

## Comparative study of social welfare education in U.S.A. and in Japan. —— Focusing on common and different points ——

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**Preface:** Japan Social Welfare Educational Seminar ( joint meeting of 33<sup>rd</sup> Annual Meeting of Japanese Association of Social Work and 2<sup>nd</sup> Annual Meeting of Japanese Association of Schools of Certified Social Worker) was held on September 20<sup>th</sup> and 21<sup>st</sup>, 2003 at Toki Messe, Niigata, City followed by the U.S.-Japan Social Welfare Education Symposium on the 22<sup>nd</sup> at Niigata University of Health and Welfare. The author made a contribution in preparation and management of both this seminar and the symposium at the university as the organizing committee chairman. Here, I would like to make a report on the history of the professional associations, academic associations and school associations concerned with the training, qualification, placement and life long study of social workers. Also, I intend to compare the current status of social welfare in the U.S. and Japan based on Professor F.R.Baskind's special speech "Social work education in the United States: Factors that influence the educational preparation of future practitioners<sup>1)</sup>" and presentations in the symposium, especially Professor Kozo Iwasaki's lecture "Comparative studies on social welfare education of U.S. and Japan<sup>2)</sup> to review the problems in education and studies of social welfare education in this country. After focusing on these subjects, I will present the themes of study and education.

### **I. Comparison of overall features of social welfare education: U.S. and Japan.**

There are many comparative studies and their results, carried out by social welfare scientists<sup>3)</sup>. It is obvious from these that education, research and the practice of social work are evolving as the politics, economy and social conditions surrounding social welfare in both U.S. and Japan are changing rapidly. The most recent advancement can be seen in the reports at the symposium mentioned above. Among those, Professor K. Iwasaki's lecture was rich in organized content of years of data on social work education and the practice derived from international exchanges, and provided vast amount of information. Due to the politics, economy, social structure and culture differences between the U.S. and Japan, there are many dissimilarities in social welfare education. Nevertheless, the diversification in industrialization, information technology, democracy, more aged people and fewer youth are all common social changes and the development of social and daily life lead to diversification of needs of social welfare and needs for professional social work. Both nations are trying to improve their organizations, universities and graduate schools for professional social worker in quality and quantity. Professor Iwasaki has summarized his comparative studies in Table 1, and can be described as follows: (1) The general structure of social work education in Japan can be separated into four steps: 2 year college, special school, 4 year college and university for bachelor's degree, master

course and doctoral course, and all of these are under the supervision of the government in Japan, while in the U.S. it is divided into 3 steps; bachelor course, master course and doctor course and they are under the regulation of their professional organization. (2) Establishment of educational institutions for social work in Japan are under the control of two governmental offices, the Ministry of Education, Culture, Sports and Science, concerning the standard for university and college, and the Ministry of Health and Labor, concerning training standard (qualification to take the national board examination) for social workers, psychiatric social workers, certified workers and child care workers. In U.S., an accreditation by professional societies is in effect. (3) Social work education is mostly carried out through bachelor's courses but 45% of teaching units have 200 or more students and only 8% of them have less than 50, in Japan. In U.S. 83% of units have less than 50 bachelor course students and 51%, 27% and 22% carry less than 50, 50 to 100 and 101 or above master course graduate students, respectively. (4) Most social worker training schools are private and the number of public schools is gradually increasing from 11% to 14% in Japan. While in U.S. 313 schools have a bachelor program, 139 have master's program and 107 schools have both bachelor and masters courses. The ratio of public schools to private ones is about 50 : 50 but the number of private ones is increasing.

Both Japan and U.S. are promoting the training of social workers as a professional job both in quantity and quality, however, it is obvious that Japan is behind of U.S. in the expansion of masters training, education in small classes and financial support from governmental organizations. Social welfare educators and researchers are trying to improve Japanese society, learning the past experience of U.S. social work.

## **II. Effect of social changes and reaction to it on interaction of policy and practice.**

Professor Baskind mentioned in his special lecture that an understanding of the effect of political culture over our profession and social workers services for the community is indispensable for the most effective practice of student education in the real world. He analyzed the related effects of "three D's, deficits, devolution and deprofessionalization, in detail, followed by noting that we need all our strength, advocacy and partnership against them. He explained a method to carry out these, in concretely. In Japan, similar changes to the 3 Ds in the U.S. are being promoted by the Koizumi cabinet under the name of restructuring. Due to of their negligence concerning the distribution of social workers, policy is against us in asking for the proper distribution of social workers, and a standard of social worker distribution<sup>4)</sup>. The following parts of his lecture has encouraged author most.

"We must draw from our profession's strengths---The Power of Social Work, as the National Association of Social Workers encourages us. These strengths lie in the diversity of our practice; our commitment to social and economic justice and working with underserved populations; our commitment to self-evaluation and research; and our adherence to a strong code of ethics. As educators, we need to analyze these trends in social policy courses; to develop field placements in new and alternative settings; to conduct research and evaluation to demonstrate the strengths and limitations of existing and proposed programs; and to advocate for humane and effective policies, especially for socially and economically oppressed communities."

"During last year's opening plenary session of the Council on Social Work Education Annual Program Meeting, Bob Schneider, founder of the advocacy group Influenceing State Policy, led the audience in an apt refrain", "Policy affects practice, practice affects policy". "We must con-

tinue to take their message to heart by showing others that the continuum of social work practice lies in our engagement with the forces that affect our clients and that affect ourselves. This begins with strengthening students' ability to think critically, to be able to gather information from a range of sources and to evaluate it with sharp judgment".

The very important part in Professor Baskind's lecture cited above is the concept of a continuum of social work practice. In Japan, the concept of contradicting so separating the policy and technique of social work has been a major one. A typical concept like this is called *kōhashi* theory<sup>5)</sup>. He has mentioned from his stand point of Marxist social science that social work is one of the policies produced from contradictions in capitalism and the practice of it and it operates under the name of social welfare (simultaneously, researchers use this words with rationalization). His study was critical to social welfare policy. He published many books and was influential to students. They were working with socialism as an ideal. He gives his answer to social workers who were disturbed by the discrepancy between idea and practice, by saying that the proper direction and aptitude of socialistic social workers is how to make a contribution to protégé(e) and labor, namely to public use of the capitalistic social welfare. His social aim is the political revolution of capitalism to socialism for the sake of the realization of his objective and that social work is one of methods to be used. He negatively evaluates social action, emphasizing that it is just a technical side of the social reform movement. Meanwhile *kōkashi's* policy critic has that dogmatic Marxism should be replaced by a Marxist social welfare theory. One of the representatives, Sanada, explains the 3 dimensional structure of social welfare from "social problems and daily life problems as the subject of social welfare" induced by a "postwar reform of social welfare", "spontaneous demands of and movement of working peo-

ple" and "capitalistic state=policy maker which produce it's own management of social problem even under the influence of these two mentioned above" <sup>6)</sup>. Such new Marxist social welfare theory says that to expand the social welfare policy, it is most important to strengthen the influence to capitalistic state=subject of policy for the demands and movement by working people. Thus, it is called a "social movemet" theory and forms the leading theory for social democratic and communist movement. However, this theory does not define the social worker as profession. This lacks the recognition of practice and policy as a connecting unit but still continues the separation of practice and policy.

I think that the formation of a connecting body of practice and policy in social work becomes possible only after the promotion of practical research of social action and advocacy, through collaboration of practitioner and researcher. This is based on my experience of social action to establish the qualification standards of social workers who have joined in the Japanese Association of Sosial Workers in Health Services<sup>7)</sup>.

### **III. Social action for the qualification system of social workers in health services .**

A trial to introduce social work into hospitals began earlier the the Second World War, under the influence of the U.K. and the U.S. but as hostilities became more sever, this action stopped. After the war, it was revitalized according to the occupation policy of G.H.Q. Policy stated that every health center, hospital and medical institution must have a social worker and promoted their knowledge and techniques as specialists. As a result, the number of social workers was gradually increased. However, after the end of the occupation in 1952 and the Korean war, as the financial situation of the state and local governments became critical, social welfare policy deteriorated and a reduction in the number of social workers was begun. Social workers who

worried about such a situation established the Japanese Association of Social Workers in Health Sciences, the first social workers' professional association, and continued their efforts to fix and expand the social work service in health and medical organizations up to today<sup>8)</sup>.

The prospectus of the Japanese Association of Social Workers in Health Sciences notes that the ignored social standing of workers is the source of many difficulties. They carried out effort improve their social status from the establishment of the association in 1953 to 1970, however, they failed to establish a law for social work and the association nearly disorganized. A reconstruction of the association was started by its president, Ms. Mitsuko Kojima and board members, elected in 1973, for the recognition of medical social workers in the health service and the establishment of them, and they decided to carry out a signature-collecting campaign. However, they failed to decide a direction and to start the campaign. President Kojima has asked me (we are research collaborators at the Tokyo Metropolitan Institute for Neuroscience) to help her. I started a working group, a committee for status in the Association, and became the chairman, to collect the necessary documents and request an approval from the committee and all members of the appeal sentence and items described later. Those were sent to upper and lower house of members of the Diet asking them to cooperate with this movement<sup>9)</sup>.

Chairman of Lower House Mr. Shigeru Hori  
Chairman of Upper House Mr. Yuzuru Yasui

Date, 1977

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Petition requesting the institutionalization of  
qualifications of medical social workers  
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#### Object of petition

The work that social workers carry out is to help patients of tuberculosis, children with chronic diseases, old people confined in bed, psychiatric patients, patients with intractable diseases, patients by environmental pollution, patients with job related diseases, physically and mentally disabled patients and patients with serious and complex diseases, in hospitals, health center and welfare institutions, and their families, and to solve their problem in the treatment process and in daily life.

Such patients and their families face problems like "how to manage the hospital and medical expenses", "how to take care of the daily life of the family", "maintaining jobs?", "returning to normal social activity?", and so on. These problems are difficult for patients and their families to solve alone.

Medical social workers consult with patients and their families about such problems and make recommendation like a self help group activity and take action in the local society, using their professional knowledge and skills.

Such activities of social workers are indispensable for present-day health care. Due to this need, the number of social worker in various organizations and institutions in health, medicine and welfare is increasing. However, social workers are absent in many organizations and even the existing number is less than enough. (For example, only 200 social workers are distributed to 800 health centers in all of Japan).

It is difficult to recognize this as a satisfactory

health welfare system responding to the demands of those patients and their families. The basic reasons for a lack of distribution of medical social workers to where they are needed are the following: First, a lack of a system for qualification and basic distribution of medical social workers. Second, a lack of financial support for the appointed medical social workers (not being recognized for their contribution forward medical treatment and an absence of financial support from the national government).

The Japanese Association of Social Workers in Wealth Services has worked for the expansion of medical social work and given its' efforts to raise the skill level of medical social workers for 20 years after its' establishment but we now recognize that it is time to make this appeal for the institutionalization of medical social work and the establishment of a financial base.

We demand the realization of the following items based on your understanding of the above situation.

#### Items to appeal

1. Institutionalization of medical social work.
  - (1) Prepare a law to recognize the qualifications of social workers in health services.
  - (2) Establish a standard of distribution of social workers to every health, medical and welfare organization and institution.
  - (3) Instate the necessary measures for promotion of medical social work.
2. Secure financial support for the employment of social workers to every health, medical and welfare organization and institution.
  - (1) Support financially through budgeting.
  - (2) Make a standard for the values of social work in a point system and the tax reduction.
3. Establish a system for life long education and study of medical social workers.
  - (1) Build research and educational systems in

universities and graduate schools.

- (2) Arrange on-the job- training system for medical social workers.

Signed by: Japanese Association of Social Workers in Health Services.

As described above, our movement, backed up by theory of subjects and systematic arrangement of items in 1977, was joined by a majority of medical social workers and supported by clients, families and the general public as shown by their signatures. It was also supported by a labor committee of the upper house in 1978, after an understanding and acceptance of all items by the committee of social-labor, followed by acceptance of a social-labor committee of the lower house on section 1. Institutionalization of medical social work; (1) establishment of qualification standards and (2)making a standard for distribution, together with 1974 appeal items. Association President Kojima spent five years in the preparation of the appeal to both houses, while the theorization and systematization of policies brought success for appeal movement within less than 1 year. However, the development of social security and social welfare were difficult due to changes from higher economic growth to reduced growth in those days. The Japanese Ministry of Welfare and Labor was not keen about systematizing the qualification and distribution of medical social workers, and then only carried out a study for welfare science and used those results to prepare "direction for medical social worker's activity" for distribution into the society. And they didn't do any more than that<sup>10)</sup>.

The movement towards the institutionalization of qualification of social workers in health and medical services was carried out, not only by collective social action toward the government but also by independent preparation referring to "Standard for Social Workers in Health Care Set-

tings” a of The American Association of Social Workers. In 2003, “A Handbook of Social Worker Distribution for the Promotion of Social Work Service in Hospitals”<sup>12)</sup> was prepared and recommended as reference. Organizations to evaluate the function of medical service have incorporated the distribution of social workers as an item in hospital evaluation.

### **III. Cooperation between research associations, educational associations and professional associations.**

The most valuable portion for the sake of research and education in Japan, in Professor Baskind’s special lecture was the following:

“Several institutional and professional activities took place during the latter part of the 1990’s that positioned social work educators to prepare future practitioners. These include the Institute for the Advancement of Social Work Research (IASWR), the ANSWER coalition, Influencing State Policy, and CSWE’s Education Policy and Accreditation Standards (EPAS). The Institute for the Advancement of Social Work Research (IASWR) continued initiatives to connect policy, practice, and education through the advancement of social work research. IASWR played an important role in building the visibility of the profession in the national scientific community. Social workers are underrepresented as federally funded researchers. They are a key substantive resource to the Action Network for Social Work Education and Research (ANSWER) on the legislative effort to create a National Center for Social Work Research.”

Collaboration and cooperative activities between research associations, education associations and professional associations for social works are also developing in Japan.

The most advanced is research associations. Societies with joint membership are Japan Association of Social Welfare, Regional Welfare, Japanese Association for the Research on Care

and Welfare, Association for the Study of Social Work Practice and Theories for the Study Association of Medical Social Work and other various associations. The members in university and research institutions and practitioners are carrying out collaborative research and information exchange. They continue to prepare the conditions for research and education of social welfare together with the working environment for social workers trained as professionals, under the supervision from the welfare study group in the Social Welfare/Social Security Research Liaison Committee of the National Academy of Japan since 1990. The term of a National Academy member, and the Research Liaison Committee is 3 year and in the 16<sup>th</sup> (1994-1997) period, I served as a secretary together with Professor Kensaku Oohashi, under President Yuuichi Nakamura who also was the committee chairman of the Liaison Committee, and I prepared the report entitled “Expansion and Strengthening of Research in Social Welfare and Educational System.--- As one of the General Projects for Social Services Responding to an Advanced Ageing Society---,. Further, in 17<sup>th</sup> (1997-2000) term, I served with Professor Oohashi to prepare the report “Promotion of Research and Education in Social Service. These two reports have been presented to Japanese Government from the National Academy explaining the national policy of the academy, and policy for universities aiming to improve the studies and the education of social welfare and social work. There is no book yet that has incorporated the contents of this report<sup>13)</sup>.

During 18th term (2000-03), the proposal to build social system in which social work can participate has been presented as a study report under the Committee chairman, Kensaku Oohashi (member of the National Academy of Japan) and to make a contribution for development of the system concerning the appointment, distribution, training and life long training of social workers<sup>14)</sup>.

There are two groups representing training

schools of social workers currently and they are the Japanese Association of Schools of Social Work and the Japanese Association of Schools of Certified Social Worker. The former is a corporation of the Ministry of Science, Sports and Culture and the latter is an association under the Ministry of Health and Welfare. However, in the beginning, the Japanese Association of Schools of Social Work intended to make only one association under the direction of both Ministries. Due to of a deep discrepancy between them, the Ministry of Health and Welfare made the Japanese Association of Schools of Certified Social Worker and universities and graduate schools responsible for social work education formed the Japanese Association of Schools of Social Work under the Ministry of Science, Sports and Culture. Yet, many schools joined both association and worked together, for example, by organizing joint seminars and the representatives of each group are board member of the Division of Social Welfare of the National Academy and control research and education of social welfare science.

There are four current association in social work in Japan, namely, the Japanese Association of Social Workers, the Japanese Association of Certified Social Workers, the Japanese Association of Social Workers in Health Services, and the Japanese Association of Psychiatric Social Workers, but they have an adjustment unit and are associated with International Federation of Social Workers (IFSW) to keep a tie with the social workers of the world. In the United States, the social workers, grouped accordingly to the special field, made a union called the National Association of Social Workers (NASW), becoming independent professional association with self-sustaining activity. They keep a contact with CSWE to promote policy to develop social work research, education and practice and play a leadership role in the International Federation of Social Workers (IFSW).

### **Concluding comments---Our tasks.**

There are basic similarities between the U.S. and Japan but also many differences are evident. Such differences come not only from the historical and cultural condition of Japan, which is behind the U.S., but also from pressure from the central government which is still present traditionally. Associations of social workers and associations representing social work schools are separated from each other, under the control of the national government. They must obtain autonomy and establish mutual ties after recognition of such obstacles.

The 18<sup>th</sup> committee of Welfare of Japanese National Academy organized "the Association of Researchers for Social Care Service" by uniting the various groups of professionals, academic researchers, and teachers to start cooperative activity. Our common task is to develop our independent research, education and practice in social work by cooperation as we learn from the experience of the U.S.A..

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