UNIT 12  BLOCK 2 REVIEW
Prepared for the course team by Kathryn Woodward
Cover acknowledgements: illustrations and photographs reproduced courtesy of Colorsport (footballers), Illustrated London News (Lancashire pit-brow woman), Geoff Franklin/Network ('Young, Gay and Proud'), Maggie Murray/Format (childminders)
Contents

1 Introduction 4

2 The family and social problems 5
   2.1 The private and the public 7

3 The changing place of the family 7

4 The normal family 10

5 Biological essentialism and social constructionism 12

6 Block 2 questions 13

7 Course questions 14

8 Conclusion 15

Reference 15
Many of the issues that were discussed in Block 1, such as childbirth, childhood, adolescence and old age, can be seen as related to ‘the family’, which has been the focus of Block 2. This block has extended Block 1’s analysis of how matters of private or personal concern come to be seen as social problems, and how this affects levels of intervention in the solution of such problems. In Block 2 we have looked at the family in terms of gender roles, sexuality, employment and economics, in different forms of domestic living, and as it has changed over time.

As Unit 6 pointed out, the family has significance for us all. The majority of children are brought up in a family and, at a common-sense level, the family is a significant part of our experience of close, supportive, intense and often conflicting relationships. However, we do not spend all of our lives in a family, and it is by no means easy to define exactly what we mean by ‘the family’. Empirical evidence shows some diversity in the forms of domestic living in modern Britain. Although the majority of us will have some experience of the nuclear family for part of our lives, there are many other forms of household, such as people living alone, lesbian couples, gay couples, communal groups, as well as single parents and married couples with and without children. Arriving at a definition of the family is problematical, but we have had no difficulty employing the term, whether in considering our own experience, the diversity of households, or groupings commonly presented as ‘abnormal’. The family can be seen as a normative concept which does not so much describe what is the case as what ought to be the prevailing form of domestic living. This shows the need to consider the ideological impact of the family – for example, how we tend to measure the changes in lived experience within the family over time, in relation to an idealized norm of the family.

Block 2 has addressed themes which relate to the question of change as well as to questions of the normal which were covered in Block 1. Just as in Block 1 we saw how assumptions of dependency in childhood and old age meant they were seen as problems in contrast to the ‘norm’ of adulthood, so in Block 2 we have seen changes in social definitions of gender roles and sexuality and different forms of domestic living measured against the norm of the idealized family. This questioning of such ideological norms is an important element in the analysis of social problems.
In the Introduction to Block 2 we looked at links between the family and social problems and it was suggested that there were three ways in which the family is commonly linked to social problems. They were

1. the family can be seen as the cause of social problems,
2. the family can be seen as the solution to social problems,
3. the family can be seen as the target of social intervention

Taking these three areas in turn, from your study of Block 2 note down answers to the three questions below

Q 1 How has the family been seen as a cause of social problems?

Some of the ways which the block has shown this include social changes, such as the increased number of single-parent families and divorces. The block has also highlighted the ways in which such social changes have been defined and discussed, for example by different political parties, as having causal links with social problems, as in ideas of a 'crisis in the family' and a 'breakdown in family life'. Changing gender roles and a move away from the 'idealized norm' of male breadwinner, wife at home and dependent children can also be seen as the family – or more particularly working mothers – being the cause of social problems. Unit 9 explored some of the links between the family and the private sphere, and the public sphere of paid work. Sexuality can also be seen as problematic, especially moves away from a heterosexual norm, as Unit 8 showed in the context of homosexuality.

We have also seen how mothers have been blamed for the inadequacy of their care of children, thus requiring state intervention. For example, the 'discovery' of the poor physical condition of recruits for the Boer War contributed to the development of social interventions intended to promote the physical health of children.

Q 2 How has the family been seen as a solution to social problems?

This question is clearly linked to the other two questions, since solutions depend on how the problem is identified. The family has been seen as a 'natural' site for the provision of care of children and the elderly, and, within the family, mothers are seen as the 'natural' providers of care. This is implicit in many of the criticisms of working mothers and the way working women endeavour to work a 'double shift', performing a 'balancing act' to meet the demands of a job outside the home and of housework and caring for others inside the home. The history of health care in Britain and the role of health visitors as presented in Unit 11, together with the related television programme, illustrates very well the way the family can be seen as a solution to problems, with some expert assistance from the state or voluntary bodies.

For example, it was mothers who were the first target for reform in the movements for the remoralization of the poor in the nineteenth century. The family, and more particularly the mother in the family, was seen as providing remedies to the problems of the physical and moral deterioration of the working classes. Again in the case of the origins of health visiting, whichever theoretical perspective is adopted as an explanation, the site of the solution to problems, whether of disease, high infant mortality, or a 'decline in moral standards', is still seen as the family.

Unit 7 also addresses this question in showing how the family, and particularly familial ideology, features in the rhetoric and policies of the major British political parties, drawing distinctions between a consensus view which sees the family as an essentially harmonious whole and the alternative view where the family as a social...
group contains potentially conflicting interests. Traditional institutions, such as the churches, have continued to play a part in articulating family ideology, as discussed in Unit 10. Much of the recent (late 1980s) re-emphasis on a traditional familial ideology stresses marriage and monogamy as a solution to problems claimed to be associated with promiscuity, alternative sexual identities and the moral panic surrounding the spread of AIDS.

Q 3 How has the family been the target of social intervention?

We have seen several ways in which the family has been the target of social interventions intended to solve social problems, particularly in the state's implementation of certain social policies, such as welfare benefits. We have seen that the family has been identified as a 'private' solution, stressing choice and self-help with the welfare state playing a minimal residual role in Conservative Party policies, separating the private (family) and the public (state) spheres. This has also involved the transmission of particular values, as can be seen in the rhetoric about good housekeeping and self-help. The Labour Party has emphasized fuller partnership between the state and the family and the need for universal benefits. The Liberal-SDP Alliance, too, in its policy statements during the 1987 general election, stressed the family's role as related to the social order. The approaches of contemporary political parties can be seen as having historical roots, for example, links can be drawn with nineteenth-century *laissez-faire* approaches. Unit 11 uses the ideas of Foucault to show how the past underlies current practices using his notion of a 'genealogy' – a history of the present in antecedents from the past for which a common logic can be traced (not causal links).

All current political parties have policies designed to support and sustain the family, whether stressing the need for the family to be able to 'stand on its own two feet' or arguing for greater state intervention aimed especially at the poor.

State policies can also be directed at helping families to stay together as a family unit. This can be done through counselling and social work services, or through longer term structural changes, such as in the organization of employment and ways in which benefits are distributed. Women's unequal position in paid employment and their financial dependence act as a constraint on forming alternatives to the family norm. Historically the stress on full-time mothering as the key to a healthy population has exerted a powerful influence on women's position both within the family and outside, especially in the world of work.

Unit 9 argues that solutions to the problem of the inequality of women's position at work lie with social groups and not individuals. Some of these solutions can be seen as being in the hands of employers, though they too operate within structural constraints. Policies such as job-sharing, flexible hours, maternity leave and child-care facilities could fit into the 'equality' quadrants in Unit 7's grid of political ideologies.

Unit 11 also showed us ways in which the family has been the focus of state intervention historically and how state policies can be seen as supporting the family unit. For example, in Foucauldian terms, state policies have created the definition of the family and the discourse in which it is the target of state policies. An illustration of this can be found in Sophie Watson's Reader article on housing (Chapter 9 in Loney et al., 1987) which shows how housing was created to serve a nuclear family centred on the wife and mother in the home, and acted to promote such a pattern of life.

Unit 11 also distinguishes between the terms 'surveillance' and 'monitoring' in considering state intervention in the family. This tries to separate ideas of investigating the family as being (a) in the interests of others such as philanthropists and health visitors, for the greater public good (surveillance) and (b) inspection in one's own interests such as health check-ups (monitoring). As you have seen in Units 1 and 11, these two principles of intervention tend to merge, especially in the case of mothers and children. Ante-natal care allows further intervention and management of childbirth by the medical profession (surveillance) whilst also serving...
the mother's own health interests (monitoring). The family can be seen as the target of a range of state policies and interventions involving both surveillance and monitoring.

2.1 The private and the public

We have seen a variety of such interventions in this block which highlight several important issues around the centrality of the family and the boundaries between the private and the public and the personal and the social. The family is important since it marks the boundary between these two areas. As we have seen in considering questions 2 and 3 above, the family can be presented as a solution to a social problem. As a consequence, the problem and the solution are 'privatized' (and thus the state can be relieved of the responsibility of intervening). The ways in which problems come to be seen as either 'public' or 'private' matters are the outcome of publicly conflicting definitions. This paradox was illustrated in Unit 11, where it was argued that modern intervention in family life was brought about through a greater public significance of 'mothering'. This led to a redefinition of the boundaries of the 'private', with the hitherto private matter of childrearing becoming an area of public concern. Recently the family has become a focus of political parties across the political spectrum, as Unit 7's discussion of the 1987 election campaign showed. The family is addressed from different ideological positions. The Conservative Party's identification with traditional values and the patriarchal familial ideology of male breadwinner, with wife at home and dependent children, was a focus of the Conservative family campaign. The Labour Party election campaign focused on a similar patriarchal ideology in images of the party leader and his wife, whilst adopting a more egalitarian position towards women working, underplaying what Unit 7 calls libertarian socialist views of cultural diversity in domestic living, gender roles, and sexuality. The family has been taken up by all political parties and different social groups as a focus of concern, and features on the agenda of a range of social and political debates.

3 THE CHANGING PLACE OF THE FAMILY

The block introduction suggested a number of reasons for the growing significance of the family which you should now be in a position to explore more fully from your reading of the block. The headings considered were

1. social changes,
2. social movements,
3. politics

Q What sorts of changes have affected the family in the post-war period?

We have looked at empirical evidence which suggests shifts in forms of domestic living, more single-parent families, increased numbers of children born to unmarried women, a rising divorce rate, and 'serial monogamy'. There are also other forms of communal living, secular groups such as the 'hippie' commune mentioned in Unit 10, and alternative lifestyles such as gay and lesbian couples accompanied by more open discussion of sexual identities, as Unit 8 showed. Equally, we have seen that more women are in paid employment outside the home. I expect you will have noticed that I have shifted about myself here in presenting empirical evidence. Some of it seems safely quantifiable, and I felt secure (though not entirely justifiably!) in the possibility of referring to material from the General Household Survey of the Labour
Force Survey, but other items of evidence I have offered here are more problematic. What do you think? For example, I referred to ‘more open’ discussion of sexual identities and to ‘alternative lifestyles’. To have an ‘alternative’ you must know what it is an alternative to. This again raises questions of normality and the ideological norm of the nuclear family by which standards are set and others judged. Similarly, the discussion of different sexual identities raises issues about what are assumed to be ‘normal’ and ‘deviant’ patterns of sexuality. These issues, and the quantifiable data referred to above, involve a consideration of how facts are selected. The relationship between facts, theories and values which Unit 10 addresses is crucial here. Which changes in the family are identified, the significance they are given, and how they are interpreted depend on the theory which informs their selection and explanation and the values which are bound up in this process.

Q Which social movements have been involved either in defending the conventional family or in challenging assumptions about the family?

Social movements arise out of social change. As we saw in Nicky Hart’s research on marital breakdown (in Unit 10), people are not prepared for the problems of divorce. Social movements arise out of the need to accommodate social change – such as the rising divorce rate. But such ‘accommodations’ can take different social directions.

Social movements in defence of the conventional family have focused on the ‘idealized norm’ and explicitly stressed the notions of monogamy and a male breadwinner, all of which seems most clearly encapsulated in ‘patriarchal ideology’. For example, since the 1960s there have been many groups opposing abortion, divorce and artificial birth control, often linked with religious movements such as the Roman Catholic Church, which Unit 10 discusses in terms of the ‘revitalization of traditional morality’. Such an approach identifies the family as an area of moral dispute, and debates are couched in ethical and philosophical terms.

Groups which challenge the conventional family also acknowledge the question of morality since such challenges often involve appeals to justice, and the injustice which is experienced by those who reject the constraints they see as imposed by conventional gender roles. Social movements such as the lesbian and gay movements have attempted to create new definitions of gender and sexuality and to challenge the notion of ‘the normal’ and ‘the natural’. In everyday speech, and in the language of movements, the absolutism of heterosexuality and the patriarchal family, ‘normal’ and ‘natural’ are often used synonymously, suggesting that they are biologically given. Social movements challenging traditional views also challenge this assumption.

Social movements are also very difficult to distinguish from the field of politics which we are going to consider in the next question. For example, the Conservative family campaign referred to in Unit 7 represents the views of some social groups outside the Party (and not all of those inside the Party). Other groups may also have a political lobby, such as in the case of the 1986 Irish Republican referendum on divorce law reform. Those opposing traditionalist views have sometimes challenged the rigid distinction between the political, the social and the personal, as, for example, in the women’s movement’s claim that ‘the personal is political’. As we have seen from Block 2, the private and the public, the personal and the social have become inextricably linked in much political discourse and in our own experience.

Q How has the family become a focus of interest for politics and the state?

The social change and social movements that we considered in the first two questions in this section have ensured that the family does now occupy a significant place on the agenda of political parties, and is an important element in both political debate and the role of the state. In Unit 7 this was brought out in the way in which, in the move from the consensus politics of the 1950s and 1960s to greater polarization and conflict in the 1970s and 1980s, the symbol of the family and the
claim to being 'the party of the family' has been contested. This highlights the interaction between family and politics. State institutions influence and even construct the family, as in DHSS methods of aggregating members of a household into a family unit with a male breadwinner as the assumed head. Historically, this can also be seen in intervention directed at the family such as efforts to improve standards of 'mothering'. As you have seen from your reading of Malcolm Wicks's article (Chapter 8 in the Reader), there is also an argument that the public debate arising over the issue of the family corresponds to a debate on the welfare state. Wicks argues that, since Beveridge, the welfare state has been linked to questions of community care and the role of the family. Thus the family in British society is set in the context of the political debate about the welfare state within the parameters of pro- and anti-welfare state policies as represented in Unit 7. It would be useful to look over Wicks's article again here as a lead into Block 3.

The political debate shows the importance of how parties discuss the family, the images they present and how those images match our view of social order and what we feel it ought to be like. Here the 'normal' images of the family (the 'idealized norm' of Unit 6) can be seen as constituting an ideology — a set of assumptions or linked ideas which inform practice and our experience of the family. Such ideas are structured and reinforced by social movements and state policies. Whether we see these ideas as Foucauldian 'discourses', or 'ideologies' in Marxist terms, or as an expression of the interplay of different interests from a pluralist perspective, such sets of ideas are of central importance. Unit 11 presents some ways of thinking about theoretical explanations which are important in the block and the course as a whole. It offered the opportunity to compare Marxist and Foucauldian perspectives on health visiting. The ideology outlined here, which can be explained as serving different interests, incorporates ideas both of what is 'normal' (natural, usual) and what is 'ideal'. It is this that political parties can be seen as attempting to engage with and make use of in their rhetoric and policies. The expression of competing ideologies of gender and sexuality can be seen in various social movements and political parties. For example, as was mentioned in the discussion of libertarian socialism in Unit 7, some movements and parties have a commitment to equality of status for different lifestyles, sexual identities and moralities, and claim that this is the only way of achieving true cultural pluralism. Politically, this contrasts sharply with ideas of the traditional family as an 'idealized norm' representing the 'natural basis' of the social order, which is articulated by some politicians and religious groups.

In considering these themes we have also raised several issues which emerge in the block as a whole. In the next sections we shall consider some of these major themes.
4 THE NORMAL FAMILY

I would like you to stop and think again about what a normal family is. Close your eyes – what sort of picture do you see? Is this the ‘normal family’? Think about ways in which ‘normal’ is used in the context of the family.

I tend to see a sort of composite advertisement containing a nuclear family – a very stereotyped image, with two children, in spite of the fact that there are four in my own family. In Block 2 we have considered an ideological construction of the family which supports certain social patterns and forms of organization, including sexuality, moral codes, gender relations and dependency relations, and also the effect of categorizing other patterns as ‘deviant’ or ‘abnormal’. Defining the family is very difficult. Even the minimal General Household Survey attempt was shown to be problematical because of the diversity of experience. The ideology of the family is a combination of how it is and how we feel it ought to be. The ideal of the family has become entrenched in religious, legal, social and economic relationships, so that we expect to live our lives in the family and it is the assumed starting point for the evaluation of alternative ways of living. The distinction which Unit 6 makes between an ideology of the family and how we as individuals live together at different stages of our lives is important in addressing the influence of ‘the normal’ and in categorizing the ‘abnormal’. Normality is in itself problematic since it changes over time and across cultures and according to our position in society (We have seen this from cross-cultural studies and in Felicity Edholm’s article in the Block 2 Offprints booklet).

Q How does the idea of the ‘normal family’ affect different groups in British society?

One example might be the way in which assumptions of heterosexuality and ideologies of masculinity construct homosexuals as ‘deviant’. Patriarchal masculinity can be seen as creating homophobia and sexual stigma. Gays and lesbians can be seen as constructing resistances to the assumptions of normality through alternative discourses of sexual identity.

Another example is the role of working women and the ways in which working mothers are seen as ‘neglectful’ and may make women feel guilty. The ‘double shift’ of outside work and housework involves a challenge to the norm which assumes their primary role to be a domestic one. This affects the work women do and the way in which women are viewed by employers. The West German example in Unit 9 suggests alternative state and employer policies which take on board the notion of the double shift and allow some flexibility at work to accommodate this. It does not, however, challenge the norm of women’s main responsibility for housework, though it indicates change and makes working women less ‘abnormal’.

Different forms of domestic living also become defined as deviant because they differ from the norm, rather than being seen as alternative ways of living. These ideas of the normal clearly influence social policy. In relation to health, for example, normality becomes identified through a scientific biological discourse. In such discourse, scientific and moral issues unite with social pressures around the idea of the preservation and improvement of the nation. There is an insistence on an idea of the ‘normal’ family, with a male head of household and supporting, nurturing mother responsible for feeding and caring for the family unit. These policies became targeted on the mother, and were constructed and reinforced through familial ideology.

Q How is the family seen as private, and in what ways is it a public concern?

As we noted in Section 1, Block 2 extends the discussion of the private/public dichotomy you encountered in Block 1, where we considered how individual concerns become social and occupy the public arena.

We saw in Unit 8 how sexuality, which seems to belong in the private sphere, has...
increasingly become a matter of public concern (for example, in recent debates about sex education) This change is the outcome of attempts both to challenge the norms of sexuality and to reassert conventional norms

Gender difference, even within the apparently private sphere of the home, can be seen as socially constructed and the product of public policies. Unit 9 took the view that the separation of the public and private spheres of work and the home embodied a particular sexual division of labour where women occupy the home and men the world of paid work outside. Thus resulted in women's work in the home being devalued and becoming 'invisible' because it was unwaged.

Unit 11 offered a more extensive account of the historical process whereby the 'private sphere' was publicly defined through the development of public health services. It argued that the apparently 'natural' areas into which state welfare agencies intervened were socially constructed and defined. The family and the state have developed together over the last two centuries. The ideas of Foucault were used to show that there are constructs which define both social and personal reality. This raises questions about the next issue we are going to think about – biological essentialism and social constructionism.
5 BIOLOGICAL ESSENTIALISM AND SOCIAL CONSTRUCTIONISM

Q. Can you think of areas where the ideas of biological essentialism and social constructionism are addressed in Block 2? How does the block suggest that problems are socially constructed?

We have already referred to these issues earlier in this unit, especially in relation to assumptions that the 'normal' includes the 'natural'. Similarly, the equation between 'what is' and 'what ought to be' is where moral statements or value judgements are often presented as being derived from factual propositions about human biology.

Unit 8 looked at social constructionist explanations of sexuality and gender identities, presenting them as processes which are open to social and historical changes as well as local and biographical shifts in the individual's life-cycle. Such a perspective offers a more flexible understanding than the rigidity of biological determinism, and has the capacity to make sense of social changes.

This anti-essentialism (especially anti-biological essentialism) is a common position in the social sciences. It is not an argument that biology does not exist, or that it does not play a role in human life. Rather, it insists that biology does not, and cannot, explain everything. Social life, even its apparently most 'natural' aspects such as sexuality, is too complex and diverse to be reduced to basic biological determinants. It is also important to remember that this anti-essentialist (or 'social constructionist') standpoint does not lead to any particular social or political judgements. It is a sceptical, rather than intrinsically radical, approach. It asks the question, 'How did things come to be arranged like this?'

But to ask that question does not necessarily include an argument that things should be arranged differently. Quite often, as we have seen in this block, challenges to claims about 'normality' and its natural or biological basis involve arguments that this normality is socially constructed and needs to be changed. Some of the social movements concerned with patterns of living, gender roles and sexuality have made such arguments. It is important to remember, however, that in Unit 10 we saw an example, in the work of Roger Scruton, of how an anti-essentialist/social constructionist position could be used to argue in favour of the maintenance of 'conventional' morality and the family.
6 BLOCK 2 QUESTIONS

You should now be in a good position to answer the questions that were posed in the block introduction. Answering them should give you a chance to go over the block and use some of the points we have covered in this review.

Q What is meant by the phrase 'the family in modern Britain'?

This could be answered by reference back to the empirical data in Unit 6 and to Unit 10's examples of different forms of domestic living. However, the phrase 'what is meant by' must also include the 'social fact' of familial ideology and how this is expressed in state policies and social movements.

Q What changes have occurred in the institution of marriage in Britain in the last three decades?

Marriage as a social institution has changed yet retained several basic elements of conformity in recent years in relation to its position in both familial ideology and lived experience. We have looked at how it has been challenged by some social movements, especially those arguing against the ubiquity and inequality of marriage as the norm of couple relationships and for cultural pluralism. At the same time it has been strongly defended, in its most patriarchal form, by, for example, the moral teaching of the Roman Catholic Church and by groups supporting a return to traditional morality. The institution of marriage has been renegotiated in practice through shifting gender roles in women's greater participation in paid work outside the home and in the pattern of remarriage which often follows divorce, producing 'serial monogamy.' How far you think such changes have affected the basic institution will be shaped by how you see the needs of men and women being met by marriage.

Q What have been the significant changes, if any, in the social and economic position of women in the last thirty years?

This is a question which requires some evaluation of the empirical evidence, for example with regard to women's economic activity, since you need to interpret the data on women's employment and how far women are still constrained by the 'double shift' (see Unit 9). Another relevant issue here is the role of the state and whether any changes have been (or could be) made to increase women's financial independence.

Q What do ethnic, religious or political groups, other than those to which you belong, think are important values and issues?

The block does not provide a comprehensive list, but does provide the scope for attempting some social scientific assessment. As we have seen from Unit 7, there is some overlap between different political positions and values about the issues of the family, gender, sexuality and morality. The point of this exercise is to enable you to stand back and look at some of the views you have encountered in the block (and in your life) which differ from your own and to look more critically at the way we may 'take for granted' such ideas. You may well continue to maintain your views. But the purpose of studies and activities like these is not to persuade you to change your mind. Rather, it is to enable you to situate your own ideas in the context of a society in which these issues are contested, and where there is a diversity of ideas about how things are — and about how they ought to be.
I would like you to think again about the four key questions which were set right at the beginning of the course in the Block 1 Introduction. In the light of your work on Block 2, you should consider how this block contributes to answering them.

**Q 1 What is social about a social problem?**

The discussion in Block 2 has indicated how experience and areas of our lives which may be seen as either biologically determined or personal are very often socially constructed, for example gender roles, mothering and sexuality. This has considerable implications for intervention, since a social constructionist approach opens up a range of possible explanations acknowledging historical and cross-cultural variety. We have looked, for example, at how mothering (and 'poor mothering') was created as an area of social concern, and we have examined different interpretations of intervention in the family in this context.

**Q 2 When does a matter of private concern become a social problem?**

Unit 11's case study of health care and the family seen from different theoretical perspectives, illustrated the process whereby the private became public and how some issues are taken up as matters of political and national concern. The whole block shows how the family itself has been articulated in the discourses of social movements and political parties. In areas such as sexuality, other institutions such as the churches and the media have played a part in generating public concern about what were previously seen as 'private matters', for example in the moral panic surrounding AIDS. In such ways, elements of personal and private experience have been placed under the spotlights of the political and public arena.

**Q 3 What is the most appropriate level of intervention?**

Just as we have seen competing explanations of social problems, we have also seen contrasting ideas about solutions ranging along the continuum in Unit 7 from disaggregating the family unit to a view of the family as a natural institution, incorporating values ranging from cultural pluralism to traditional morality. Interventions have taken place using language and programmes which set the 'frame of reference' in which we live our lives. We have also considered the issue of monitoring and surveillance (control versus care) in this context, which has parallels with the dual purposes of intervention in Block 1.

**Q 4 What are the consequences and outcomes of intervention?**

Some forms of intervention may be seen as coercive rather than enabling (more surveillance than monitoring), but this clearly depends on the explanation and definition of the social problem that informs the intervention. Relationships between problems and intervention are often complex, and interventions have to be considered in the political and social context in which they operate, as well as in terms of the logic on which they are based. Because of the inequalities in society, for example in terms of class, race and sex, the processes of intervention are likely to be conflictual and ultimately bound up with questions of values and politics. Block 2 has stressed how ideas of the family, gender and sexuality are contested issues both in the realm of organized politics and in the activities of social movements.
8 CONCLUSION

The family is central to Block 2 and the course as a whole because
- it condenses issues of gender, sexuality and morality and is fundamental to our experience of these,
- the family can be seen as bound up in processes of social change — whilst seeming universal it changes through time and across cultures
- the family links the private and the public and masks the boundaries between the two,
- the family is seen as both the cause and the solution of social problems and hence is the focus of social intervention

These issues are important for the course as a whole and you will need to be aware of them in your study of Block 3

In this block you have practised some important skills in social science as well as covering substantive areas of study. You have looked at empirical data and quantitative material and developed some skills of critical analysis of qualitative material and evaluating different theoretical approaches. In this you have used historical and cross-cultural analyses, for example in assessing different readings of history in Unit 11. The exploration of the relationship between facts, values and theories in Unit 10 is particularly useful, since, as we have seen in Block 2, a study of the family involves addressing the question of morality

I hope that the skills and understanding that you have developed in Block 2 will enable you to explore further the role of state agencies and welfare and political policy issues in the coming blocks

REFERENCE