

**UNIVERSITY OF SWAZILAND**  
**FACULTY OF SOCIAL SCIENCE**  
**DEPARTMENT OF SOCIOLOGY**  
**FINAL EXAMINATION, DECEMBER 2013**

**TITLE OF PAPER: SOCIAL WORK METHODS**

**COURSE CODE: SOC 308**

**TIME ALLOWED: TWO (2) HOURS**

**INSTRUCTIONS: ANSWER ONE (1) QUESTION FROM SECTION A  
AND TWO (2) QUESTIONS FROM SECTION B**

**ALL QUESTIONS CARRY EQUAL MARKS**

**TOTAL MARKS 100**

**THIS PAPER MUST NOT BE OPENED UNTIL PERMISSION HAS BEEN  
GIVEN BY THE INVIGILATOR**

## SECTION A COMPULSORY

### Question 1

Discuss the **principles** of community organization. Use examples to illustrate your answer.

### Question 2

**Burnout and self-care** in social work practice have been neglected. Explain and justify why these topics should be part of the social work training. Use concrete examples to support your views.

## SECTION B ANSWER TWO QUESTIONS FROM THIS SECTION

### Question 3

Albert Morgan is a dark skinned 63-year-old African American male who appears his stated age. He is a short, heavysset gentleman who uses a wooden cane for balance. With a gift for storytelling, he seemed comfortable and relaxed relating his experiences to two social work students. He maintained excellent eye contact, and presented with appropriate affect and an upbeat mood.

Mr. Morgan did not finish college. His drinking and marijuana use began to soar, becoming a chronic and daily habit. Despite these troubles Mr. Morgan managed to land a responsible job as a community organizer and job developer in one of the government funded War on Poverty programs during the late 1960's. Later he became a housing manager for HUD. In addition to earning promotions and a steady salary, he also made, a lucrative living by dealing drugs, and did so well at it that he was able to buy some rental income properties. Financially he was doing well, even afforded a Cadillac at one point, but his drug habit was growing and now included cocaine, Quaaludes and "other pharmaceuticals." He often operated automobiles when drunk, which resulted in a number of DWI arrests leading to some convictions.

His double life came to a crashing halt with a devastating car accident. While very drunk, he drove his Cadillac off a cliff into a lake. Miraculously he survived the crash, and rescuers used the Jaws of Life to extract his mangled body from the wreckage. He spent months in the hospital recovering from multiple fractures, including a badly shattered leg. (He still uses a cane when walking). Although he did not use alcohol or marijuana during this time, he did become addicted to Demerol, which he misused in an effort to alleviate his excruciating pain. Mr. Morgan believes that the pain and his permanently shortened leg were God's ways of showing him who is in charge, and he was humbled by the entire experience. He was able to remain abstinent for approximately 7 years. "It wasn't that I thought at that point that alcoholism itself was bad, just that [having survived the accident despite my bad behavior] "I made a decision not to mess with God right then."

He currently lives on Social Security in an SRO, following a period of homelessness. He has been sober for 2 1/2 years, participates in several recovery groups, lectures to teens on the dangers of drug use and does volunteer work for a service organization that helps recovering addicts. He has begun to reestablish a relationship with two of his children.

## **Questions**

1. Explain the factors that may have led to Mr. Morgan's addiction.
2. What additional information do you need from Mr. Morgan to do a biopsychosocial assessment?
3. Why after so long a period of addiction, might Mr. Morgan have entered recovery in his sixties? (Consider some life stage theories such as those of George Vaillant and Erik Erikson).
4. Mr. Morgan is currently in "the maintenance stage" of recovery (Stages of change paradigm). What elements of his life are still out of balance? What risk factors for relapse are still evident in his life? How might a social worker address these?
5. Discuss the difference between "relapse prevention" and "recovery enhancement." What interventions might aid in each?
6. What are the strengths and limitations of the Harm Reduction approach to substance abuse?
7. Discuss the role of spirituality in recovery as well as self-acceptance. How do these relate to the psychological tasks of aging? How might the role of spirituality play out differently in different ethnic groups?

### **Question 4**

Discuss the seven stages of **Crisis intervention** you would use when working with a suicidal teenager. Use examples to strengthen your arguments.

### **Question 5**

Discuss why we need school social workers. Support your views with concrete examples.

### **Question 6**

Discuss the HIV counseling and adherence paying attention on why it is essential for a counselor to understand this counseling procedure. Use examples to strengthen your responses.