**Report on the Sixth International Conference on Social Work in Health and Mental Health**

**Andy Mantell, University of Chichester**

**Contact**: A.Mantell@chi.ac.uk

The sixth international conference on social work in health and mental health was held in Dublin from 28tt June to 2nd July 2010. Its central theme was: ‘Changing health: Acting and reacting, challenges for social work theory and practice’. These issues were explored through plenary sessions, presentations, workshops and poster presentations grouped around six broad headings:

1. Service Settings
2. Client Groups
3. Health through the lifecycle
4. Promoting positive health
5. Involving service users in policy and practice
6. Education/training issues in health and mental health

The plenary sessions tended to focus on the macro policy issues concerning social work practice, for example, how we tackle global inequality and the challenges for social work of demonstrating and develop our knowledge base in a world concerned with evidence based practice. The presentations and poster displays, which ran concurrently, offered a smorgasbord of possibilities, with over 500 presentations alone. With such a wide choice each opportunity grasped also represented myriad opportunities lost.

Not surprisingly, I concentrated on the presentations concerned with ABI. From initially presenting at the fifth conference in Hong Kong, INSWABI has gone from strength to strength being represented in ten oral presentations, one poster presentation and being the focus of a whole day field trip, which included a satellite workshop and a comprehensive guided tour around the National Rehabilitation Hospital. This was followed by a wonderful meal hosted by Anne O’Loughlin, the Principle Social Work at the NRH. At this meal, representatives from the UK, Ireland, Canada, India and Australia presented brief accounts of social work practice in their countries (these accounts will be reproduced in the next INSWABI news letter).

My own presentation and workshop focused on an ongoing review of the literature from social workers on acquired brain injury. We have now identified 73 articles, chapters and books, far exceeding my expectations. Perhaps one of the most striking factors that emerged from this review and from the national presentations has been how social work is perceived and perceives itself in different countries. Whilst in the UK it is closely aligned with the social model, in the USA, Canada and Australia, practitioners consider themselves to be clinicians.

This was a conference of ideas providing insights into other ‘ways of doing’ and challenging the ‘taken for granted’. It left me with as many questions as possible solutions. In our aversion to the potential elitism of the expert, I wonder if we have allowed ourselves to become marginalised and our valuable roles discounted. The last plenary session included a call to arms from Professor Dziegielewski, for social work to lead the way in practice. It is not sufficient to do a good job, we must develop and share the knowledge base that demonstrates what we do and what we should do.

I would like to thank BISWG for their bursary which made my attendance, presentation and workshop at this conference possible.