REVIEWS/RECENZJE

Sullivan B. (2007)
Rape, prostitution and consent. "Australian & New Zealand Journal
of Criminology" , 40 (2): 127–142.

Reviewed by: Mia Micevska

Most of us share a common belief that we are all equal in the eyes of God. The same principle applies when the forces of law take action. That belief makes us feel safe because, no matter what we do or who we are, we are always going to be protected and treated fairly. After all, that is how our civilized society works, right?

In this article Barbara Sullivan introduces us to a topic that, normally, we would not think about and that is rape amongst sex workers. Our predetermined, unquestionable reliance on the fairness of law will be tested and reexamined. The author takes us through fifty-one judgment cases from the United Kingdom, Australia, Canada and New Zealand, between 1829 and 2004. The article paints a vivid picture of how far we are in the process of distinguishing rape from consensual sexual intercourse, especially when the situation is somewhat "messy" and "unclear."

Historically speaking, being involved in any kind of sexual activity that is not within the bounds of marriage was considered shameful and was severely judged by society. In the first part of the article we are acquainted with exactly that - the self-imprisoning feeling of shame and the quiet fear of judgment. According to the author, the number of unreported sexual assaults and rapes is very high because not only will the police have a hard time believing sex workers, but also the society sees that as a part of their job. Furthermore, the consequences that might potentially follow a rape report from a sex worker are mind-blowing. As stated in the text, the victim can even be arrested. To make matters worse, not so long ago, the very fact that one is engaged in prostitution lawfully prevented the prosecution of the sex-offender. In some cases the mere accusation of acting as a prostitute or simply being promiscuous meant that the victim had no right to defend herself due to being considered "commonly available" (Sullivan 2007: 128) in the eyes of the law. To support this statement the author then presents a series of case studies, where men who raped and physically assaulted sex workers walked out of the

court room free of charge. They did not even have the label "rapist" stuck on their forehead because they were accused by a regular street walker, an unworthy, immoral prostitute.

All that changed in the 1980s with the emergence of feminism and rape law reforms. In this part of the article we clearly see the baby steps of progress. Slowly but surely, women no longer had to hide in the shadows and pray that there will be no witnesses claiming to have seen them on the streets. Information regarding previous or current ties with prostitution was no longer welcomed in the houses of justice. Something that really catches my eye is the case where the victim engaged in sexual intercourse with her client prior the rape. It is disturbing to think that consensual sex and rape can be seconds apart. Nevertheless, in this case, the four-year imprisonment of the client guilty of rape represents a small victory.

Even though things are moving in the right direction, there are still some improvements to be made, as noted by the author. Somehow, raping a sex worker is understood as a lesser of two evils, a lighter offence than raping someone who "does not want to have sex at all" (Sullivan 2007: 134). Such a statement is rather upsetting, since rape hurts all victims equally, leaving deep emotional scars. What follows are a couple of thought-provoking paragraphs containing examples that urge us to consider dehumanization as an important problem. What awaits for our society if we conclude that a raped sixteen-year-old prostitute is less psychologically damaged than a raped sixteen-year-old class valedictorian?

Nevertheless, Barbara Sullivan ends with a positive tone full of hope, only pointing out that cultural stereotypes regarding any kind of immoral behavior are extremely hard to eradicate. The author, again, stresses the progress made in the last twenty years which is even more visible now. It would be a great mental exercise for social workers to imagine the cases presented in the article being dealt with at the current time. Today - with the media flowing through every pore of the society, with feminism at its peak, with human rights activists marching down the streets, it is very hard for sex offenders to defend themselves. It is fascinating to think of "the predator" as a possible victim which creates a whole new social dynamics. Wrongly accused individuals can have their lives ruined forever and it is the social worker's job to recognize this as a problem despite the fact that it is contra-intuitive.

I kindly recommend this article because, by showing the rapid progress made in understanding rape, prostitution and consent, it opens up a Pandora's Box filled with concealed anger. To the naked eye, it might look like a vendetta returning from the past, however, protecting people's rights and dignity is what this article is all about. Social workers should always be a couple of steps ahead and here is a great place to start.

Marshall B.N. (2012)
Digging deeper: The challenge of problematising 'inclusive development' and' disability mainstreaming' in: A. Bletsas, Ch. Beasley (eds.), *Engaging with Carol Bacchi. Strategic Interventions and Exchanges*. University of Adelaide Press, Adelaide.

Reviewed by: Martyna Janowiec

This book presents Bacchi's 'What's the Problem Represented to be?' (WPR) approach and the spaces wherein it can be applied. That theory (WPR) states that we always should actually name the problem and not only ask what it is. Much more adequate is the question posed in the first sentence. Simply asking "what's the problem" highlights only the problematizing process, but asking about representation emphasizes the objective social problems which people should get to know.

I chose one chapter from an entire book – "Digging deeper: The challenge of problematising 'inclusive development' and 'disability mainstreaming'" – whose author is Nina Marshall. My choice was not accidental because this chapter discusses whether Bacchi's WPR approach can be useful in the disability sector which is one of my current interests.

This introduction shows the ways the WPR approach can act as a mode of thinking; in other words, people should move analysis from policy to problem-solving. This leads us to question problems related to policy and to go deeper than this level. The WPR approach is a form of analysis with a clear methodology based on six questions enabling its application. In her chapter, Nina Marshall tries to employ the WPR approach in her PhD research; she explores proposals for 'disability mainstreaming' while analyzing the World Bank's disability website.

In the past non-governmental organizations were little interested in persons with disabilities. NGOs only took some actions bordering on disability like welfare. All things they did were focused on the theory and not on the strategy of assisting the disabled. This decade, however, the situation changed. The author shows that 'disability has become a part of international cooperation and development aid' (p. 54). This means that organizations and governments have finally noticed disability as a problem to solve on the international arena and not only in their own backyard. Many governments and NGOs have changed their line of attack in this regard, but much still comprises only general and not real, systemic solutions. As the author noticed, the World Bank put up a disability website only recently, as of the late 1990s. Moreover, the accent continues to be solely on theory; there is no helping strategy.

In this chapter, Nina Marshall analyzes two ways of thinking about WPR. First is this approach as a mode of thinking. Here the author indicates that this approach opens a new perspective on proposals like 'inclusive development' and 'disability mainstreaming' (i.e., her main research interests). Marshall also wonders about potential, non-political effects. An academic narrative of disability does not yet exist; the author searched texts talking about disability problems in library databases and did not find any. This can

mean that disability is marginalized or insufficient in global research. A lot of works focus merely on 'solving' a disability problem.

'Four areas of knowledge change are frequently cited as central in this process: the rise of the social model of disability; acceptance of a human rights approach to disability; appreciation of the links between disability and poverty; and a change in the broader development focus to poverty alleviation and human rights' (p. 57). These things mean that independence and inclusion are very important in the disability discussion. Yet the aim is only with respect to moving disabled people and taking care of them: nobody really asks what such individuals need, but everybody wants to 'help' them. There are also attempts to depoliticize disability, but demands for inclusion of disability into the mainstream have an impact on entire programs. On the one hand, many institutions aim to perform a holistic transformation, but this, too, can lead to re-marginalization of groups which have experienced this before. On the other hand, policy tries to solve disability problems technically, conducting research which should show what can help and what works. All of the above can inform society how to solve disability problems. This can improve the lives of persons with disabilities, but also help a government to improve its image.

The author writes that WPR comprises an alternative approach to assisting disabled people. Trying to do a deeper exploration of this approach, we can see that questioning inclusion is very important in the campaign which has been fought to change the way disability has been viewed. This change means that nowadays disability should not be medicalized: this should not be reduced down to the level of 'abnormal body', 'impairment' or so on. Through WPR such views are rejected and converted into an accent on other features; this means that individuality becomes very important. We should not only help the disabled technically, but the whole system should be changed. Very important is education and hence scholarships, empowerment and equality which can help persons with disabilities move into a more open labor market. All this moves research from 'helping' and 'solving' of disability as a 'problem' towards ways of bringing empowerment. Reflexivity is very important, but not only *being* reflexive but *doing* things reflexively. WPR is unafraid of 'hard questions' – it is 'a mode of thinking onto one's own problematisations' (p. 61).

The second way of thinking about WPR is to treat this approach as a form of analysis. Very important from this perspective is individuality and reflexive practice. WPR as a methodology depends upon one's research focus: it is flexible and can be used in policy as well as the process of governance (less in the sense of government, and more in the case of non-governmental organizations, donor agencies, foundations, etc.). For most of this part in her article, the author focuses on the World Bank website which is her main research base; among other things, she indicates that no formal policy on disability appears on that website. In analyzing this particular form of data, the author realizes that a WPR approach towards text analysis fits perfectly (even if Bacchis does not explicitly refer to this). We can see that the World Bank website includes many design elements and photographs; the entire website is full of hypertextuality. All this can be

found on NGO, media, foundational, and organizational websites, too. This does not help individuals with disabilities to find things they need on such pages; this hinders navigation through the sites.

To summarize, this article is not the best I have ever read but it is really well-written. The academic language used herein suits the topic although it does not fully facilitate comprehension of the WPR approach for people unfamiliar with this specialization. The article as a whole is very organized and divided into logically sequenced sections. Reading it for the first time, I came to know the WPR approach and came to desire more knowledge about it. This chapter is based on application of WPR in working with the disabled (something very important for me) based upon ideas of empowerment (highly important for social work).

Lloyd Ch., Hilder J., Williams Lee Ph. (2017)
Emergency department presentations of people who are homeless: The role of occupational therapy. "British Journal of Occupational Therapy", 80 (9): 533–538.

Reviewed by: Katarzyna Bednarczuk

The main aim of this text is to show how occupational therapy (OT) can help homeless people. The article also shows research results that help much in defining homeless people's needs. The authors live in Queensland, Australia which is where the occupational therapy they observed takes place. One author, Chris Lloyd, works at Griffith University. For nine years she has worked as a therapist and a team leader; currently, she is a Senior Research Officer. Her skills and expertise include such subjects as mental illness, treatment and rehabilitation. The second author, Joanne Hilder, works as a Homeless Emergency Department Liaison Officer. Last but not least, the final author, Lee Williams, is both a clinical psychologist and a manager within the Headspace Youth Early Psychosis Program, an intervention service for young adults with first episodes of psychosis. Williams and Lloyd have written several articles together.

Before reading the text at hand, it would be useful to know what occupational therapy is. In the middle of the article there is one explanation, but it is focused on therapy which takes place only in the emergency department and thus can lead to confusion among those who know little or nothing about this type of therapy. In my opinion, there should be at least brief information at the beginning of the article, but such explanations are difficult to find here. Generally speaking, occupational therapy can be used to work with individuals, groups or an entire community. The therapist helps in everyday activity – for example, sleep preparation, education, leisure participation, shopping, communication skills or coping with stress. This therapy has a positive effect on mental health and overall well-being.

Nevertheless, the article is rather well-organized. The introductory section includes a literature review, whereas the most important section, found midway, is on occupational therapy in the emergency department. There are several paragraphs about the research conducted. Subsequently, we find the results and conclusions which are quite valuable, presenting a few new ideas as well as ideas which the reader can apply in his or her own country.

The introduction quickly explains what an Emergency Department (ED) is and why homeless people go for this specific type of medical treatment. An early paragraph shows how Australian Emergency Department and Homeless Emergency Department Liaison Officers (HEDLO) work together. In fact, precisely because such large numbers of homeless people used/went to the ED, Queensland Health (in northeast Australia) created HEDLO to help such clients in particular. In HEDLO work, many specialists work together to concentrate on supporting people who have become homeless as well as on those who are at risk of becoming homeless.

The authors included a literature review which is helpful for those who need more in-depth information about homeless people at an emergency department. Here the authors compare studies from different countries such as Brown et al. in the United Kingdom, Lin et al. and Oates et al. in the USA, Okamura el al. in Japan, Henry et al. in France as well as Moore et al. in Australia. Those studies inform the reader about the enormous number of homeless people who are seeking help in EDs around the world. Lloyd, Hilder and Williams indicate that, at the present moment, no clearly outlined role for occupational therapy in the ED exists.

Regarding the actual research, over a period of sixteen months, social workers holding a Master's Degree filled out HEDLO forms with information such as age, gender, ethnic status, time of presentation, reason for presentation, indigenous status, visits with a therapy/health specialist, how the patients arrived at the ED, etc. This database was later analyzed by specialists focusing on the percentages of homeless people in all the categories found on the forms. During this research study, 177,996 patients arrived at this particular ED in Australia. Of these persons, only 0.2% of them were homeless. Hence, for this project, the three authors conducted an explicit survey on 221 homeless. The results are worth viewing.

One important component of the article is that some of the individuals seeking help in the ED and classified as a homeless were not from Australia. The authors also mention Aboriginals and Torres Strait Islanders who have sought medical aid in addition to other Australian citizens. It is really important to not forget about homeless immigrants or autochthons. The causes of their becoming homeless might be different and unique compared to the general population. There also more problems to solve in their cases. The authors focused, too, on language and communication difficulties related to this. Another component found here is the very arrival at the emergency department. Lloyd, Hilder and Williams compared their own database to those drawn from previous studies. Their focused survey revealed new things to do and give new insight into the solving of problems with homeless clients.

Yet these three authors have made their own contribution to dealing with the troubles and tribulations of the homeless. One section here concentrates exclusively on occupational therapy service in an ED. The authors identify the qualifications of a person who, in their opinion, can work there as a therapist. Outlined herein are the skills, knowledge background, and tasks which should be performed on behalf of the homeless. Shown, too, are new ideas for working as an occupational therapist with such clients in this particular context. I found this very interesting; it reminded me somewhat of the outreach method. In my previous experience, an occupational therapist stays in one department; however, in the case of a homeless person, it is very important to work with him/her in their place, wherever that is. Moreover, the place where a homeless person 'lives' provides the therapist with a new perspective. The OT can see what really works in their relationship and what can be improved.

The primary limitation of this article is, as the authors themselves have written, that this study was only an exploratory one. What can one say? I cannot wait for further research in the future and the next article. In their conclusion, Lloyd, Hilder and Williams emphasize the role of the occupational therapist which must include an understanding of an individual's needs. This could facilitate the creation of a new role for the OT in resolving some of the issues associated with homelessness in Australia.

Overall, this is a great article about helping/supporting homeless people in the ED. It presents new strategies for dealing with the problem of homelessness. It is dedicated to those who are interested in this topic, but also to those who are not: this article opens our eyes on an old as well as new issue and shows innovative ways out. OT is definitely something to consider. Furthermore, the establishment of departments for the homeless in our hospitals is another excellent idea. We all should consider the application of this Australian solution in our own countries. Perhaps some of our problems are the same, and thus some of the same possibilities to solve them appear. After reading this article, I also see the potential power of occupational therapy in Poland where I live. This article inspires me to do a similar research.