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### **APPRECIATIVE CASE MANAGEMENT: USING THE SOCIAL CONSTRUCTIONISM IN SOCIAL INTERVENTION**

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# APPRECIATIVE CASE MANAGEMENT: USING THE SOCIAL CONSTRUCTIONISM IN SOCIAL INTERVENTION

Stefan COJOCARU<sup>1</sup>

## Abstract

The article presents a research in the field of case management, experiencing two forms of it: problem-centered case and appreciative case management. For this, an experiment carried out on a six-month period, during which time we verified the results obtained by applying two different supervision models, problem-oriented supervision and appreciative supervision. Based on parallel process, the case management was changed. For this experiment ten cases were identified with various degrees of risk in child abandonment. When the appreciative case management was applied, the studied cases showed better results compared to the cases that were managed based on problem. In the case of services aimed at preventing child abandonment, it can be seen that the classical intervention focused on problem, lasting less than three months, has no positive effect on the clients' situation. This practically means that in such circumstances, the financial, human and material resources used for an intervention that lasts less than three months are wasted without significant results. The appreciative case management produces tangible results after a shorter period of time by comparison to the classical intervention. This can be seen in the results obtained within the experiment, which are due to the use of the appreciative approach in intervention. Focusing on problems in social work and the attempt to solve them may sometimes not result in their resolution; the orientation towards identifying deficiencies and dysfunctionalities yields poorer results than the appreciative intervention and preserves the problem.

*Keywords:* social constructionism, appreciative case management, social intervention, appreciative intervention, problem-based case management, appreciative inquiry, social services.

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## Introduction

Case management in social work in Romania has become a recognised practice, and even a practice mandated by law by the new regulations concerning social work/social assistance. After consulting specialists in the domain, the National Authority for the Protection of Children's Rights developed minimum mandatory standards for case management in the area of child protection, managing to provide a few guidelines in the practice of social work in the domain, essential, we believe, for the future development of professional practices in this domain. Together with the other standards, these prove a maturity of the social work practice, due to the recognition of best practices models in the domain. Case management is seen as a form of articulating all the interventions (social, medical, psychological etc.) carried out by various categories of professionals, in order to maximise the effectiveness of these specific interventions. Focussed on solving the problems of various categories of clients, Romanian social work seems to start consolidating its area of competence, its practices and its efficiency in terms of results. Unfortunately, although the domain of social work has developed greatly, we are left behind in two areas: the contracting of social services by non-governmental organisations, and the allocation of funds for the evaluation of public and private services. The law mentioned above is not always clearly formulated: the terms “case manager” and “person in charge of the case” are used without being explained, the ways clients are admitted into some services and released from the welfare system at different levels of protection – local and county – are not explained, there are no explanations concerning the service plan and the individual protection plan, which appear to be two different tools, when in fact they are the same thing, and, finally, there are no clear, quantifiable and measurable criteria for each standard. Beyond these vague formulations, we believe that the promotion of case management in Romania through the establishment of minimum mandatory standards is an important step in the development of quality services in social work.

In its development in Romania, the practice of social work has been mainly *problem-centred* (Cojocaru, 2005). Case management, as it is found in its practical – more or less elaborate – forms, is also a prisoner of the deficiency paradigm (Cojocaru, 2012a; Cojocaru 2012b)<sup>2</sup>. In the research we carried out in 2004 on the guaranteed minimum income for individuals living in the rural environment, we found villages where over 80% of households had been granted this form of

<sup>2</sup> An initial form of appreciative case management approach was presented at the World Congress of Appreciative Inquiry, held in Ghent in 2012. Appreciative supervision was also presented, as well as forms of case management, including appreciative case management (Stefan Cojocaru, *Appreciative Supervision. Effects of Appreciative Supervision on the Social Practices*, oral presentation, and Stefan Cojocaru, *Appreciative case management. Using the principles of Appreciative Inquiry in social intervention*, poster).

support by the authorities. This solution to the problem of poverty, paradoxically at least at first sight, did not work as it was intended; on the contrary, the focus on the problem caused an increase of the dependency on this income and deepened certain social problems. This is due, in our opinion, to the fact that the intervention was designed solely from the perspective of the deficiency paradigm, without taking into account the possibility of changing the system that generates the problem in the first place. Moreover, some individual cases encountered in these communities, although bordering on the absurd, point out that the problem worsened: people sold their livestock and destroyed some of their possessions, stopped performing any productive activities precisely in order to qualify for the inclusion in the guaranteed minimum income system. The model of deficiency is so deeply rooted in the mentality of Romanians, that we'll find special cases where individuals who are working abroad still receive this guaranteed minimum income at home. One of the purposes of case management is to reduce the vulnerability of the individual through specific activities, such as counseling, therapy and social intervention, according to the dominant types of vulnerability. Therefore, in this paper we aim to launch some ideas concerning alternative forms of case management, which may be more effective and more productive in the reduction of social vulnerability, of dependency and marginalisation.

### Literature review

Cooperrider and Srivatsva launched the concept of *appreciative inquiry* as a response to Lewin's *action research* developed in the '40s; the appreciative inquiry aimed to become an instrument for social change, and especially for organisational change. From the point of view of the authors, one of the failures of action research is due to its *focus on the problem*, an approach devoid of innovative potential. They believed that focussing on the problem inevitably leads to constraints on imagination and reduces the possibility of creating new theories (Cooperrider & Srivastva, 1987). The appreciative inquiry vision turns upside down the problem-centred approach, paying attention to what goes well in an organisation, its successes being identified by its own members. Researching the problems in an organisation results in their preservation, deepening and amplification; therefore, although in each organisation there are things that do not work well, in order to diminish their influence on development, the researcher must start from what works well in an organisation, from its successes, identified and interpreted as such by its own members. Cooperrider and Srivastva built the appreciative approach based on Kenneth Gergen's constructionism (1985), which sees reality as a social construction and as a constant reconstruction in the interactions between individuals. In the constructionist perspective, any organisation is a human construction, generated by the interpretations given by the social actors to this entity and to themselves (Cooperrider *et al.*, 1995:

157). Therefore, in order to change an organisation, one must act on the way individuals interpret the organisation (Cooperrider and Srivastva, 1994). Whereas in the beginning the appreciative inquiry was used in *organizational development* (Cooperrider & Srivastva, 1987; Cooperrider & Srivastva, 1994; Cooperrider & Whitney, 2001; Cooperrider & Avital, 2004; Rattanaphan, 2010; Bushe, 2010), this strategy of change management has gradually expanded towards areas such as *education* (Yballe & O'Connor, 2000; Lander, 2002; Kumar & Chacko, 2010; Kelly, 2010; Bradu & Sandu, 2008, Cojocaru, 2011), *healthcare* (Hirunwat, 2011; Rubin, Kerrell, & Roberts, 2011), *evaluation* (Coghlan, Preskill & Catsambas, 2003; Cojocaru, 2008; Messerschmidt, 2008; Ojha, 2010; Kavanagh *et al.*, 2010), *therapy* (Sandu & Ciuchi, 2010; Donaldson & Ko, 2010; Rubin, Kerrell & Roberts, 2011; Galazka, 2011; Wendt, Tuckey & Prosser, 2011), *education* (Kumar & Chacko, 2010; Kelly, 2010; Cojocaru, 2011), *research methodology* (Cojocaru, 2005; Reed, 2007; Kluger & Nir, 2010; Van Gramberg, 2010; Cowling & Repede, 2010), *leadership in organizations* (Ludema, Whitney, Mohr & Griffin, 2003; Bushe & Kassam, 2005; Hart, Conklin & Allen, 2008). Our aim was to see to what extent the appreciative inquiry could be applied in various social work practices (Cojocaru, 2005). Thus, starting from the principles of appreciative inquiry, we built an appreciation-based supervision model.

In 1987, Cooperrider and Srivastva launched the concept of *appreciative inquiry* as a response to Lewin's *action research* developed in the '40s; the appreciative inquiry aimed to become an instrument for social change, and especially for organisational change. From the point of view of the authors, one of the failures of action research is due to its *focus on the problem*, an approach devoid of innovative potential. They believed that focussing on the problem inevitably leads to constraints on imagination and reduces the possibility of creating new theories. The appreciative inquiry vision turns upside down the problem-centred approach, paying attention to what goes well in an organisation, its successes being identified by its own members. Any organisation faces problems, but researching the problems in an organisation results in their preservation, deepening and amplifying them. The appreciative inquiry does not deny the existence of problems in an organisation or a community; however, in order to diminish them, the positive aspects are identified, cultivated and promoted. Cooperider, Barrett și Srivastva (1995) built the appreciative approach based on Kenneth Gergen's constructionism (1985), which sees reality as a social construction and as a constant reconstruction in the interactions between individuals.

In the constructionist perspective, any organisation is a human construction, generated by the interpretations given by the social actors to this entity and to themselves: "organisations are products of human interactions and a social construction rather than an anonymous expression subordinated to a natural order" (Cooperrider *et al.*, 1995: 157). Some authors point categorically to the bases of the appreciative inquiry in social constructionism: "The appreciative inquiry is the way to think about change, built on the assumption of a social construction of the

reality of an organisation” (Murrell, Watkins, Mohr, 2001: 92). In order to change an organisation, one must act on the way individuals interpret the organisation. “The appreciative inquiry aims to identify the best of ‘what is’ in order to help the eruption of imagination concerning of ‘what could be’. The goal is to generate new knowledge that broaden the domain of the possible and helps partners create a vision that is collectively desired and to follow this vision by translating the most successful ways of action into reality...” (Cooperrider and Srivastva, 1994: 207).

The description given by the authors shows that, in order to broaden the domain of knowledge, we must find *‘the best of what is’* in the organisation’s experience and, based on these successes, to create *a collective vision with “what could be”*. “*What is*” does not mean only the present in the sense of a reality manifesting itself, but also current interpretations given by agents to past events. *‘What is’* represents a social construction at the time of analysis, but it can also be a result of interpreting past events. From this perspective, the present is something people think at this moment about the organisation.

Other authors have viewed the appreciative inquiry as an instrument that may be used for leading change in an organisation or in the community. “The appreciative inquiry is an instrument of organisational change focussing on learning from success. Instead on focussing on deficiencies and problems, the appreciative inquiry focuses on discovering what works best, on why it works and on how could success be spread out within the organisation” (Johnson and Leavitt, 2001: 129-130); the authors stress categorically the need to learn from success and the need to abandon the orientation of the action research, which aims to identify *deficiencies, problems, shortcomings and constraints*.

In 1999, Bushe picks up again the concept of *appreciative inquiry*, building a definition that showcases the *constructionist perspective* on social reality, as a result of the process of creating a collective image about a desired future: “The appreciative inquiry, an organisational theory and a method for changing social systems, is one of the most significant innovations in action-research in the past decade. The appreciative inquiry as a method for changing social systems is an attempt at generating a shared image of a new and better future by exploring what is, or was, best...” (Bushe, 1999: 1-2). In this definition the author underscores the role of a shared vision, a *“shared reading”* of the organisation and its future, as Elliott (1999:76) states.

### *Using Appreciative Inquiry Principles in the Case management*

Cooperrider and Whitney (2000) consider that the appreciative inquiry is based on five principles, which form the foundation for viewing social intervention in terms of “interpretations of reality”. These principles help us establish the theoretic foundations for the way the supervision process is organised and the way the appreciative strategy is consolidated within this process: (1) *The constructionist principle*: This principle helps us understand the importance of individual

interpretations in constructing realities and in manifesting the interactions between our mental models connected to personal practices adapted to social requirements, which are socially constructed in a relational process. This principle helps us stress the educational dimension of supervision, which is considered a form in which those being supervised take part in a reconstruction of the meanings experiences have for the construction of future actions (Mezirow, 1996). (2) *The principle of simultaneity*. This principle concerns that fact that the way questions are asked during supervision meetings and the changing of practices are *simultaneous*; the mere formulation of the questions addressed by the supervisor causes changes to happen in the social worker's practices. This principle of the appreciative inquiry is fundamental in explaining the parallel process taking place in supervision. The *appreciative perspective* in the supervision process can be developed through a parallel process in the social workers' practice with their clients (Searles, 1995; Yontef, 1997), under the guise of negotiated rules, already carrying in themselves an interpretation of said rules. The social workers' interventions will be guided by these formalised expressions, assembled into procedures, which can make change in the client's situation possible. When those being supervised describe their recent successes, according to the "heliotropic process" (Cooperrider, 1990), the supervisor can guide the discussion towards an analysis of these successes (Johnson and Leavitt, 2001) and explore together with the social workers other situations and other cases. (3) *The poetic principle*: According to this principle, institutional practices are the result of the multiple interpretations of individuals, expressed through *language*, which, in its turn, had a formative character, being a part of the constructed world. Language is not a mere image of the world, but instead a form of social action. (4) *The principle of anticipation* states that social work practices are influenced by the *positive future image* constructed through the individual creations that influence present events. In order to argue this principle, Cooperrider and Whitney use the example of the placebo effect used in medicine and the Pygmalion effect, which prove that the image the teachers have about pupils is a strong predictor of the performances of these pupils. This principle promotes in the supervision process and in the direct intervention in social work (and not only) a "reversed determinism", meaning that the goals, what can be obtained (the effects) are projected, while the circumstances that can contribute to the fulfilment of these goals (the causes) are generated later on; this is a process of designing and achieving change which we have called "social projectionism" (Cojocaru, 2006). (5) *The positive principle* concerns the potential and the force that appreciation has in organisational development, due to the fact it discovers the positive aspects and it achieves innovative change in correlation with the anticipation of a positive future. This aspect of positive change is an unknown in today's management (Cooperrider & Whitney, 2000), due to the fact that classic change management focuses on analysing and diagnosing problems or organisational deficiencies, leaving out the positive vision (Whitney, 1998).

*Types of case management*

Case management is a concept that designates the method of coordinating and integrating medical and social services, but it has so far been given different meanings. Case management in social work is “a method of providing services, through which professional social workers assess the needs of the client and of his/her family in cooperation with the latter, coordinate, monitor, evaluate and support the client so that he/she can access social services that can meet these needs” (NASW, 1992: 1). This definition of case management in social work places a great importance on the *client's needs*, and on the way the *provided services* meet these needs. Other authors have seen in case management “a logical set of steps and a process of interaction within the network of services, ensuring that the clients receive the services they need in a form of support that is efficient, effective and has an acceptable cost” (Weil, 1985: 2). We notice that these two authors also stress the clients' needs in order to define case management; however, the satisfaction of these needs through the proposed intervention is evaluated as a function of efficiency and effectiveness, indicators that are specific to management. In this definition, case management is also viewed as a form of *network intervention*, thus supporting the functions of *network resource management* and of *facilitating* access to these resources. Rubin (1987: 212-222) places the roots of case management “at the level of vocational rehabilitation, public health and social work, as a complex strategy for the integration of the services provided to the client. Beyond the diversity of the definitions given to case management, definitions influenced by experimented and theorised models, there is still much confusion and poor standardisation. Each provider of social services has adapted the form of case management according to the needs of the client, to the available resources and to the specific categories of potential clients. The definitions given to case management depend on the variations generated by its design, by the way intervention and its coordination are viewed, by the involvement of clients, by the clients' responses to the changes in their situation and by the models being promoted in the practice of social work. Case management in social work bridges the gap between the micro- and the macro-practice of social work, being an essential component in the management of care and assistance, and various definitions have assimilated it with notions from therapeutic intervention to the coordination of community resources. Going beyond the diversity of the types of clients, the structure of case management is similar for various categories of clients, but the activities on offer are adapted to the features of each category: initial assessment, intervention planning, monitoring, evaluation of results etc. In the same direction, it could be said that the intervention techniques of case management can be transferred to other professional categories as well, to other domains of intervention. The forms of case management have been determined by various authors starting from their purpose: social, primary care and medical-social (Loomis, 1998: 219-225).



Case management is also seen as “a method of intervention in order to provide services to clients who need long-term care” (Rothman, 1991: 520), starting chiefly from the medical model of care. The theoretical foundations of case management allow it to be used for various categories of vulnerable and disadvantaged population. There are no categories that cannot receive services that are adapted to the method of case management. Bearing in mind service providers have to adapt constantly to social reality, they are forced to permanently change the approach to issues and to work together with the clients and to use the method of case management, which is “possibly the best technology for helping organisations meet the demand of modern services coming from the clients... it is also the most operative strategy for empowering clients to negotiate for the complex development of the service system” (Moore, 1992: 421). From Rothman’s perspective, case management includes two essential functions (1991: 520): a) individual counselling, the provision of advice and of therapy to the clients in the community, and b) connecting the clients to the network of community services provided by governmental and non-governmental organisations. From this point of view, case management has a complex character, micro and macro social, as a form of individual intervention, but also as a community intervention, which requires resources in order to be applied: “case management is viable only to the extent to which community resources are available for sustaining a standard of living that is acceptable for the clients. Without financial resources and support services, case management can become the projection of the case manager’s illusion, turning, in time, into a pressure on politicians and community leaders to meet the needs of community members” (Rothman, 1991: 521). Case management was also designed as a “process of facilitating services for clients, through which results are obtained” (Perlman *et al.*, 1985), a process through which clients receive services that are adapted to their needs and improve their living standards. Case management is “a creative and collaborative process requiring skills for performing evaluation, counselling, education, modelling and advocacy, the purpose of which is to develop the optimal operation in society of the client” (Sullivan *et al.*, 1992: 198).

In order to illustrate the differences in terms of case management, we believe that a good starting point is the SWOT analysis – the analysis of *strengths*, *weaknesses*, *opportunities* and *threats*. This method is used in social work in order to analyse the situation of the client system, being a starting point in establishing a set of interventions.



Figure 1. *Types of case management in term of SWOT analysis*

If case management focuses primarily on the distribution and management of existing resources at client level and on obtaining new resources from social services or from the social networks the client belongs to, we are dealing with *resource-centred case management*. Attention given chiefly to the objectives and the results of the proposed intervention are the hallmarks of *results-centred case management*. In this situation, the social worker's interventions are oriented towards identifying opportunities and using them, as well as towards decreasing threats, of existing or potential barriers that may be in the way of obtaining the desired results. Approaching the client's situation from the perspective of the "deficiency paradigm" by taking in to account mainly the weaknesses, the dysfunctionalities and the threats steer the social worker towards *problem-centred case management*. Analysing the problem means identifying the weaknesses in the client's particular situation and in the environment the client operates in, as well as the obstacles the client encounters when trying to solve his/her problem. Relinquishing this vision of an intervention at the level of dysfunctionalities, and turning towards the strengths of the client system, towards opportunities, steers us towards *appreciative case management*. This typology of case management features simple and easily applicable differentiation criteria, which can help orient the social worker in his/her intervention. In practice we may see combinations of these forms, and the social worker's initiative, experience and creativity in case works also influence the specificity of the type of case management used. In practice, the most common form of case management is that focussing on the problem, with variations of the manner in which it stresses resources or results. In the following we shall try to describe in more detail these forms of case management, bringing to the attention of practitioners a few specific traits for each of them.

### *Resource-centred case management*

*Resource-centred case management* places great accent on the management of resources, focussing on the efforts needed in order to achieve objectives, on financial costs and on the time required for an effective intervention. When using social services, the potential client pays a great deal of attention to the lack of resources, and his/her request for assistance is aimed precisely at attracting new resources needed for the satisfaction of a need. The social worker who manages the case starts specifically from this request when assessing the client's initial situation, that is from a reality identified by the client, and this is the starting point of a social intervention which, inadvertently, conditions the social worker to think in terms of resources. In order to respond to the request through which the client aims to obtain more resources, the social worker has to make, together with the client, an inventory of existing resources and then to establish jointly an objective, according to existing, potential and required resources. Case management becomes a form of resource management, and the social worker tries to respond to the request for assistance coming from the client by identifying new resources, because it is resources that determine and condition the evolution of his/her client's situation.

### *Results-centred case management*

*Results-centred case management* starts, first of all, from the analysis of opportunities and threats, from the perspective of objectives that have been set in order to solve the client's problem. In this case, interventions focus on expected and desired results through the establishment of measurable objectives and through monitoring their achievement through the use of available resources. This type of case management starts from the idea that each client has resources, but does not use them because he/she is not aware of their existence. Through the intervention of the social worker, the client is helped to distribute the resources he/she has and to manage them according to the objectives agreed jointly in order to change his/her situation in the desired direction; the client is motivated by the achievement of the objective, and this objective determines changes in the client's behaviour through an imaginary projection into a desirable situation. In order to make monitoring possible, the expected results must be measurable quantitatively and qualitatively, and the monitoring of the effects the case manager's interventions is carried out through indicators that operationalise objectives; thus, the social worker can use a system for measuring indicators and social practice. The indicators are designed in such a way as to measure both *implementation results* and *impact results*; implementation indicators measure the way the proposed activities are carried out, while impact indicators measure the results the intervention has on the client's situation; in other words, the former quantify *what is being done and how it is being done*, and the latter quantify *what changes in the client's situation*. In order to obtain viable results, the case manager must establish intermediate terms

for measuring them and deadlines for activities, be they performed by himself/herself or by the client. In results-centred case management it is necessary to set short deadlines, by operationalising activities into stages, the completion of which lead to implementation results. During the work on the case, the social worker takes accurate measurements by using quantitative and qualitative indicators, thus being able to provide the client with feedback concerning his/her contribution towards obtaining the desired results; meaningful results are obtained only when the measurements are taken frequently and the client is informed about the results, because otherwise he/she may not be aware of the progress. The monitoring of intervention and results help the social worker clarify certain aspects related to his/her activity, because, as a rule, in results-centred case management *we achieve what we measure* or *we build what we are going to measure*. Measuring the established indicators is not equivalent to research at the level of the cases the social worker is working on, being instead a form of control and verification of the results of each case. Focussing on results is effective when the case manager establishes way of rewarding the client according to his/her results, when the results obtained by the client are appreciated enough in order to maintain his/her level of motivation in following the action plan, and when the social worker maintains a high degree of involvement and of interest on the part of the client by regularly informing him/her about the results obtained. Each results evaluation report that the case manager writes includes previous results; thus, the social worker builds a history of the changes that have occurred in the client's situation, useful both in the supervision process and in the process of case analysis.

### *Problem-centred case management*

*Problem-centred case management* uses the deficiency paradigm and starts analysing the case from the weaknesses, from the problems faced by the client and the obstacles he/she faces in solving them. Despite the fact that practitioners talk about solution-oriented forms of intervention, these also are designed in the sphere of providing a solution to the problem by understanding the dysfunctionalities; due to the fact that it starts from the analysis of a problem, the dysfunction-centred approach aims to diminish or to cancel the *causes* that have generated it or to reduce the *effects* it has on the client; most often, he dysfunction causes can no longer be removed, and the only viable intervention is the one that aims to diminish the effects generated by that particular problem. The solution thus identified becomes thus a framework for reference and for analysing the client's situation, conditioning the development of an action plan that uses the client's existing and potential resources. Having become a prisoner of the problem-centred approach, the case manager responds to the requests made by the clients in the same logic; there are problems we must solve; while experimenting appreciative supervision, as described earlier, we were able to notice that this type of management is less effective compared to the appreciative type. The main purpose of problem-centred

case management is the social reintegration of marginalised individuals and the improvement of the living standards of disadvantaged individuals.

### *Appreciative case management*

*Appreciative case management* starts from the idea that each individual who uses social services has strengths and is capable of exploiting the opportunities he/she encounters. The appreciative perspective focuses mainly on reducing social vulnerability by changing the reference frameworks the clients have and by changing these clients' perspective in approaching reality. Some studies based on quantitative methods point to the benefits of a *strengths-based intervention* in case management for drug dependent individuals. A study coordinated by Siegal (apud. Rothman, 1991) analysed the results of appreciative case management applied to 632 drug-dependant subjects; the statistical data analysis shows that one third of the individuals included in the study had stopped using drugs. Appreciative case management capitalises firstly the resources the client and his/her environment have available, because case management proposes a change in the client's situation through interventions at individual level as well as at the level of the system or of the context the client operates in.

The data we have collected prove that in supervision there is a parallel process of transfer and counter-transfer taking place from the supervised to the supervisor and vice versa, eventually finding its way into the social worker's manner of working with his/her client. The stages of appreciative case management and the way it influenced by the intervention style:

*The knowledge stage* – the stage where the social worker and the client get to know each other, where the social worker encourages the client to discover *the positive events* in his/her personal history in relation to the issue he/she is asking assistance. The social worker's questions to the client may be of this type: *What do you appreciate most about your family? What successes have you had in the past? How do you explain these successes? Who else contributed to this success? What were your successes in a similar situation? When have you felt best in the relationship with your husband? What is the most important thing you have contributed to solving a similar problem in the past? What is the most important thing your family has contributed to changing your situation? Which of your qualities have you used in order to change your situation?* A number of these questions are borrowed from the practice of social workers who were supervised appreciatively during the experiment presented earlier.

*The vision stage* – the stage in which the social worker assists the client in building a positive vision starting from past successes. The vision is expressed in the form of “challenging phrases” stated in the present tense. In the cases that were supervised appreciatively in our research we have identified several phrases of this kind: *I know well my situation and resources, and I cope with my situation; I appreciate the support received from my family in keeping the child with me; I*

*rely on the cooperation with the social worker in order to change the situation; My family wishes we stay together in harmony; I shall always recognise the efforts my family makes to help me; I am the individual most interested in changing my own situation* etc. At this stage, it is very important that, after the vision is established, the client reaches this stage, of forming challenging phrases; the absence of these phrases prevents the reaching of desired results, due to the lack of mobilisation on the part of the client.

*The programming stage* – the stage of establishing the specific plans needed in order for the vision to become reality. These plans are built by the client or by the client in cooperation with those around him/her. The social worker's questions were as follows: *What can we do to help X cope with his/her situation? What do we do to make this client appreciate the support he/she is getting from the others? What can we do to make X interested in his/her situation? What must be done so that the family wants to help X? What can the family do so that the client knows it appreciates him/her?* etc. The existing documentation for the cases that were supervised appreciatively identifies these types of questions, which have been used in working directly with the client. The documentation of meetings and the visit reports illustrate this approach used by the social worker in relation with the clients.

*The action stage* – the stage in which the plan established in cooperation with the social worker and with the client's reference individuals is applied. An outline of the plan may look as follows: *a) The social worker meets with the client bi-monthly and actively encourages the client to discover his/her own resources and successes; b) The client meets with his/her relatives and discusses his/her successes so far, the client is open to his/her relatives' successes and encourages them in their undertakings; c) The client appreciates his/her own experience and the experience of those around him/her and lets them know when he/she has a success; d) The client appreciates the successes of his family members and acknowledges before them these successes; e) The client builds in his/her own environment a vision of what he/she desires for himself/herself and drafts an action plan* etc. This plan follows both the client's actions and those of the social worker for the case.

Going through all these stages we have noticed significant differences between the cases that had been managed appreciatively and those that had been centred on the problem. It was shown that the type of supervision used influences the style of case management used by the social worker. The appreciative approach of the case has yielded better results than the approach centred on the problem and its resolution.

## Methodology

### *Experimenting appreciative case management*

We have include here the presentation of an experiment carried out on a six-month period, during which time we verified the results obtained by applying two different supervision models, problem-oriented supervision and appreciative supervision. Based on parallel process, the case management was changed. For this experiment we identified ten cases with various degrees of risk in child abandonment. We first applied the *Assessment Grid for Child Abandonment Risk* and, depending on the score, five pairs of social cases were determined (*Table 1*).

During the six months of the experiment, each pair of cases was managed by a social worker. The cases were selected from the social workers' list of active cases. In this period case management was provided to the five social workers managing the ten cases included in work. Each social worker had one case that was supervised in the conventional manner and one case that was supervised appreciatively, but none of the social workers were informed about this. The idea was to check whether appreciative supervision has any influence on the effectiveness of case management and to what extent it can be applied (Cojocaru, 2010). In pairing the cases, the main criterion was the similitude of the situations, quantified through the risk assessment grid, and the goal was to experiment this form of intervention management.

In order to check the way the situations of the ten clients had evolved, the assessment grid for child abandonment risk (the same instrument used originally) was applied every three months. The application of the same instrument at different moments and to all clients was a strong basis for the objective evaluation of the modifications that had occurred throughout the experiment.

## Results

Economic deprivations and other causes that limit opportunities can be overcome when the social worker proposes an appreciative intervention, by identifying and assessing the way problems were solved in the past, and the resources available for overcoming the current situation. The past is no longer seen as a sum of failures, problems and tragedies, but instead as a wide range of solutions found for overcoming the former at those particular moments. The appreciative intervention perspective, based on the client's strengths (Bunea, 2008), refuses to identify clients with their shortcomings, failures or pathological situations (Gugeanu, 2008). Every situation is rethought from the perspective of its positive aspects and of the client's potential. "The strengths perspective forces the social workers to understand that individuals in a *crisis situation* survive and even thrive. They often cope by using their own resources, which they identify during critical

times [without requiring specialised intervention, A/N]. We must find out what they did, how they did it, what they learned from the difficult experience and what resources were used in order to overcome their troubles. People always act towards solving their own situations, even though oftentimes they merely decide to remain resigned in that particular situation. In our position as practitioners in the social domain we must approach this situation, clarify it and build solutions, starting from these possibilities” (Saleebey, 1992:171-172). From the point of view of the *appreciative intervention*, the individuals, families and communities professionals work for are *experts* in the problems they face, because they live the situation and they understand it best, and this is an important resource for solving the problems. The *appreciative perspective* turns the professional from a *lead actor* into a resource made available to the clients, the latter becoming the protagonists. The practitioners are trained to see clients as intelligent human beings, using their strengths and resources in order to overcome difficult situations and to increase their chances to improve their own situation; thus, part of the intervention aims to transfer competences from the specialist to the client or to other actors in the proximity of the client (e.g. the family). “Starting with what the client is” (Saleebey, 1994:353) is an imperative that shifts the weight of the intervention from the client’s problems to *what the client does* and *what the client is capable of doing* in his/her situation. When the client calls on the social worker, the first thing he/she presents is the “vulnerable perspective”, expecting the social worker to empathise with him/her, with his/her troubles and suffering, to understand and share the suffering. “Identifying strengths is not relevant to the client in the first meetings, and a premature focus on strengths may be interpreted by the client as a lack of understanding and even as denial [of support] on the part of the social worker” (Mc Quaide and Ehrenreich, 1997: 209). Some authors favour guiding the clients in identifying their own strengths; the *appreciative intervention* and the *appreciative case management* do not ignore the problems faced by the client. However, the strengths perspective emphasizes the fact that we should not neglect the mechanisms used by the client in solving his/her problems and difficulties (Espedal, 2008; Fernando, 2010). The differences between the problem-based intervention and the appreciative intervention (built on strengths and on an appreciative interpretation of situations) can also be seen in the different manner in which the *classic case management* and the *appreciative case management*.

As it can be seen in *Table 1*, after six months of intervention a drop in the level of abandonment risk was recorded in all the clients of the prevention service included in the study, irrespective of the type of supervision used. The evolution of the degree of abandonment risk for the five pairs of clients was different according to the type of supervision; the cases that were supervised appreciatively showed a more pronounced drop compared to the cases that were supervised according to the conventional method, despite the fact that the cases that were supervised appreciatively initially had a higher risk of abandonment.



Table 1. Evolution of level of abandonment risk within the studied group

Case pair Case number	1		2		3		4		5	
	case 1	case 2	case 3	case 4	case 5	case 6	case 7	case 8	case 9	case 10
Initial assessment	438	459	812	826	765	778	652	671	553	562
Assessment after 3 months	430	426	790	781	761	759	683	664	553	549
Difference at 3 months from intervention start	-8	-33	-22	-45	-4	-19	31	-7	0	-13
Assessment after 6 months from the initial assessment	416	362	645	516	683	520	601	412	519	396
Difference at 6 months from intervention start	-22	-97	-167	-310	-82	-258	-51	-259	-34	-166
Case management type	PCM*	ACM**	PCM	ACM	PCM	ACM	PCM	ACM	PCM	ACM

Notes: \* PCM- Problem-centred Case Management; \*\* ACM- Appreciative Case Management

The Table 1 shows that after three months from the start of the intervention, differences in the decrease of the degree of child abandonment risk (measurable through the score resulting from the application of the grid) appeared between the two categories of cases that were supervised differently; the higher the score, the higher the risk of child abandonment. For example, for case pair no. 3, the case the was supervised classically (case no. 5) showed a drop in the risk degree of four points compared to the initial score, while the case that was supervised appreciatively (case no. 6) showed a sharper drop in the risk degree (the value on the applied grid dropped by 19 points).

In order to assess the differences recorded in all the studied clients, we calculated the averages of the differences in risk degree at three months and at six months from the start of the intervention. It can be noticed that in the case of *classical supervision*, at three months since the start of the intervention, for the beneficiaries included in this type of case management (cases 1, 3, 5, 7 and 9), the intervention had almost no effect (the average decrease in the degree of abandonment risk is 0.6, which is practically a null result); the score average of the classically managed cases in the initial evaluation was 644.

The cases that were *managed appreciatively* (2, 4, 6, 8 and 10) showed an average decrease of the risk degree of 23.4 points at three months since the start of the intervention. Initially, the score average for the degree of abandonment risk in the cases supervised appreciatively was 659.2.

The average decrease of the risk degree after six months is lower for the cases that were managed centred on problem (the average is 71.2 points) than for the cases that were managed appreciatively (the average is 218 points); however, the risk degree for the cases that were managed appreciatively dropped three times more than the risk degree of the cases that were managed based on problem.

## Discussion

As it can be seen in *Figure 1*, after six months of intervention a drop in the level of abandonment risk was recorded in all the clients of the prevention service included in the study, irrespective of the type of supervision used. The evolution of the degree of abandonment risk for the five pairs of clients was different according to the type of supervision; the cases that were supervised appreciatively showed a more pronounced drop compared to the cases that were supervised according to the conventional method, despite the fact that the cases that were supervised appreciatively initially had a higher risk of abandonment.

The figure shows that after three months from the start of the intervention, differences in the decrease of the degree of child abandonment risk (measurable through the score resulting from the application of the grid) appeared between the two categories of cases that were supervised differently; the higher the score, the higher the risk of child abandonment. For example, for case pair no. 3, the case that was *supervised classically* (case no. 5) showed a drop in the risk degree of four points compared to the initial score, while the case that was *supervised appreciatively* (case no. 6) showed a sharper drop in the risk degree (the value on the applied grid dropped by 19 points).

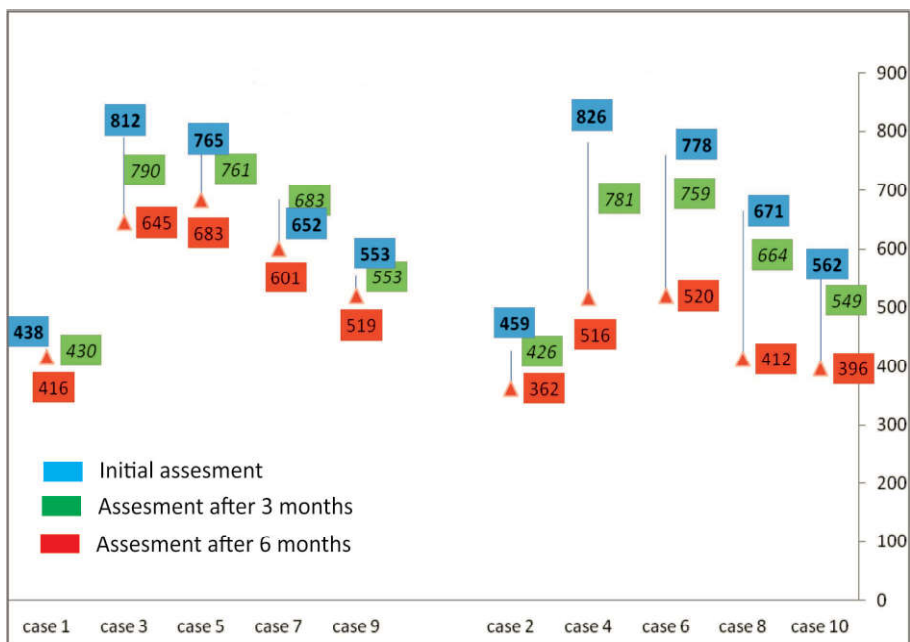


Figure 2. Evolution of level of abandonment risk within the studied group

Figure 2 shows that the score average for risk degree dropped after six months of intervention in all cases, irrespective of the type of supervision used; in the case of the appreciative supervision, however, the drop is more noticeable; although the initial score average of the cases that were supervised appreciatively had been higher (659.2 points) compared to the score average of the cases that were supervised classically (644 points), the appreciative supervision is more effective; the final score average for the two groups of five cases was significantly lower in the case of appreciative supervision (441.2 points) compared to the five cases where problem-centred supervision was applied (572.8 point). The documents that accompany the case files show that the style of case management for the cases that were supervised appreciatively had changed; case management reproduced the way the supervised social worker was approached by the supervisor in the social worker's relationship with the client; without being explicitly aware of this fact, the social worker followed the steps of appreciative case management.

## Conclusion

The requirements for case management create conditions for improving the quality of the services provided by various social work/social assistance institutions and for their permanent adaptation to the existing needs and demands.

From the point of view of the macro-practice in social work, case management is a personalised focus on the client and an important starting point for the development of integrated services for various categories of vulnerable and disadvantaged categories of population, considered more effective and less costly. The models shown above are an attempt at classification based on theoretical documentation and on the practical experience of promoting new models of action able to develop institutional and personal capacities for responding to the situations social workers face in their professional practice. The principles of appreciative inquiry can be adapted and used in the process of case management. The experiment demonstrates the usefulness and effectiveness of appreciative case management by comparison to the problem-centred case management.

When the appreciative case management was applied, the studied cases showed better results compared to the cases that were managed based on problem; in our opinion, this shows that appreciative case management is more effective. The supervision model used for coordinating, supporting and training social workers directs case management and its results. The documents concerning the social worker's intervention, present in each case file, show essential modifications in terms of case approach; the meeting, visit and counselling reports reveal elements of appreciative intervention, noticeable in the way the clients' situations were approached and in the language used by the social worker when writing the documents.

The parallel process in supervision can be directed by the supervisor towards the social worker's and the client's actions. This process does not influence just the supervised social worker, but also, through diffusion, the client's situation. Awareness of this process in supervision helps the supervisor orient the social worker's actions and results in his/her direct work with the client.

The results of the social services offered by organisations also depend on the style of supervision being used. Supervision allows the improvement of social intervention, and implicitly of the quality of services. The lack of professional supervision inevitably results in a random and sometimes confused practice. In the case of services aimed at preventing child abandonment, it can be seen that the classical intervention, lasting less than three months, has no positive effect on the clients' situation. This practically means that in such circumstances, the financial, human and material resources used for an intervention that lasts less than three months are wasted without significant results.

The classical intervention produces real results in the situation of the beneficiaries who use the services for the prevention of child abandonment after six months from the start of the intervention; this means that any intervention project aimed at preventing child abandonment and institutionalisation should be planned for at least six months. The appreciative case management produces tangible results after a shorter period of time by comparison to the classical intervention. This can be seen in the results obtained within the experiment, which are due to the use

of the appreciative approach in intervention. Therefore, in order to have effective interventions, we must plan for at least six months in a problem-centred approach of the case (and of the supervision), and for a minimum of three months in the appreciative approach of the same case.

### *Recommendations*

In order to change the results in social intervention, it is important to move from a problem-centred approach to an appreciative perspective. The attitude and the implicit definitions of the situations (often centred on the paradigm of the deficiency) guide the way in which the social interventions are carried out, the way in which the situations of the clients and the expectations towards them and towards the professionals are treated. Often, just changing the definition of the situation leads to changing the situation itself, especially if it is about human interactions. The experiment presents us with the potential of the appreciative perspective and the theory of social constructionism in social practices.

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