor in people, both for self-esteem and for coexistence. We have to restore confidence in our representatives, but also trust our colleagues, the families and the young people we work with. Mistrust is a toxic that damages us and makes us weak.

To be able to regain confidence in people is related to watchful waiting of the other, held by the professional, is in fact to build a space of threshold (González 2013)<sup>1</sup> usually between two doors but symbolically a space of transit where attended people are not either integrated (inside the system) or excluded (out of service). They are in an intermediate evolutionary space, in a place of difficult assessment because of their invisibility, but that helps them build their confidence, their ability to overcome, and allows them to build their actions or reactions to what is happening to them.

It is a sphere of incalculable value but which can not be measured under the laws of the market economy. In this sense we can ask: which is the price of a smile, a silence, a watchful presence?

However, we also need self-confidence as professionals in order to be able to say no, to say it is enough, to be able to put limits. Because even though cares and the proposed attention cannot be systematically measured, they are not goods; they are social work. This care must be distinguished and not being confused with having a talent or with love or with what sometimes is called vocation.

Care always implies effort, knowledge, to ask oneself how I know and treat the other, how I cooperate and think together with. It is precisely this set of care practices that are full of decisions where there are no fixed but contextual rules that involve reflection and useless time (Molinier, 2013).

The confidence with that the professional is inferred, influences the relationship established with the people attended and also with the colleagues. To consider the start alignment is important when you attend the other, because there are, as we know, different ways of considering the relations and the treatment of the case. The starting model marks how we act subsequently.

To achieve the aim we should make us reliable. We should be clearer and more rigorous, if possible, in the explanations, and narratives about the reality we work with every day. We have to explain ourselves more and better in political environments, with managers, colleagues and collaborators. To expose transparently the frames from which it is proposed to and from we can work and

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<sup>1</sup>Conference pronounced on 12/3/2013 by Itziar González, Architect. On occasion of the delivery of the gold medal of the Social Work professional School..Catalunya Work. Obtained 1.June.2015 <https://youtu.be/xV1IHuRVSAk>.

express our positioning, gives credibility to the systems where we act and makes professionals more reliable.

Giving up the idea called by Bleichmar as "self-censorship", which is not only conditioned by being a public servant or belonging to a specific company but for something less tangible, that has to do with the lack of a shared perspective regarding the possibility of outlining or designing some kind of new proposal. She attributes it to the "excess malaise", in the sense that this discomfort is given by the lack of a project, for submission to the idea that things are so and will always be so, and that the only thing we can do is to adapt ourselves to what it is. It is this malaise that brings resignation to substantive aspects of oneself (Bleichmar, 2009). In this way, as Muraro says (2012), we reduce ourselves to a diminished existence.

Discomfort is understood ought to the deep crisis in which we are and lets each subject without a more transcendent project. It is necessary to recover the thought of things, about what happens and occurs to our environment, beyond the immediacy, and not assuming unsustainable paradigms of care that they move us away from the knowledge of the reality and place us in a ritualized repetition (PIRMIS, financial aid) which leads to discouragement and to intellectual paralysis.

## **7 – GOING BACK TO THE WORD**

Perhaps we have too many images, acts. Words, conversations and dialogues are missing to generate alternatives or solutions. We need to return to the word, to name what happens from ourselves and not from the agenda of others (politicians, services managers...).

During the last decades, also the prioritization of an individualized, massive and invasive work has also generated losses of words, experiences and knowledge that other professional generations had about working with groups and communities.

Coming back to the word passes through restoring intergenerational dialogue, intercultural dialogue, and especially the dialogue between professionals. Only dialogue and collaborative work can lead us to be creative. We need to be creative to generate alternatives in our work and in social action, alternatives that have to recover what we knew to do when there was no money, when we had no resources. Social innovation needs the ability to promote concrete practices and sustain the helplessness, and so to generate alternatives<sup>2</sup>.

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<sup>2</sup> Enrique Sacanell (2009). Course on quality in social services. Obtained on 27.May.2015 <http://es.slideshare.net/sacanell/curso-calidad-servicios-sociales-2009-eudel-ivap>.

## 8- CREATIVITY AND CARE

Creativity is needed to recognize and participate in social initiatives that occur in our territories and requires interest to know what the others know, the people we serve, the colleagues, the other services of the territory. It must be emphasized the importance of incorporating the perspective of the user in the intervention models, avoiding as far as possible, the uncritical everyday routines.

Caring involves having technical creativity to provide resources and benefits with a new meaning. Now and before the crisis, institutions and resources can not cover completely what people expect from the services. Professionals can accompany processes, show possibilities, distribute benefits, etc., but the degree of satisfaction of the people attended and of the professionals is limited. It is recommended to avoid solutions that generate irresponsibility and an over excess of valuation of the transforming power of the resources (Puig, 2008).

If what we are looking for is to empower individuals and their responsibility, we need to re - mean resources, in the sense of giving them new meanings. Since a long time (beyond the crisis), I think there is a problem with the resources and not only with the resources in our social services system. Resources must be exposed and used properly because otherwise its value is depreciated and we invalidate the power of change that a well prescribed and oriented resource has..

It is important in order to take care of others and take care of oneself to pay attention to the prevailing management model: first the resource and then the person. In social services field, professionals are often pressured to quickly solve problems and waiting-lists. But this entire phenomenon is very complex and we know that some problems disappear in the long term and some have no solution. Not believing in the effectiveness of the provided resource means being careless professionally, since as Leal tells us, "what generates more inconvenience to the professional it is not the need the user expresses but the position which this one adopts in front of the need. This one may be objective [...] but the needy subject, the one who expresses .... "I need... I have a lack..." appeals to the subjectivity and points out to the subjectivity of the listener" (Leal 2006, p. 37). Such an attitude is not caring themselves as professionals and neglecting the other.

We have to move forward to a re-signification of material resources. For this purpose, in some articles I suggested in 2007 different ways of approach to benefits, resources that I called micro-interventions for the mediation of resources, and which I will now call as care practices. I understood micro

interventions as the definition of a framework next to the other person placing the resource at its real support capacity. Respecting the requirements of a benefit without using them as reparation from what does not exist in the system. Otherwise, as we are told by Leal (2006) "people can not accept benefits as neutral functions and it is the link and the involvement what tires and exhausts the professionals". It is necessary to recognize that although institutions have made efforts to develop standardized protocols, with them they face needs but not the effects linked to it.

## **9 – RESEARCHING IN ORDER TO CARE OTHERS AND TAKE CARE OF YOURSELF**

Research is a method of self-care. This can be done investigating practice and professional action through the systematization. We need researches that provide theoretical constructs from the concrete practical experience. It would start from the professional experience as a subjected unit to a analysis process

The systematization of the practice is a scientific production and is based on collaborative work and reflection on daily practice and, in particular, about interventions made in different professional spheres, as in different sectors of population where the social action takes place. But how does research care professionals? Research gives us knowledge about what has been done and has been useful, to what has generated welfare to people and helps to identify those meaningless professional actions that should not be repeated. It permits to identify alternative ways to do social action that exceed the rigid structures of some institutional assignments. Emerging needs require innovative proposals from institutions to face emerging and chronic difficulties. To do that we have to propose frameworks, to ask acknowledgement for the devoted time and ask for resources in our institutions to do research and teaching, and so to be able to rethink ourselves as professionals and do it collectively. It is therefore that the very fact of research regards how we care for ourselves, and how we are cared of.

So far we have seen proposals based on interdependence, on collectivity, on confidence, on the word, on creativity, on research. I will now on develop some more concrete ideas of self-care, more reachable; in short some notions that serve as guide.

Each professional can engage in his or her self-care and has the best answer; we just have to find it. So it is suitable that each one exercise the ability to choose and be careful not to fall into "this is what has touched me", "I can do nothing", "it is what it is", giving encouragement to discouragement.

It is not insignificant to provide, physically and psychologically, with mechanisms to take care of one, not understood as a protection from the people we work with but as an essential requirement to attend in difficult situations. Taking care of oneself is to recognize the need of a space and a time to reflect on lived situations or cases. It is also to have time for the group where to be able to share the concerns inherent to the practice.

The renewal of knowledge, studying, participating in forums, attending conferences and exchanging knowledge and experiences, all that intends not being exposed to situations that sometimes have no solution, and thus it has very beneficial effects on our care. Otherwise the lack of training or reference frame where being able to orient yourself generates much professional wear because each new unknown situation can cause a disorder of the professional acting (Leal, 2003). Without renewed knowledges what happens is a practice based on the common sense, certainly very necessary, but absolutely insufficient. It is essential to work from the sense, conscience and the valuation of things. Institutions have been provided with multiple procedures that standardize the professional activity. Being aware of the actions we make and how we make them, without answering not only from the formal acting, it grants us sense and awareness. Actions must be filled up with sense because otherwise it is recommended not doing them.

To trust in our capabilities, starting from what we know and facing what we do not know is being reinforced if we trust the other colleagues, if we share, if we work together.

Recovering word and conversation among professionals enables that from dialogue emerges knowledge and answers that help to think. The same can be said of the physical encounter with the other and not only online or by technological means. What is known as the art of hosting<sup>3</sup> means working in cooperation, rescuing the hospitality and making relationships with other professionals comfortable, welcoming the other team with their difficulties and limits. It also includes being more proactive in the sense of anticipating to the circumstances and not expecting that the other be the one to solve the case. To promote the art of hosting we must recover the cooperation and coordination between professionals as a self-care tool.

Teamwork, coordination and consultations among professionals have to be recovered as praxis, since information flows quickly through publications and services catalogues, but not necessarily more humanly among professionals.

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<sup>3</sup> The Future of Work: the Art of Collaborative Leadership Written by Monique Svazlian, for The Huffington Post. Obtained on 4.June.2015 [http://www.huffingtonpost.com/monique-svazlian-cpcc-acc/the-future-of-work-the-art-of-collaborative-leaders\\_b\\_3254535.html](http://www.huffingtonpost.com/monique-svazlian-cpcc-acc/the-future-of-work-the-art-of-collaborative-leaders_b_3254535.html)

That is why building knowledge communities based on the generosity that involves collective intelligence are more necessary than ever.

## **10 - THE SOCIAL SUPERVISION, A FORM OF CARE AND SELF-CARE**

Supervision is par excellence a method to care of professionals.<sup>4</sup> As a place for renewal during the professional practice, supervision is characterized as a field of systematic reflection on the professional action without fulfilling control functions. It is a space to ask questions, to expose doubts, to channel the no solution and debate conflicts. Group and supervisor listen to and allow the subjectivity of the participants to flow.

It is based on experience and professional practice, in order to improve it. Its function is to think about what we do, about the work in order to give it back to the attended people. This is the great training potential.

Supervising allows that problems and painful experiences suffered at work can be recognized and it has therapeutic effects to the extent that it contains, deals, and makes possible the development of the difficulties in cooperatively way. The supervisor has no control, no coordination and no management functions. For this reason it is essential that the supervisor be independent and outsider of the contracting institution. It is precisely this supervisor position, being stranger of the task and the institution, what becomes an opportunity for the supervisee to discover personal and professional strengths.

Cases or effects that institutional situations have on professional intervention can be dealt in the supervision meetings. What allows the supervisor to intervene is the agreement of the participants to maintain a sphere where listening, the word, participation and confidentiality are guaranteed. For teams, monitoring is very convenient and recommended, sometimes essential and always useful (Puig, 2009).

The practice of supervision and team advice are increasingly introduced and appear in the different scenarios where help is worked. This is a positive and unequivocal sign of progress in the care of professionals of the social field and services headed to the people.

In Catalonia different institutions have endorsed this practice. Specifically, there are experiences of professional colleges in agreement with councils, of universities in agreement with local government or regional governments that

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<sup>4</sup> Interview to Carmina Puig. "Los profesionales somos el recurso más valioso del sistema de atención a las personas y debemos cuidarnos para cuidar" Obtained 4.June.2015. <http://www.social.cat/entrevistes>

have hired external supervision services and so they have supported their professionals, etc.<sup>5</sup>

Monitoring is a tool that, after decades of practice, is very useful in reading the current complexity and for the construction of a self care professional culture, a way we are building together.

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