

RECENZJE/REVIEWS

Lloyd C., King R., Chenoweth L. (2002). *Social work, stress and burnout: A review*. "Journal of Mental Health", 11 (3): 255–265.

Reviewed by: Barbara Wyka

Burnout and professional stress among social workers constitute a very important topic in the literature of social work. The article of my choice – a summary of literature on this subject – addresses the frequency of professional burnout as well as factors that influence stress and burnout among social workers. I think that the question posed at the very beginning is also important: Are social workers subject to more stress than other health professionals? This is a query I will try to answer at the end of this review.

At the beginning, the authors introduce us to the terminology of stress and burnout. Professional stress is a kind of mental discomfort, often caused by discrepancies between the requirements set by employers and a worker's ability to cope with a given situation. Occupational burnout occurs as a consequence of such stress. An example of professional burnout is a lack of motivation, job satisfaction, or professional achievement.

An interesting aspect discussed in this article is the topic of the philosophy and value of social work. The authors quote here a statement by J.L. Ruschton who states that people exposed to depression often choose social work as a profession, moved to help others by their own problems. The willingness to help is a frequent motivation in choosing this profession, not only abroad, but also in Poland. Unfortunately, this is sometimes fatal because often our expectations and excessive commitment lead to discouragement and burnout since not all clients want deep changes in their lives.

However, I disagree with the statement that social work is not always profitable. The fact that a social worker's counsel is less decisive than a doctor's is quite understandable, because the latter knows the most about a patient's health. I believe that, in order for a social worker to meaningfully express his or her voice in such cases, state authorities should react to those situations signaled by the social work professionals.

This text cites numerous studies that deal with sources of stress in social work. In my opinion, the most important of the reasons mentioned are, in particular, those that directly affect social workers – that is, underestimation on the part of the employer and/or co-workers, or misunderstanding of the social worker's role. Work organization is another stress factor in this profession: high staff turnover, and inadequate funding. In my opinion, the authors have omitted here an important factor in burnout and occupational stress: the low prestige of the social work profession, which is particularly

visible in Poland. This occupation is not sufficiently respected compared to other assistance professions (e.g., doctor, nurse, etc.). In addition, there is a stereotype of the social worker as merely an official providing material services; this very much narrows the perceived range of duties and challenges within this professional group.

In this article, the effects of stress are shown by means of quoted studies. The authors cite N. Thompson's research, which took place in Great Britain. They show that 74% of social workers in the field demonstrate a very high level of anxiety. Other studies have indicated that the higher the requirements, the more anxiety among social workers. From J. Caughey's research, 72% of the 36 respondents showed mild mental illness. Other indicated effects of stress are also emotional exhaustion, unpleasant moods, depression, disappointment, and a lack of fulfillment. In order to protect employees against occupational burnout, the authors bring up the issue of supervision and team support. I believe that these factors play a very large role in this profession. The purpose of supervision is emotional and substantive support (affecting the quality and effectiveness of this work), as well as greater satisfaction with the tasks performed.

The article, "Social work, stress and burnout" is a review of the literature on this topic. It contains important content about stress and burnout, but this overview is not exhaustive. The title of the article suggests that there will be a holistic discussion about social work. Instead, too much reference is made to social work in healthcare specifically. In Poland, this social work profile is not yet developed and hence some content was not very interesting to me.

Finishing my work, I would like to answer the question: Are social workers indeed subject to greater stress than other health professionals? In fact, it is my belief that social workers are more vulnerable to stress and occupational burnout due to the low prestige of the profession, low wages, and low social status. Additionally, social workers often meet with aggressive clients or people who do not want help which is another barrier. All the above-mentioned factors lead to greater stress and exposure to occupational burnout. If work safety were to be increased (for example, in contact with aggressive clients), and if there was more interest in group support for social workers, then efficiency and job satisfaction would be greater. A social worker can be compared to a doctor who "heals" the relationships people have with society. He or she is also well-educated regarding support activities, yet his or her qualifications are not as respected as those of a medical doctor. I believe that social work has great potential and a future, so it is worth fighting for better support for social workers.

Room R., Hradilova Selin K. (2005). *Problems from women's and men's drinking in eight developing countries*, Chapter 10: 209–220, in: I.S. Obot, R. Room (eds.), *Alcohol, Gender and Drinking Problems. Perspectives from Low and Middle Income Countries*. World Health Organization, Department of Mental Health and Substance Abuse, Geneva.

Reviewed by: Katarzyna Strzałka

Alcohol abuse has become a global issue in various societies. The social problems might be caused by many factors, such as high unemployment, family problems, addictions, and others. Robin Room and Klara Hradilova Selin attempted to find the potential reasons for drinking alcohol. The authors' article is a great example of the problems with which selected respondents must struggle. What I liked the most whilst reading the article was the fact that drinking problems concern not only men, who are frequently considered as drunkards, but also women. What is more, in order to examine the problem among the eight countries (i.e., Argentina, Costa Rica, Mexico, Brazil, Sri Lanka, India, Uganda, Nigeria), it was decided to conduct a common survey in all the developing countries. Consequently, the authors set out to establish a framework by suggesting that alcohol abuse is distinguished by several items that are caused by problems such as society, health, relationships, civil comporment, jobs, and finances.

In the first section of the article, Room and Hradilova Selin present the respondents' answers to problems from their own drinking perspectives based upon four criteria: consumption levels, alcohol policy, "beer or cola" price, and restrictions. The data gathered was illustrated then in the monographs so as to present the top respondents. From the data collected, we discover that, on the one hand, the highest alcohol-consuming countries are Argentina and Uganda. On the other hand, India and Sri Lanka are countries of low consumption. It is worth adding that the authors emphasise that alcohol consumption and policies are crucial in comparing and considering the national context. When it comes to hazardous drinking patterns, the highest marks go to Mexico and Costa Rica; in turn, Argentina and Nigeria have been assigned lower scores.

All the countries have a minimum drinking age of 18 for all alcoholic beverages. Costa Rica and India are the countries having the most restrictions. In contrast, Brazil and Uganda have the fewest such restrictions. The other countries disclosed some form of alcohol licensing. When it comes to alcohol prices, Costa Rica is the country in which the price of beer is much higher than that of a soft drink. Finally, the last criterion reveals other forms of restriction. The authors claim that alcohol advertising differs in each of the countries; at the bottom we can find Uganda and Brazil while India is at the top. In some of the countries, there is a possibility to drive legally with blood-alcohol. We may classify Uganda and Mexico as the countries which have the least restrictions.

The second part of the article is devoted to the percentage of current drinkers between the ages of 18 and 65. Age and gender were the key factors that were taken into account when doing the research. From the data collected we may assume that both

males and females in Argentina and Sri Lanka report low rates of problems. More generally, male drinkers admit a higher rate of problems than female drinkers. What is more, the percentage rate of male and female drinkers is equal in Nigeria. The consequences of alcohol abuse that result in violence are seen among the residents of India, Uganda, Nigeria, and the men living in Sri Lanka.

The last and final section of the article is more precise and shows the general reasons for abusing alcohol in the above-mentioned countries. There were 10 problems the researchers desired to examine and these were as follows:

- bad marriage;
- difficult family relationships;
- damaged friendship;
- fights after drinking;
- drunk-driving;
- work issues;
- detrimental effects on chores;
- detrimental effects on finances;
- physical health problems; and
- guilt/remorse.

The authors found out that the main reasons why persons reach for alcohol are bad marriages of males; here Uganda, Costa Rica, and India are the countries that take first place in this ranking. Mexico belongs to the category of countries without serious problems after drinking but the residents, especially males, tend to fight after abusing alcohol – something that is explained by work issues. When it comes to females drinking, the highest score was reached by representatives of Uganda who claimed that their alcohol problem is caused by low financial resources and poor physical health.

There are many problems with which specific people from different countries have to struggle. From the research done it can be concluded that males face alcohol problems more often than females, mainly because women tend to be teetotalers. One thing worth adding is that female reasons for drinking are totally different in comparison to those of males. This may be explained by the fact that women better deal with failure or other problems than men. The article presents a diversity of problems that are caused by many factors and is worth reading – especially when wanting to broaden knowledge in this area. Personally, for those who study social work like me, it is a huge opportunity to read such articles so as to unveil the reasons why people reach for alcohol and to find potential solutions to help these people. Lastly, it must be kept in mind that alcohol problems in many countries are caused by difficult situations in these countries, such as financial ones.

Sigelman C.K., Rider E.A. (2011). *Life-Span Human Development, 7th Edition*. Chapter 7, *Cognition*: 100–116. Wadsworth Cengage Learning, USA.

Reviewed by: Małgorzata Janiczko

Selected for this review is a chapter from the book, *Life-Span Human Development* by Carol Sigelman and Elizabeth Rider. Written as a textbook for psychology students, this is one of the best academic books on child and human development, but, so far, it has not been translated into Polish. Here in Poland we have many interesting books in this field, but none is as good as this one. During my studies in psychology, I used this book many times. Here I will describe the advantages and disadvantages of this manual and briefly describe the knowledge found in Chapter Seven on cognition.

This particular chapter contains the most important information about cognitive processes in children. The authors introduce us to the two most important theories about knowing and gathering knowledge. The first of these is Jean Piaget's theory of intelligence development. Piaget described the development of children and youth for much of his life. His work has had a huge impact not only on psychology, but also on all other fields that deal with the child – for example, pedagogy or education.

The authors of the textbook at hand briefly present the history of Piaget's discoveries and explain basic concepts. First are his stages of development which are subsequently explained in subsections, by age. The authors put the most important content in tables, describing this content with examples and additional illustrations. Importantly, the authors are also trying to show different points of view and newer concepts which have developed or changed Piaget's ideas. For example, the Swiss psychologist thought that babies cannot find hidden objects because they think that, if they do not see it, it does not exist. He also thought that children would be looking for a hidden object in the last place in which it was seen, even if they saw that the object was concealed in another place. He called this phenomenon "A-no-B Error". However, some researchers have pointed out that this error is due to many other limitations (e.g., weak cognitive processes), and not necessarily the fact that the child does not understand where the toy is. Still others have recently discovered that children can deal well with an "A-not-B Error" situation even earlier than Piaget thought. The Sigelman and Rider handbook very easily and interestingly explains this type of controversy. The manual allows us to get to know the classic assumptions and confront them with the latest research results.

In the next parts of the cognition chapter, the authors explain other Piaget concepts related to the child's age. Knowledge is arranged chronologically and logically so that it is easier to understand the next steps. Moreover, the authors also add tables with comparisons of developmental stages, thanks to which we can once again identify the most important differences. This is especially useful when we want to repeat knowledge a few days before an examination but do not have time to re-read the entire textbook.

After discussing all the assumptions of Piaget's theory, the authors show the historical context. They also discuss the contemporary understanding of this theory, indicating

its advantages and disadvantages. They also list in points the most important discoveries that have brought major changes in the way of thinking about the theory of Piaget.

The second theory discussed is that of Lev Vygotsky. Describing human development from a sociocultural perspective, he pointed out that the child always develops in a specific environment and that this environment has the greatest impact on them. In contrast to Piaget, Vygotsky believed that people did not develop according to the same principles as animals. In addition, he paid special attention to the role of parents in child development. Piaget believed that children construct knowledge themselves and derive it also from contact with their peers. Vygotsky noted that, in both these cases, parents and other close adults are more important.

It is interesting that the authors of this textbook compile these two theories in one chapter. Both Piaget and Vygotsky described the functioning and development of cognitive processes in children, but these theories are not oppositional. They are different, but also complement each other. Nowadays in psychology, both theories are considered very important. Many scientists draw significant knowledge from them when designing their own research, but the latest discoveries show the drawbacks and shortcomings in these theories, as Sigelman and Rider mention. Nevertheless, every young psychologist should understand both these theories very well.

The manual is written in simple language, although it contains many specialized concepts. Each chapter is composed of subsections, which makes it easier to search for information. The text contains many examples and additional explanations. At the beginning of the chapter, there is the “Ask yourself” section which facilitates the acquisition and repetition of information; after each part of a chapter, the authors created a “Checking questions” section which is very useful. We can check how much we remembered after reading the chapter and possibly return to the more difficult issues. In addition, each chapter contains pictures, tables, charts, and graphs with the most important information. This is typical of American textbooks; unfortunately, Polish textbooks rarely look like this.

The biggest disadvantage of Chapter Seven and the entire textbook is that it has not been released in Polish yet, but this is not, of course, the authors' fault. The manual is very well written. It contains important and current knowledge; it avoids unnecessary details but does not omit key facts. Tables and pictures in this book make learning easier. Sigelman and Rider described not only knowledge but also other points of view, much new research, and various discoveries. Maybe the contents will be out of date soon, but then the authors will probably release a new version of the textbook. The one I am describing is version 7 which means that the authors update this volume often.

Au-Yeung S.K., Baron-Cohen S., Cassidy S., Robertson A.E. Shaw R. (2018). *Experience of mental health diagnosis and perceived misdiagnosis in autistic, possibly autistic and non-autistic adults*. "Autism. The International Journal of Research and Practice", 23 (6): 1508–1518.

Reviewed by: Julia Pawlikowska

The starting point will be the claim that autism has become more common nowadays. There is a greater awareness of this disorder among both diagnosing doctors and general society. Despite significant improvement in the last decade, adults affected by it still often experience a misdiagnosis. The article focuses on the problem of a lack of diagnosis or an erroneous diagnosis. The major issues raised by the authors are the most common misdiagnoses of people with autism and reasons for a wrong diagnosis. When autism was not as commonly known, and diagnosing physicians did not have a high awareness of this disorder, autistic people were seen as antisocial, timid or socially unfit. However, as we can see in the text, a misdiagnosis is still a common problem: psychological disorders such as depression, neurosis or schizophrenia are often attributed to people with autism.

The article primarily describes research as an attempt to answer important and current questions pertaining to the issue of poor diagnosis of autistic individuals. As the research shows, the number of people affected is growing. However, it is still unknown whether there are more people with autism than a decade ago or whether the propagation of knowledge about autism is conducive to a diagnosis in early childhood. Some persons diagnosed as adults have spent most of their lives misdiagnosed and unaware of their affliction.

At the beginning of the text the authors refer to other studies presenting a broader picture of diagnostic issues. They point to the importance of these issues and the consequences to which a bad diagnosis can lead – for instance, unmatched therapy and poorly chosen medication which consequently lead to a decreased level of functioning. It was also pointed out that women are much less likely to be diagnosed than men.

The feature that specifically distinguishes this research from others and that deserves to be emphasised is the fact that autistic people have been involved in the process of conducting research. The authors conclude that adults with autism should have a voice in these studies. In fact, a group of autistic individuals took part in this research, working on the creation of the questionnaire.

This is in accordance with the Latin motto – *nihil novi sine communicon sensu* – which colloquially means “nothing about us without us”. This approach to the study of people suffering developmental disorders (persons with disabilities) is part of a new trend among researchers – an approach aimed at strengthening the role of the people affected. Working from this perspective, the individuals act as experts with reference to themselves; through their life experiences, they can consequently help a researcher identify the most crucial issues. Knowledge that comes from personal experience is priceless and invaluable.

At the beginning of this study, the authors discussed what the role of the autistic should be. Such a question is crucial not only because of this “new” approach which engages patients and other persons affected, but also due to the specific functioning of people with autism. The research team decided that one of its tasks would be to inform participants about the research concept, design, recruitment, and dissemination of results. People with autism, referring to their own experiences, referred in the study to what is important and what is overlooked. This proved to be crucial for the creation of the most appropriate research tool.

The study was conducted with the participation of three groups: people with autism, people without autism, and people with suspected autism. It also seems important to include clearly non-autistic people in the study to allow analysis of whether a mental health diagnosis and/or perceived misdiagnosis is more common among autistic individuals when compared to the general population (p. 2).

Variables in the study that were taken into account are demographic variables (e.g., age and gender) as well as the Autism Spectrum Quotient which indicates how many autistic features a person displays. The research project is considered as reliably performed; the population studied, techniques, and research tools are of high quality. This can be confirmed as the Testing Procedure was approved by Coventry University in addition to an advisory group at the Autism Research Centre at the University Cambridge.

As the research conducted by these authors is of high validity and reliability, it can potentially contribute to resolving the issue of proper diagnosis of autism. In the presented results, it was particularly important to acknowledge the respondents’ experiences, especially difficulties in communicating with specialists. It was also essential to highlight the statements that autistic people are being misunderstood and not listened to by specialists. Frequently, the respondents mentioned that their doubts regarding a diagnosis were not heard, and, therefore, they were badly treated – for example, when diagnosed and treated for depression instead of autism.

This article can be of value for both professionals and experts in the field of psychiatry and autism, but also for social workers. It could encourage all these experts to face and challenge the belief that professionals know how to take care of their “clients” better. The expert-patient relationship should not be based on manipulation, coercion or authority over the “client”, but rather on a partnership. Specialists should not prepare an action plan by themselves alone and then impose it upon an individual: the planning process should be performed together. All professionals should expand their knowledge about autism due to the increased number of people with the disorder present in today’s society. This text can be an inspiration for professionals and serve to strengthen their competences.

People on the autism spectrum (AS) – especially with high-functioning autism and Asperger’s syndrome – are most often at or above the intellectual norm. Therefore, all legal changes and discussions about their functioning should be made in cooperation with them. Persons with autism should play a central role in the process of planning changes; they should also be advisors with reference to their functioning on an academic or professional level. It is worrying that people on the autism spectrum continue to be

employed with reluctance. This is often due to the fact that potential employers have a low awareness of the abilities of an autistic individual; employers are sceptical about entrust such a person with work responsibilities. That fact emphasises even more the importance of involving autistic people in the research process; such inclusion will facilitate more understanding about this disorder and the unique skills and competences of persons on the autism spectrum. It is not sufficient enough that autistic people assist a research team and eventually regain a voice in matters that directly concern them; it needs to be shown that people with AS disorders function quite normally.

Thanks to the above-mentioned aspects of the research they conducted, the authors indirectly overcome stereotypes. This article can be used as a basis for further discussion. Based on the example of this study, other scientists may be inspired to include the persons who are the subject of a research project. This is a part of an European trend in research and application of findings defined as “service user involvement”. This presents a chance to alter our approach to the assistance relationship and to give voice to those who need it most.