

Social Work Educators' Evaluations of Regulatory Boards

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Abstract

The regulation of social workers through the awarding of certificates and licenses is predicated in large part on the recognition that states have responsibilities to protect the public. This article presents the results of a study of the perceptions of social work educators and administrators from CSWE accredited programs ($n = 710$) about their state regulatory boards ($n = 47$). A survey measured opinions in two domains: (1) boards' efficacy in performing their professional licensing functions related to issuing certificates and licenses, and (2) their public protection efforts. Overall, educators rated their regulatory boards positively, and social work educators with a certificate or license

significantly rated their boards higher in both domains. Educators in many states differentially evaluated their boards' effectiveness in board functions and public protection efforts.

Keywords: certification, regulatory boards, public protection, social work licensure, ethics

Introduction

Protection of the public and consumers is one reason for establishing state regulatory boards and credentialing professionals, but public protection is a topic that is rarely addressed directly in the social work literature. In fact, the search term "public protection" is not recognized as a key

phrase among many of the profession's prominent journals. Although research has been published about members of the National Association of Social Workers (NASW) sanctioned for unethical conduct (e.g., Strom-Gottfried, 1999) and social workers sanctioned for unprofessional conduct by their regulatory boards (Boland-Prom, Johnson, & Gunaganti, 2015), the mirror concepts of harm to clients or iatrogenic symptoms have not been explored in depth.

Social work educators are in a unique position to observe and evaluate state policies that regulate social workers and their practice. Faculty include themes into curriculum in micro and macro practice, management and ethics courses, and field seminars that reflect state policies of professional and unprofessional conduct. Some faculty have first-hand experience as licensees and members of the regulatory boards and their committees. Clinical and field faculty as well as academic advisors are in unique positions to learn of students' and graduates' experiences. Faculty are a well-qualified group to participate in a study of state regulatory boards and regulatory policies.

The Association of Social Work Boards (ASWB) is an organization that provides resources to social work regulatory boards throughout the United States and Canada. It developed recommendations for statutory standards for the regulation of social workers, provides training to regulatory board members, maintains a database of sanctioned social work professionals, and administers tests that are used to establish the qualifications of social work professionals at various levels. The ASWB developed a Model State Social Work Practice Act (2015), referred to subsequently as the Model Practice Act, that provides an example statute that establishes a regulatory board and provides a framework for accepting applications, issuing certificates or licenses, and handling complaints. The Model Practice Act proposes credentials at a BSW level (including independent practice) and various MSW-level licenses, including clinical and supervision. The current recommended model includes language for oversight of social work

services provided electronically by social workers within the jurisdiction or outside the jurisdiction for clients in the jurisdiction. The public protection policies in the Model Practice Act include a code of conduct (basic standards for all practice), delineation of unprofessional conduct, ability to evaluate those with felony convictions, and clear statements against exploitation of clients. In addition, the Model Practice Act established a legal responsibility for social workers to report impaired social workers and others who practice in unprofessional ways that pose a risk to consumers. The Model Act establishes regulatory boards' authority to accept and investigate complaints and sanction social workers for unprofessional conduct, but this comprehensive, aspirational model does not capture the jurisdictional variety of statutes that currently exist across the states.

Literature Review

Social work regulation

Although all states and the District of Columbia in the United States currently have some type of social work regulation, the types of certifications and licenses vary (Duffy Randal & DeAngelis, 2013). California was the first state to pass regulation of social workers in 1945 and Wisconsin was the most recent state to do so in 1992 (Duffy Randal & DeAngelis, 2013). Most jurisdictions regulate social workers at two or three levels: after graduation with a bachelor's or master's degree, after 2 years of supervised post-graduate practice, and independent clinical licensure. State statutes vary tremendously in their requirements about education, field training, supervision, and post-licensure continuing education, as well as the types of employment that may exempt employees from oversight. Examples of these variations include California with one license type: clinical social work; Texas offers training certificates and licenses; Wisconsin allows applicants with nonsocial work degrees, but reviews training in the classroom and field work placements prior to graduation.

Although independent clinical social workers are regulated (with certificates or licenses) in all states,

only 18 jurisdictions offer independent macro practice certificates or licenses. Jurisdictions differ widely in regulating those with a bachelor's degree. Regulation is more of a manifestation of political and legal forces than a reflection of national standards within the social work profession. This statement is most easily supported by the fact that the composition of regulatory boards varies across jurisdictions—some boards are composed of all social workers (usually with public members) while other jurisdictions have composite boards made up of professionals from multiple disciplines who oversee several disciplines.

Public protection

Public protection can be conceptualized across two spheres of responsibility: (a) establishing professional standards and admission to the profession (e.g., reviewing applicants for sufficient knowledge and skills, awarding certificates and licenses, and establishing professional standards for practice), and (b) public education and protection efforts (e.g., dissemination of information about the profession and individual social workers, as well as handling of complaints against individual social workers). Public protection is predicated on a regulatory board with statutory authority and sufficient staff to award, renew, restrict, and remove licenses. Public protection is more effective when social workers have mechanisms to report peers who are impaired or demonstrate unprofessional conduct. On balance, spurious complaints also require procedural safeguards that efficiently adjudicate cases. Finally, regulatory boards' budget for staff and resources affect their ability to perform necessary oversight duties related to public protection (Law & Hansen, 2010).

Responding to complaints against social workers requires clear communication and access for consumers and other professionals, including accepting complaints, investigating accusations, conducting hearings, and sanctioning and monitoring adjudicated social workers. Regulatory boards' responsibilities for public protection include providing information about how to make a complaint against a professional and conveying information about sanctions against social workers

in a manner that allows consumers to evaluate practicing social workers who have a history of being sanctioned. The responsibilities of protection at a state level are by necessity tied to national data banks, including the National Practitioner Data Bank (NPDB) maintained by the U.S Department of Health and Human Services (2011) and the Public Protection Data Bank compiled by ASWB.

Regulatory boards need access to national data banks that maintain records on individuals who have been sanctioned for unprofessional conduct as they move to new jurisdictions. Jesilow and Ohlander (2010) found that serious discipline actions of doctors increased after the implementation of the NPDB, which provided boards information about individuals' sanctions and reciprocally required that state boards and professional societies report their sanction decisions. Their results are suggestive of the dual functions of NPDB in both tracking and supporting the sanctioning decisions of state regulatory boards and professional membership groups.

The question imbedded in the discourse on public protection is what types of unprofessional conduct require protection for consumers. Aside from the exclusion of unqualified individuals from the practice of social work, what minimum standards can be used to guide supervision and service delivery or identify the need for peer interventions? There are two streams in social work research that quantify the types of unprofessional conduct that result in professional sanctions. Decades of research on ethics complaints, handled by the National Association of Social Workers (Daley & Doughty, 2006; NASW, 1995), have identified continuing categories of harmful conduct: sexual abuse of clients and former clients, impaired professionals, and a variety of incompetent service deliveries. The second stream is research on social workers sanctioned by regulatory boards (Boland-Prom, Johnson, & Gunaganti, 2015).

Beneath these categories and numbers are unanswered questions related to what were the original accusations from consumers and peers, not the negotiated, plea bargained public reports. In other words, what causes consumers enough harm or outrage that they are willing to engage in

a time-consuming bureaucratic complaint process that may involve appearance at a disciplinary hearing? Thus, when public protection is discussed, research results in part reaffirm the framework that is used for discipline. In other words, knowledge about the iatrogenic or other problems related to abuse or unprofessional conduct by professionals is filtered through professional frames of reference (e.g., code of ethics) and research coding. It is a knowledge base that has many missing voices. Research with a national sample of licensing boards is further challenged as a result of the variation in state regulations and boards' compositions (Herman & Sharer, 2013) as some of the regulatory boards oversee multiple professions with membership representing these professions.

Purpose of the Study

The purpose of this study was to explore the opinions of social worker educators about their state regulatory boards in two domains: (a) boards' efficiency in performing their professional regulatory functions and (b) boards' public protection efforts. The hypothesis was that social work educators' views of the efficiency of their boards in its basic regulatory functions would be similar to their evaluation of the boards' public protection efforts. Additional hypotheses were tested that field faculty and field administrators as well as faculty who teach practice (micro and macro) classes would be more likely than administrators or faculty teaching other courses to be aware of students' experiences with the regulatory boards, and aware of complaints against social workers. Differences in evaluations of regulatory boards were compared across groups: (a) members (and former members) of the National Association of Social Workers compared with those who were never members; (b) educators with and those without licenses or certifications; (c) educators who teach practice courses compared with those who teach other classes; and (d) field administrators and faculty compared with other administrators and faculty. The study was approved by the Institution Review Boards of the two universities.

Method

Survey sample and data collection

The list of schools posted on the Council of Social Work Education's (CSWE) website was used to identify accredited graduate and undergraduate social work programs in the United States. A public domain scrubber software (Google) was used to download information (names, email addresses, job titles, degrees, licenses, and descriptions) of social work educators and staff directly from colleges' and universities' websites. Website formats varied widely from one school with no listed social work faculty to one that included a list of over 100 faculty, affiliated faculty, and staff. Some schools included field instructors, most did not. Some websites included emeritus faculty and a smaller number included retired faculty. The public information posted on each social work educator was reviewed and categorized (type of faculty, administrator types, fieldwork positions, education, and types of certification and licensure). The following categories of employees were excluded: support staff, marketing and recruitment staff (unless a social work degree or license was listed), graduate assistants, student workers, technology support, and webmasters. In order to generate the largest possible pool of subjects, decisions were made to include part-time faculty, field faculty, affiliate faculty, retired and emeritus faculty, and visiting professors. The email lists were developed between November 2015 and February 2016, after the start of the fall term, to gather the most current information on staff for the academic year of the study.

Recruitment of social work educators listed on accredited schools' websites was done through email communication beginning with an introductory email with information about the study, followed by an invitation to participate, and three reminders to nonresponders (all included an imbedded link to the survey). The survey was distributed utilizing Survey Monkey. Emails and surveys were distributed between January and May of 2016. All messages were distributed on Tuesday mornings using formal introductions for the educators (Day, 2016; Experian Market

Services, 2016; Fink, 2015; Heerwegh, 2005; Salesforce Marketing Cloud, 2014; Zheng, 2011). Administration of the survey was managed by the Office of Institutional Research and Effectiveness at the authors' university, which addressed distribution and answered technical issues with the instrument while it was deployed.

The survey for educators was sent to 8,509 professionals' emails. However, 251 educators (2.9%) either opted out from receiving surveys through the survey vendor prior to contact for this study or had invalid email addresses on their university website that prohibited contact. Surveys were started by 905 educators. This left an effective response rate of 11% from those who were eligible to contact. The calculated response rate could have been higher if categories of faculty had been screened out (examples include retired, emeritus, affiliated faculty, administrators, etc.). Additionally, 195 surveys were removed as noncompleters for failing to answer more than 90% of the survey. Thus, 710 educators' surveys were retained for further analysis.

Survey instrument

A 26-question survey (with additional demographic and open-ended questions) was designed to measure the views of social work educators regarding their states' licensing boards. Survey questions were developed based on the social work literature, the Association of Social Worker Board's Model Law, the Code of Ethics of the National Association of Social Workers (NASW), and focus groups of regulators. Focus groups of regulatory board members and administrators were conducted at an annual meeting of the Association of Social Work Boards. Finally, the cover letter and survey were pilot tested with faculty from multiple disciplines at the authors' university.

The resulting survey included five subscales and demographic questions about respondents. Boards' efficiency was measured with three subscales: (a) boards' professional functions (applications, renewals, etc.); (b) boards' communication with stakeholders (social workers, educators, and public); and (c) regulations based on ethical standards

(informed consent, confidentiality, etc.). The public protection domain was measured with two subscales: (d) boards' handling of complaints against social workers; and (e) evaluation of public protection.

Each survey contained four questions that asked for Likert-scale responses to aspects of the functioning of the state board.

- First, participants were asked to rate on a 5-point Likert scale, where 1 was Poor and 5 was Excellent, the professional functions of their board, such as disseminating information about obtaining a license.
- Next, they were asked to rate on a 3-point scale where 1 was No Regulation, 2 was Regulations Need Improvement, and 3 was Adequate Regulations, no Change Needed, the regulations governing ethical behaviors of social workers, for example, requirements that social workers report incompetent colleagues.
- Third, they were asked to evaluate on a 5-point Likert scale, where 1 was Poor and 5 was Excellent, the board's handling of complaints, for example, performing investigations in response to complaints.
- The fourth question again used the above-described 5-point Likert scale and asked respondents to provide overall ratings regarding the board's communications with its constituents and its efforts to protect the public.

The second set of questions included questions about the educators' views on social work practices. The first category asked educators to evaluate regulations on various common ethical standards of social work practice. A 4-item scale was used to rate current regulations in the state (unable to rate, no regulation, regulations need improvement, adequate regulations). One section asked educators to rate the boards' communication with stakeholders (social workers, public and colleges and universities) on a 5-point Likert scale

from 1= poor to 5 = excellent. There were also areas provided for educators to write comments on social work practices.

Results

Participants

Survey participants ($N = 710$) described themselves primarily as female (72%) and White (77.6%). (See Table 1.) Although many participants identified more than one job description, all faculty types and ranks were listed by 49.8%, administrator 11.5%, and field personnel 16.9%. Participants identified teaching a variety of classes: practice (micro and macro) 65.6%; human behavior 44.8%; mental health 41.1%; policy 37%; research 33.8%; diversity 33.5%, ethics 32.7%; and other courses.

Participants reported on 46 different regulatory boards. No respondents identified boards from Delaware, South Dakota, Washington, or Wyoming. (See Table 2.) When asked about the source of knowledge about the state regulatory board, participants identified multiple experiences. Most participants identified knowledge of students' experiences with regulatory boards (45.9%), through NASW advocacy (42.5%), colleagues' experiences (39.2%), and awareness of boards' policies (32.1%), and familiarity with the regulatory boards' work (26.6%). Refer to Table 2. Most participants reported membership in NASW (current member 55.4%, lapsed membership 32.3%) as a source of information about their boards.

Participants' responses to questions about the adequacy of regulations demonstrated overwhelming support for their states' current regulations; satisfaction with regulations that restrict sexual contact between social workers and clients was rated adequate by 65.8%. Regulations requiring social workers to report impaired colleagues was rated adequate by 44.4% of educators, whereas 14.6% indicated that improvement was needed. Educators evaluated all nine standards as adequately regulated (e.g., client given information about social workers 44.2%, to policies against sex with clients 82.3%). Scores for the bottom range (poor and below average) were 38% communication

Table 1

Participant Demographics

	N	%
Gender		
Female	511	72
Male	157	22.1
Transgendered & Other	5	.7
Missing	37	5.2
Race*		
White	551	77.6
Black/African American	83	11.7
Latino	47	6.6
American Indian/ Alaska Native	20	2.8
Asian	16	2.3
Hawaiian/Pacific Islander	1	.1
Education		
Doctorates all types	248	34.91
MSW	151	21.27
JD	1	.1
BSW	2	.2
Missing	308	43.4
MSW	151	21.27
JD	1	.1
BSW	2	.2
Missing	308	43.4
Licensure		
Licensed Clinical Social Worker	128	18.03
Licensed Independent Social Worker (MSW + experience)	10	1.41
Licensed Graduate Social Worker	31	4.37
Missing	541	76.2
Job Descriptions *		
Faculty		
Tenured Faculty- All ranks	354	49.8
Adjuncts & Lecturers (FT & PT)	170	24.0
Clinical Faculty	76	10.7
Research Faculty	13	1.7
Emeritus & Retired Faculty	18	2.54
Administrators *		
University, College, Department, Program Coordinators or directors	82	11.5
Field Personnel		
Field Administrators & Coordinators	51	7.2
Field Faculty	69	9.7
Other	74	10.4

* Some participants identified more than one category

with social workers, 44.4% rated communication with the public in the low range, and 48.4% rated communication with colleges and universities in the lower range. Regulations related to supervision was the area that received the highest response for improvement needed (15.2%).

Table 2

Participants Reported Source of Awareness about State Boards

Source of Knowledge	N	%
Students' experiences	333	45.9
NASW advocacy	302	42.5
Colleague's experiences	278	39.2
Aware of board policies	228	32.1
Familiar with board's work	189	26.6
Colleague's experiences with Board	180	25.4
Licensor	545	76.8
Client complaint	133	18.7
Served on committees for Bd	82	11.5
Served on Bd	27	3.8
Other	72	10.1

Preliminary Analyses and Overall Comparison of Licensure Attitudes

Internal consistency reliability was calculated for the summated rating scales measuring Regulatory Licensure Attitudes ($\alpha = .88$), Protective Licensure Attitudes ($\alpha = .90$), and a scale for Overall Licensure Attitudes that included all items pertaining to licensure attitudes ($\alpha = .93$). *Regulatory Licensure Attitudes* reflect respondents' views about the efficiency with which regulatory boards carried out their responsibilities in licensing social workers. *Protective Licensure Attitudes* reflect respondents' views about how effective regulatory boards are in protecting the public, investigating reported violations of minimum standards, and taking disciplinary or corrective action as appropriate. An analysis of the overall difference between respondents' Regulatory Licensure Attitudes and Protective Licensure Attitudes was conducted via a paired sample *t* test. Regulatory Licensure Attitudes ($M = 2.64$, $SD = 1.04$) were significantly more favorable ($t(709) = 16.93$, $p < .001$) than Protective Attitudes ($M = 1.99$, $SD = 1.26$). The effect size of overall differences between Regulatory and Protective Licensure Attitudes ($d = .64$) was medium in size.

Licensure Attitudes and Social Work License Attainment

A mixed, factorial ANOVA was conducted to examine whether License Attainment was associated with variance in Regulatory and Protective Licensure Attitudes. The main effects and interactions of Licensure Attitude Type (Regulatory vs. Protective, a 2-level within-subjects variable) and License Attainment (Yes vs. No, a 2-level between-subjects variable) were examined. A significant two-way interaction ($F(1,708) = 19.72$, $p < .001$) was observed (see Figure 1). Follow-up tests for the two-way interaction between Licensure Attitude Type and License Attainment examined differences between Licensure Attitude Type within respondents who had attained their Social Work License and those who had not. For respondents who attained a license ($n = 545$), Regulatory Attitudes ($M = 2.78$,

$SD = .91$) were significantly ($t(544) = 17.11$, $p < .001$, $d = .73$) more favorable than Protective Attitudes ($M = 2.04$, $SD = 1.21$). For respondents who had not attained a license, Regulatory Attitudes ($M = 2.16$, $SD = 1.27$) were significantly ($t(164) = 4.43$, $p < .001$, $d = .35$) more favorable than Protective Attitudes ($M = 1.81$, $SD = 1.40$). Furthermore, the Regulatory Licensure Attitudes were significantly more favorable for respondents who were licensed than those who were not ($t(217) = -5.92$, $p < .001$ [adjustment made for heterogeneity of variance], $d = .57$), whereas no significant differences were observed between Protective Licensure Attitudes for licensed respondents and those who were not licensed ($t(243.12) = -1.89$, *ns* [adjustment made for heterogeneity of variance]).

Licensure Attitudes and Education Level

A mixed, factorial ANOVA was conducted to examine the effects of education level in social work on licensure attitudes. Analyses included the main effects and interactions of Licensure Attitude Type (Regulatory vs. Protective, a 2-level within-subjects variable), Education Level in Social Work (bachelor's degree through multiple doctoral degrees, a 7-level between-subjects variable), and NASW Membership (Current Member vs. Lapsed

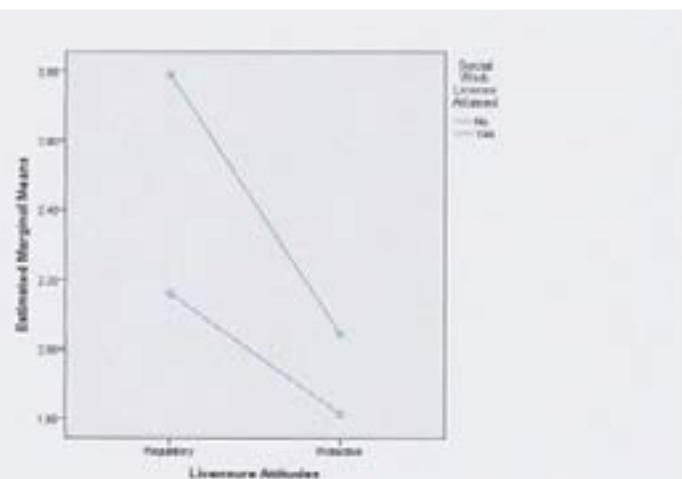


Figure 1. Differences in regulatory and protective licensure attitudes by attainment of license

Member vs. Never Member, a 3-level between-subjects variable). However, no effects (main effects or interactions) associated with education level in social work were statistically significant.

Licensure Attitudes and Courses Taught

Next, a series of analyses were conducted to determine whether the courses taught by respondents (including Administration, Child Welfare/Foster Care, Human Behavior, Practice, Research, Diversity, Ethics, Medical/Hospital, Mental Health, Policy Work, and School Social Work) were associated with their Regulatory and Protective Licensure Attitudes. For each course, a mixed, factorial ANOVA was conducted to examine main effects and interactions of Licensure Attitude Type (Regulatory vs. Protective, a 2-level within-subjects variable) and Course Taught (Yes vs. No, a 2-level between subjects variable). Courses that were not associated with significant differences in Licensure Attitudes included Child Welfare/Foster Care, Human Behavior, Diversity, and School Social Work.

However, many analyses resulted in identifying significant two-way interactions between Licensure Attitude Type and teaching other courses. Figure 2 illustrates the significant two-way interaction ($F(1, 708) = 19.72, p < .001$) associated with teaching a course in Administration. For respondents who taught a course in Administration, Regulatory Licensure Attitudes ($M = 2.79, SD = .91$) were significantly more favorable ($t(544) = 17.11, p < .001, d = .73$) than Protective Attitudes ($M = 2.04, SD = 1.21$). For respondents who had not taught a course in Administration, Regulatory Licensure Attitudes ($M = 2.16, SD = 1.27$) were also significantly more favorable ($t(164) = 4.43, p < .001, d = .68$) than Protective Attitudes ($M = 1.81, SD = 1.40$). However, no significant differences in the Regulatory and Protective Licensure Attitudes were observed for those who taught a course in Administration and those who had not.

Figure 3 presents the two-way interaction associated with teaching a course in Ethics ($F(1,708) = 5.57, p < .05$). Participants who taught a course in Ethics ($n = 232$) reported Regulatory Licensure Attitudes ($M = 2.80, SD = .99$) that were significantly more favorable ($t(231) = 8.07, p < .001, d = .69$) than their Protective Attitudes ($M = 2.27, SD = 1.20$). Participants who had not taught a course in Ethics ($n = 478$) also reported Regulatory Licensure Attitudes ($M = 2.57, SD = 1.05$) that were significantly more favorable ($t(477) = 12.03, p < .001, d = .53$) than their Protective Attitudes ($M = 1.85, SD = 1.27$). Regulatory Licensure Attitudes were significantly more favorable for respondents who taught an Ethics course than those who did not ($t(708) =$

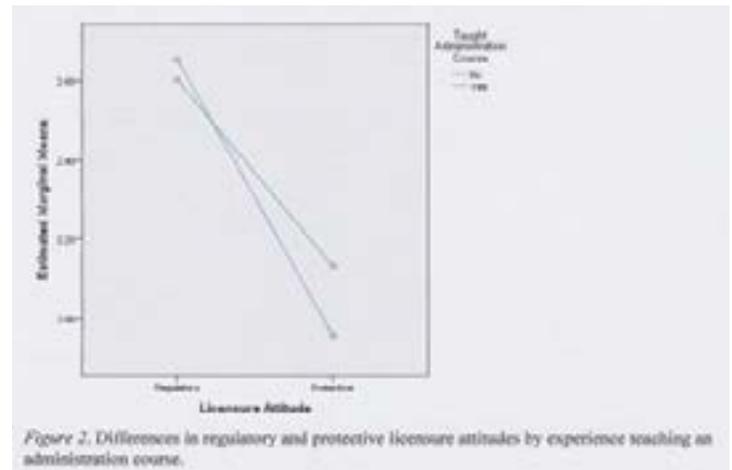


Figure 2. Differences in regulatory and protective licensure attitudes by experience teaching an administration course.

$-2.75, p < .001, d = .23$) and Protective Licensure Attitudes were also significantly more favorable for participants reporting they taught an ethics course than those who did not ($t(708) = -4.20, p < .001, d = .34$).

Figure 4 illustrates the significant two-way interaction associated with teaching a course in Mental Health ($F(1,708) = 6.20, p < .05$). Respondents who taught a course in Mental Health ($n = 292$) reported Regulatory Licensure Attitudes ($M = 2.64, SD = .94$) that were significantly more favorable ($t(291) = 9.63, p < .001, d = .56$) than their Protective Attitudes ($M = 2.11, SD = 1.18$). Participants who had not taught a course in Mental Health ($n = 418$) also reported Regulatory

Licensure Attitudes ($M = 2.64, SD = 1.10$) that were significantly more favorable ($t(417) = 14.02, p < .001, d = .69$) than their Protective Attitudes ($M = 1.91, SD = 1.31$). Regulatory Licensure Attitudes did not differ significantly between respondents

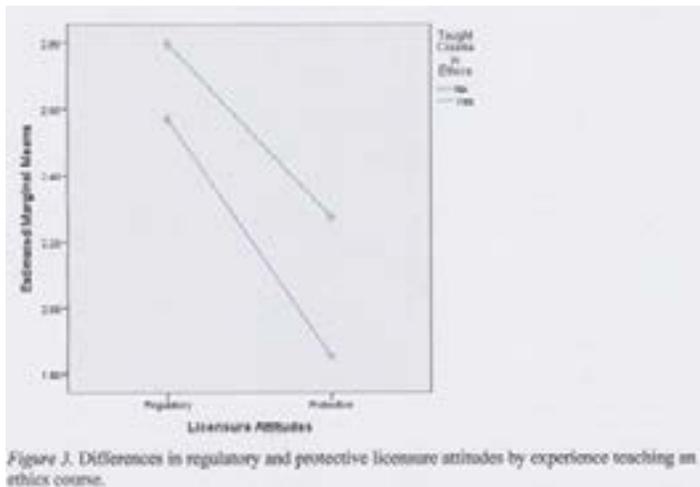


Figure 3. Differences in regulatory and protective licensure attitudes by experience teaching an ethics course.

who taught a course in Mental Health and those who did not, whereas these groups did significantly differ ($t(664.70) = -2.07, p < .05$ [adjustment made for heterogeneity of variance], $d = .16$) in terms of Protective Licensure Attitudes.

Figure 5 presents the two-way interaction associated with teaching a course in Policy Work ($F(1,708) = 4.03, p < .01$). Participants who taught a course in Policy Work ($n = 263$) reported Regulatory Licensure Attitudes ($M = 2.54, SD = 1.05$) that were significantly more favorable ($t(262) = 8.21, p < .001, d = .51$) than their Protective Attitudes ($M = 2.03, SD = 1.23$). Participants who had not taught a course in Policy Work ($n = 447$) also reported Regulatory Licensure Attitudes ($M = 2.70, SD = 1.02$) that were significantly more favorable ($t(446) = 15.13, p < .001, d = .72$) than their Protective Attitudes ($M = 1.97, SD = 1.28$). However, no significant differences in the Regulatory and Protective Licensure Attitudes were observed for those who taught a course in Policy Work and those who had not.

There were also a number of analyses that revealed significant main effects of teaching a particular course on respondents' Overall Licensure Attitudes, including courses in Practice ($F(1,708) =$

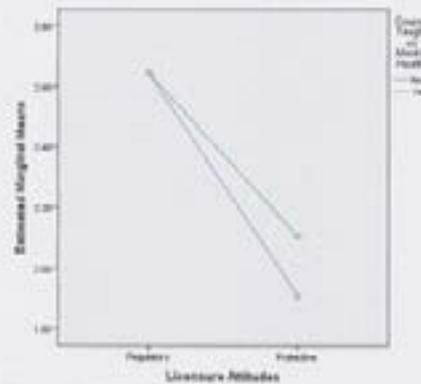


Figure 4. Differences in regulatory and protective licensure attitudes by experience teaching a mental health course.

$5.60, p < .05, d = .17$), Research ($F(1,708) = 4.41, p < .05, d = .16$), and Medical/Hospital ($F(1,708) = 4.59, p < .05, d = .27$). Participants who taught a course in Practice had significantly more favorable Overall Licensure Attitudes ($M = 2.36, SD = 1.03, n = 466$) than those who had not ($M = 2.18, SD = 1.06, n = 244$). Respondents who taught a course in Research had significantly more favorable Overall Licensure Attitudes ($M = 2.36, SD = 1.04, n = 470$) than those who had not ($M = 2.19, SD = 1.03, n = 240$). Participants who taught a course in Medical/Hospital had significantly more favorable Overall Licensure Attitudes ($M = 2.53, SD = .95, n = 86$) than those who had not ($M = 2.27, SD = 1.05, n = 624$).

Qualitative Analysis

The questionnaire contained areas that allowed educators to write comments on social work practices. While there were unique themes within states, several themes were apparent across jurisdictions: (a) difficulty of communicating with the board directly (responses to phone and email communication possibly due to limited staff and poor websites), which can be linked to a few participants who wanted to be able to consult with the board or be trained by the board about ethical issues; (b) boards failing to provide information about pending policy changes; (c) continuing education (CEU) requirements (types of approved trainings, and social workers harshly sanctioned for minor problems with renewals or CEU acceptance); and (d) reciprocity across jurisdictions. Although

the question about educators being required to be licensed was mentioned by a few, the opinions represented the spectrum.

Roles and boundaries between educators and the regulatory board, a longstanding debate in the profession, was evidenced through the following comments.

An educator from Maine wrote about regulatory boards too involved with curriculum standards suggesting improvements, "...by allowing schools of social work to determine what education social workers need, rather than impose their [the board's] judgement and deciding what courses to count (for conditional licenses)." One respondent from Alabama wrote: "Check to see if Social Workers in University positions are licensed. Some SW educators say they do not need licensure. What puts them above the licensure laws?" Another respondent from Minnesota wrote, "Remove the requirement for social work faculty to be licensed. Faculty members are educators, not social workers. It doesn't help anyone to confuse those roles."

Discussion

Social work educators' perspectives reportedly were informed in large part from their students' experiences and NASW (membership and advocacy). Less than 20% of respondents reported that they were aware of complaints about social workers and less than 4% reported serving on their regulatory boards. These factors may contribute to one pattern that is apparent across different analysis of variables: Social work educators tended to rate regulatory functions higher than protective functions, when a difference in the two domains was found. This may also be related to more information being available about standard licensing requirements, as both educators and students have personal experiences in this area.

This study is part of an ongoing consideration of what public protections are in place and changes that might be needed in the licensing of social workers. Articulation of what is public protection is a nuanced topic that covers multiple board functions, including CEU approval and public notification of social workers sanctioned

for relatively minor renewal applications. Licensure is at its foundation a political process that may be influenced by other professional constituents. As a profession with a long history of advocacy for vulnerable groups, the professional literature surprisingly seems to be silent on public protection topics. Theoretical and practical dialogue about the current challenges in protection of the public, after the 1970s era consensus about sexual contact with clients was completed, is needed.

Limitations

Caution should be used in interpreting these results because of the low response rate. The response rate may have been improved with two different approaches. Identification of social work educators, based on public information on college and university websites, was affected by institutionally unique marketing and communication patterns as well as the timeliness of webmasters in updating their lists. In order to include the most diverse array of positions and perspectives in this study, we were cautious about removing categories of potential respondents from the email invitation list. This strategy may have resulted in a misleadingly deflated response rate. The response rate may have been higher also if additional categories of educators had been removed (e.g., affiliated faculty, retired and emeritus faculty, field instructors, research faculty, part-time faculty and part-time instructors) or if the focus had been limited to include specific groups (e.g., faculty with licenses, only practice faculty, field staff and field faculty). However, a sample that targeted a narrower type of courses taught or licensure status would have missed several differences among these categories that the analysis demonstrated were significant. Second, the protocols used in this study for the email communications were based on marketing research. Procedures used in other published social work survey research have demonstrated higher response rates.

Recommendations

Concern for protection of clients and potential consumers is an area that needs further

exploration. It is a particularly challenging topic as much of the information about complaints and sanctioning adjudication is confidential. Public reports on individual social workers are often so processed and sanitized that the true nature of clients' experiences is obfuscated. Given the limited access to sanction procedures and results, obtaining a sample of participants knowledgeable in the topic area is challenging. Study methods that would provide information from consumers about their experiences with unprofessional practitioners could help further expand our understanding of public protection.

Public protection needs to be discussed in social work as part of comprehensive efforts to empower and protect consumers, a potentially vulnerable population. Social work curriculum on ethical practice is enriched when consumer's needs and vulnerability are explored. Discussions of ethical standards, unprofessional conduct, resulting sanctions, and malpractice vulnerability engage students and prepare them for challenges in post graduate practice. The social work profession with its demonstrated historical commitment to vulnerable populations can build on the ethics curriculum by training and evaluating the public protection efforts led by regulatory boards.

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