A New Look at an Old Issue: A Constructive-Development Approach to Professional Boundaries

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Abstract
This phenomenological study explored how social workers make meaning of professional boundaries. The results revealed that social workers are required to make practice decisions, conduct advocacy efforts, and provide leadership in areas that, for some, may be beyond their developmental capacity. Implications for practitioners, educators, supervisors, and agencies are discussed.

Keywords: professional boundaries, development of boundaries, ethics and boundaries, social work ethics, constructive-development theory

1. Introduction
Professional boundaries are at the crux of social work practice. They interface with all aspects of the client/worker relationship and, as such, deserve explicit attention in social work research. While scholars agree that professional behaviors are impacted by one’s environment and upbringing, exploration on how social workers understand and make meaning of professional boundaries has received little attention in the literature (Buchbinder, 2007; Fine & Teram, 2009; Green, 2003). Leading authors of social work textbooks define boundaries as the place where one system or subsystem ends and another begins (Compton, Galaway, & Cournoyer, 2005, p. 25). Professional boundaries sit at the center of the relationship between client and social worker defining, in a sense, how these individuals interact with one another (Peterson, 1992; Reamer, 2006). Peterson (1992) posited that when professionals place their own needs above those of the client, the boundary that defines the client/worker association becomes ambiguous. Consequences of this ambiguity fall on a continuum ranging from minor mistakes to damaging transgressions (Davidson, 2005; Peterson, 1992, p. 73). Minor mistakes, often referred to as boundary crossings, suggest a departure from commonly accepted practices or safe connections that may or may not have a negative impact on the client/worker relationship. One example of a minor boundary crossing is when a social worker gives her own children’s hand-me-down clothes to her client’s children. Boundary violations, on the opposite end of the spectrum, describe behaviors that blatantly threaten or harm the therapeutic relationship (Peterson, 1992; Reamer, 2006). Examples of boundary violations are often the result of intimate relationships between client and worker.

In spite of decades of research and education, situations involving the crossing and violation of professional boundaries continue to arise, posing risks for clients, workers, and
organizations (Boland-Prom, 2009; Strom-Gottfried, 2000; U.S. Department of Health and Human Services [USDHHS], 2012; Wisconsin Department of Safety and Professional Services [WDSPS], 2012). It is not uncommon for social workers to encounter situations during their daily practice that complicate boundaries. The following scenario is one example of an unexpected boundary dilemma that the social worker needed to navigate in the course of her daily work.

A social worker spent the day transporting a mother and her child from one mandated meeting to another. In the middle of the day, the social worker suggested stopping for lunch as the child had not eaten since morning. The mother reported she had no money to buy lunch. They did not have time to seek other resources. The social work profession (and oftentimes agency policy) strongly discourages social workers from using personal funds to provide for client needs. Nevertheless, the social worker made the decision to use her personal funds to buy lunch for the mother and child, as she felt allowing the child to go hungry was more egregious than holding a tight boundary line. After the fact, the social worker struggled over her decision. She was torn between the rules of the profession and her professional judgment (S. DeGrand, personal communication, May 2012). Scenarios such as this suggest that decision-making regarding boundary issues is complex and guidelines may be ambiguous. This ambiguity indicates a need for further research regarding how social workers make meaning of professional boundaries in order to help them navigate complicated boundary scenarios.

The purpose of this phenomenological study was to explore how 10 social work practitioners and educators understand and make meaning of their professional boundaries. Using a constructive-developmental framework, this qualitative study proposed that individual social workers—practitioners and educators alike—understand professional boundaries in unique ways, resulting in diverse interpretations of professional social work boundaries. This study was not intended to explore boundary violations or crossing. Rather, it was designed to illuminate how social workers make meaning of professional boundaries suggesting that understanding the root of boundary development could be an important component in the protection of clients, social workers, organizations, and the profession.

This study aimed to compare results from the same question for five social work practitioners and five social work educators. The research questions were as follows:

- How do bachelor-prepared social workers make meaning of professional boundaries?
- How do social work professional educators make meaning of professional boundaries?

The following discussion explains the theory and previous research that provided the framework for this constructive-development exploration of professional boundaries.

2. **Background**

The nature of the social work profession carries unique challenges for those working in direct practice. In order to be effective in their roles, social workers must develop relationships with clients built on trust and an understanding of client strengths, challenges, and goals (Compton, Galaway, & Cournoyer, 2005; Trevithick, 2003). This clinical approach can present situations that threaten the boundary between professional and personal communications and behaviors. One common definition of professional boundaries is specific to professional-client relationships. Professional boundaries are “the limits that allow for a safe connection based on the client’s needs” (Peterson, 1992, p. 74). This definition suggests the relationship between client and social worker has borders. These borders create the perimeter for a safe relationship, one that protects the therapeutic relationship that may be unique to each client/worker interaction. While the specificity of Peterson’s (1992) definition provides a description of boundaries within the professional helping relationship, it remains ambiguous. The terms “limits”
and “safe connection” (Peterson, 1992, p. 74) are vague and could be interpreted differently by different workers. It is this complex area of interpretation that sits at the center of debates surrounding professional boundaries (Congress, 2001; Fine & Teram, 2009; Mattison, Jayaratne, & Croxton, 2002).

Past research on the topic of professional boundaries has primarily focused on social work values and how they relate to professional boundaries (Congress, Black, & Strom-Gottfried, 2009; Levy, 1976; Pumphrey, 1959; Reamer, 2006). Current research has concentrated on instruction; how to teach current and incoming social workers about vulnerable professional situations and ethical decision-making (Congress, Black, & Strom-Gottfried, 2009; Council on Social Work Education [CSWE], 2008; Davidson, 2005; Mattison, Jayaratne, & Croxton, 2002; Osmo & Landau, 2006; Reamer, 2006). An extensive literature review revealed no apparent social work studies that included boundary development. The present study attempted to fill this gap in the literature by exploring professional boundaries from a developmental perspective.

While professional boundaries are widely discussed in the social work field (Congress, Black, & Strom-Gottfried, 2009; CSWE, 2008; Davidson, 2005; Mattison, Jayaratne, & Croxton, 2002; Osmo & Landau, 2006; Reamer, 2006), there is limited literature in which boundaries are the primary focus of research. In addition, many (if not most) of the publications are theoretical, conceptual, or editorial in nature. There is a remarkable lack of empirical research in the United States regarding boundaries and boundary-related topics. Conversely, there is a higher proportion of qualitative research regarding this subject conducted in Australia, Canada, Israel, and the United Kingdom (Buchbinder, 2007; Davidson, 2005; Doel et al., 2009; Fine & Teram, 2009; Françozo & Cassorla, 2004; Green, Gregory, & Mason, 2006; Green, 2003; Landau & Osmo, 2003; Mandell, 2008; Osmo & Landau, 2006; Osmond, 2005; Pugh, 2006).

It is important to note that social work research focused solely on professional boundaries is not commonplace. The issue is most often embedded in other related topics such as: identity and career choice, rural versus urban practice, ethics and values, and ethical violations. In keeping with the historical transformation of the profession, social work research related to professional conduct has inordinately focused on values, ethical decision-making, ethical dilemmas, and violations (Boland-Prom, 2009; Congress, 2001; Fine & Teram, 2009; Landau & Osmo, 2003; Levy, 1976; Osmo & Landau, 2006; Sherr, Singletary, & Rogers, 2009; Strom-Gottfried, 2000; USDHHS, 2012; WDSPS, 2011).

Boundary training is mandated by various social work organizations that hold oversight responsibilities (CSWE, 2008; NASW, 2008; WDSPS, 2011). Yet, boundary crossings and violations surface in countless ways across the profession (USDHHS, 2012). The present study proposed that part of the issue may be misaligned trainings due, in part, to the fact that the topic of professional boundaries has been understudied as a sole issue in social work research. Instead, boundaries have been discussed as part of the larger umbrella of ethics or narrowly from the dual relationship perspective. Furthermore, attention to this topic has been from a practice perspective versus a developmental perspective. The literature is filled with guidance and cautions for practitioners regarding boundary issues (Congress, Black, & Strom-Gottfried, 2009). Little has been done, in the way of research, to understand why social workers present different understandings and conduct when faced with boundary decisions. The present study was designed to redress this situation by applying a constructive-developmental approach to this important issue.

Through in-depth personal interviews, this study explored the meaning of professional boundaries from the viewpoint of the respondents. It moved away from asking social workers to identify what they would do in certain boundary dilemmas as done by Fine & Teram (2009), and asked why and how they make meaning of professional
boundaries. This is a significant addition to the research surrounding the topic of professional boundaries. Understanding the development of professional boundaries may create awareness of additional training needs, ongoing support for practitioners, and protection of the client/worker relationship.

This study was based on the adult development theory of Robert Kegan (1982, 1994) which suggested the way individuals make meaning of their experiences develops over time and their reaction to these same experiences is directly related to the meaning subscribed to them by the individual. Kegan referred to these meaning-making differences as orders of mind (or orders of consciousness). Orders of mind are defined as the organizing principles that affect thinking, feeling, and relation to self and others through “selective, interpretive, executive, construing capacities” of one’s own experiences (Kegan, 1994, p. 29). This constructive-developmental approach to understanding professional boundaries assumed that individual social workers place unique meaning on boundaries. No two persons are alike, and meaning is based on the developmental order of the social worker.

The present study assumed that a social worker’s developmental order of mind (Kegan, 1994) is the predominant indicator of the meaning the worker makes of professional boundaries. Hence, the meaning a social worker applies to professional boundaries is likely to influence how the worker views the client/worker relationship. Additionally, this study assumed that application of professional boundaries plays a strong role in the client/worker relationship and *upholding the boundary* is the responsibility of the worker. Based on developmental order, workers possess different understandings of professional boundaries and place different meanings on the client/worker relationship. This could result in very different ideas of what it means to uphold the boundary.

2.1 **Constructive-development theory**

According to Kegan’s (1982, 1994) constructive-development theory, individuals evolve through five progressive orders of consciousness (orders of mind). Each order is organized by a person’s relationship between subject and object. In this theory, subject is conceived as aspects of human experiences that a person is not aware of and, therefore, cannot assume responsibility for. Hence, the person is *subject* to these aspects. Object, on the other hand, denotes aspects that individuals can perceive and, hence, be responsible for. For example, persons in the third order can begin to recognize their impulses and perceptions (object); e.g., they may begin to participate in philanthropic acts as they knowingly subjugate their own desires for the needs of others. But, the same individuals in the third order may have no sense of who they are beyond the expectations of others (subject); e.g., they participate in philanthropic acts because that is an expectation of their family or faith. Whereas individuals moving from third to fourth order begin to distinguish themselves from their interpersonal relationships and, if following the example above, make conscious decisions to participate in charitable activities of their own choosing for their own reasons. Table 1 illustrates the orders as they relate to one another.

The five orders of consciousness delineated in Kegan’s (1982, 1994) theory represent qualitatively different ways of thinking. One is not better than another nor do the orders suggest a higher level of intelligence. There is some correlation between developmental age and the orders of consciousness, but age is not an indicator of developmental order. The orders simply define different ways of making meaning. Kegan suggested that individuals move gradually from one order to another, in progressive fashion (and often overlapping orders), as their meaning-making increases in complexity.

The present study appeared to be the first to take this approach by exploring the meaning-making with regard to professional boundaries of both practicing social workers and social work professional educators by asking the general question: How do these social workers make meaning of professional boundaries? According to Kegan’s (1982, 1994) theory, social workers at different
orders of consciousness would hold different views of professional boundaries, as described in the next discussion.

Since the first order of Kegan’s five (impulsive) is primarily possessed by very young children, it is not included in this discussion. The four developmental orders relevant to this study are: 2nd order, instrumental; 3rd order, socialized; 4th order, self-authorship; and 5th order, self-transforming.

2.1.1 Second order

Persons in the instrumental (2nd) order are concrete thinkers relying on rules and clear distinctions between right and wrong, good and bad while striving to meet their own needs (Kegan, 1994). Social workers who are in the second order of mind would rely heavily on agency policy, state statutes, and the professional code of ethics in their understanding of professional boundaries. However, they would see these rules as either obstacles or tools to help them achieve their own goals.

2.1.2 Third order

The third order, socialized, describes individuals who are able to see their desires and needs (object) but are subject to their relationships with others (Kegan, 1994). Social workers in this order would be able to identify their role in a professional boundary dilemma but would not recognize the influence of others on their understanding of the situation. These social workers would seek consensus and approval from various institutions in working through boundary situations. Institutions, as defined by Kegan (1994), include family, church, education system, professional fraternities

<table>
<thead>
<tr>
<th>Order</th>
<th>First</th>
<th>Second</th>
<th>Third</th>
<th>Fourth</th>
<th>Fifth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject</td>
<td>Fantasy, impulse, perception</td>
<td>Self-concept, needs, preferences</td>
<td>Abstractions, mutuality, subjectivity</td>
<td>Ideology, multiple roles, self-authorship</td>
<td>Oppositeness, interpretation of self and others, inter-individuation</td>
</tr>
<tr>
<td>Object</td>
<td>Movement and sensation</td>
<td>Fantasy, impulse, perception</td>
<td>Self-concept, needs, preferences</td>
<td>Abstractions, mutuality, subjectivity</td>
<td>Ideology, multiple roles, self-authorship</td>
</tr>
<tr>
<td>Focus</td>
<td>Particulars</td>
<td>Structures, categories</td>
<td>Abstract thinking, relationships</td>
<td>Constructing, self-authoring</td>
<td>Multiplicity</td>
</tr>
<tr>
<td>Thinking</td>
<td>Concrete</td>
<td>Relating concrete concepts</td>
<td>Abstract</td>
<td>Relating abstract concepts</td>
<td>Systems</td>
</tr>
<tr>
<td>Exhibited</td>
<td>Young children, Cannot hold ideas for long, Need constant supervision and reminders of rules</td>
<td>Adolescents and most adults: Self-centered, Will follow rules but at minimal risk, break them to have own needs met</td>
<td>Most adults: Follow rules out of loyalty, Don’t like to let others down, Self-reflective</td>
<td>Own self-governing system for values and decisions, Consider other opinions but may be set in own ways</td>
<td>Very few adults, See world in gray vs. black/white, Mediator of conflicts Global</td>
</tr>
</tbody>
</table>

such as NASW, etc. Social workers would be unable to separate their personal thinking from what was taught to them via these institutions.

2.1.3 Fourth order

Individuals who reach self-authoring (4th) orders are able to see their institutional influences as object and take responsibility for their beliefs and actions. They are able to develop their own set of values, independent (and because) of what they have experienced in the past (Kegan, 1994). Thus, social workers in the fourth order develop their own set of rules upon which to define professional boundaries. Subject to fourth order persons, however, is not being able to accept other perspectives as feasible. They see their own rule as the only “right” rule. Fourth order social workers may have difficulty compromising on the interpretation of boundary definitions, dilemmas, crossings, and/or violations.

2.1.4 Fifth order

Kegan’s final (5th) order, as published to date, is self-transforming. This is an abstract, rarely observed order that allows persons to handle multiple and complex roles with ease (Kegan, 1994). Social workers in the fifth order would see the relevance of all sides of professional boundaries, including boundary crossings, and strive to bring mutual understanding among parties for the good of all.

The present study proposed that the developmental order of a social worker indicates the meaning placed on professional boundaries by that worker. This applies to practitioners who may be navigating client/worker relationships as well as to social work professional educators who provide trainings on professional boundaries. For example, a social work educator at the fourth order might teach exclusively from the code of ethics (NASW, 2008) without acknowledging other influential institutions for a third order social work practitioner. This could result in value conflict for the practitioner. For example, one educator said:

At the end of the (training), we were talking about some examples and situations. And, one of the clinicians responded in a way that didn’t fit anything we had talked about. And, I was just thinking, where have you been for the last four hours? … Because she didn’t get it. (Participant 9E54)

This educator recognized the disconnection between what was taught during the boundaries training and what the social worker (clinician) took away from the training. Unable to identify the source of the disconnection, and after purposeful deliberation on what she could have done differently, the educator was left with the consolation, “I do the best I can.” (Participant 9E54) This educator’s understanding of the code of ethics was structured from a fourth order perspective. It is likely the clinician in the audience made meaning from a less-complex order of consciousness: one that conflicted with the message presented in the training. The specific methodology used in this study is summarized in the following discussion.

3. Method

Research on professional social work boundaries pointed to several variables that impact a worker’s interpretation and implementation of appropriate boundaries; most focused on external factors such as area of practice, geographical location, and family of origin (Buchbinder, 2007; Green, 2003; Pugh, 2006). Unlike previous research, the present study assumed that the meaning a social worker places on professional boundaries influences the client/worker relationship and decisions made in practice. It further assumed that understanding how social workers arrive at that meaning is relevant to the development of their professional boundaries. This study moved away from a focus on external influences and explored boundaries from a developmental perspective through personal interviews with social work practitioners and social work educators. The primary factor for choosing this qualitative research design was to obtain information-rich data from a small, but similar group of individuals (Patton, 2002).
Since very little research had been conducted on this topic, in general, this qualitative exploratory approach served as an introduction to meaning-making and professional social work boundaries.

The question of how social workers make meaning of professional boundaries was asked of two separate groups: (a) practitioner-bachelor-prepared social workers, and (b) educator-credentialed social workers who conduct ethics and boundary trainings to meet state continuing education requirements.

Practitioners were recruited from the alumni records of an accredited undergraduate social work program at a small private university. While this was somewhat of a convenience sample (due to time and financial constraints), it lent itself to a certain level of homogeneity (Patton, 2002). The criteria used to select the homogeneous sample from the pool of interested respondents was as follows: (a) undergraduate degree is a bachelor’s in social work (BSW), (b) Wisconsin state-certified for five to 10 years, and (c) lives and/or works outside of this researcher’s home and/or work environment.

Educators were recruited via a snowball sampling approach. Original criteria for social work educator participants included: (a) Wisconsin social work certification or licensure, (b) experience in conducting boundary and ethics continuing education sessions, and (c) minimum of two years of practice experience in the field of social work. This study consisted of individual, face-to-face interviews with 10 social workers to explore how they make meaning of professional boundaries. Five of the social workers had experience conducting ethics and boundaries workshops to satisfy state mandated continuing education requirements. Coincidentally, all five of the educators had previous or current experience teaching social work courses at the university level. All of the participants had a minimum of five years of direct practice experience working in various fields of social work. Seven of the participants self-reported working in settings that were a mixture of urban and rural; two participants reported their work settings as primarily rural; one reported the work setting as primarily urban. The overall age range of the participants was 28–55; two were male, eight were female. Tables 2 and 3 provide additional details regarding the individual participants.

To protect the confidentiality and anonymity of participants, comments from interviews are

| Table 2 |
|---|---|---|---|---|---|---|
| Participant Code | Age | Ethnicity | Highest degree | Year obtained | Social work credential | Clinical practice area | Geographical practice area |
| MRE46 | 45 | Caucasian | MSW | 2000 | Advanced Practice Social Worker | Adult mental health | Primarily rural |
| MR33 | 33 | Native and Pan American | PhD | 1990 | Licensed Clinical Social Worker | Children and families | Mix of urban and rural |
| MR33 | 53 | Caucasian | MSW | 1979 | Licensed Clinical Social Worker (Illinois) | Child workers, disabilities, older adults | Mix of urban and rural |
| MRE54 | 54 | Caucasian | MSW | 1990 | Did not indicate | Aging, end-of-life | Mix of urban and rural |
| NRE10 | 50 | Caucasian | PhD | 1988 | Licensed Clinical Social Worker | Mental and behavioral health | Mix of urban and rural |

| Table 3 |
|---|---|---|---|---|---|---|
| Participant Code | Age | Ethnicity | Highest degree | Year obtained | Clinical practice area | Geographical practice area |
| 1P37 | 37 | Caucasian | BSW | 2005 | Medical | Mix of urban and rural |
| 2P37 | 37 | Caucasian | MSW | 2005 | Disabilities | Mix of urban and rural |
| 5P50 | 30 | Caucasian | BSW | 2004 | Mental health adults | Primarily rural |
| 7P28 | 28 | Caucasian | MSW | 2006 | Mental health adults | Mix of urban and rural |
| 8P92 | 32 | Caucasian | BSW | 2006 | Child protective services | Primarily rural |
cited with a special code assigned to each participant (e.g., 5P30). The first number indicates the chronological order of the interview. The letter indicates whether the participant was a practitioner (P) or an educator (E). The final number indicates the participant’s age. To further distinguish interview data, the code is italicized and placed in parentheses following the participant comments.

4. Analysis

Grounded in the epistemology of social constructivism, this phenomenological study was conducted to explore how social workers make meaning of professional boundaries. The research questions asked in this study were:

- How do bachelor-prepared social workers make meaning of professional boundaries?
- How do social work professional educators make meaning of professional boundaries?

Using the Subject-Object Interview (SOI) technique to explore meaning-making (Lahey, Souvaine, Kegan, Goodman, & Felix, 1988), 10 social workers were individually interviewed by the author over the course of three months. The interviews were recorded, transcribed into written word, and analyzed for developmental orders of consciousness (Lahey, Souvaine, Kegan, Goodman, & Felix, 1988). Using a content analysis approach (Patton, 2002), the data were then organized and analyzed, illuminating themes and patterns that existed between and among the respondents. The summaries below reflect the responses of the participants according to the order of consciousness.

4.1 Socialized minds

Participants who operated from a primarily third, or socialized, order (Kegan, 1994) discussed boundaries from a rule or policy perspective and concern over “getting into trouble” (Participant 7P28). They focused their discussion on issues of self-disclosure and dual relationships; i.e., how to handle “friendship” (Participant 5P30) discussions with clients. These third order social workers felt most rewarded when clients gave them emotional, verbal, or material recognition. They viewed the code of ethics as the primary document for managing boundary issues. Five participants made meaning primarily from the socialized order of consciousness.

4.2 Self-authoring minds

The four participants who made meaning primarily from a fourth, or self-authoring, order (Kegan, 1994) viewed the professional code of ethics as one of many guides that should be considered when processing boundary concerns. They talked of the importance of addressing boundary issues at the organizational level. A common phrase shared among the commentaries of the fourth order participants was “do what is right” (Participants 3E46, 6E55, 10E50). The self-authoring participants shared the notion that consultation with others is a crucial step in navigating boundary issues, as they are difficult to recognize when one is in the midst of them.

4.3 Self-transformational mind

Only one participant had evolved or was transitioning toward the more complex self-transformational fifth order (Kegan, 1994). This participant stressed that individual values, for workers, clients, supervisors, etc., enter into all areas of life. They must be recognized and understood for their important role. The most valuable tool in decision-making is open dialogue between all individuals. Boundaries were seen as contextual, with implications for all involved parties (Participant 4E53).

In-depth interviews with the 10 social work participants in this study revealed several concepts that related to professional boundaries: relational issues with clients, influence of personal and professional values, the role of supervision and consultation, the function of the NASW code of ethics, and the participants’ identity with social work as a profession. The participant’s subject-object structure was very influential in how they described and saw themselves in each of these areas.
In general, participants operating at the third order were subject to the values of the profession, their family of origin, their church, and their educators. They were unable to separate their value system from that of the institutions in their lives. Whereas participants operating at the fourth (or nearly fifth) order held their values as object and were able to identify those they had consciously adopted over the course of time (Kegan, 1994).

The exploratory interviews revealed that the 10 social workers made meaning of professional boundaries in different ways; and those differences related to each participant’s developmental order of consciousness. While the majority of the participants were in transition between orders, each had a dominant order they were operating from at the time of the interviews. Five of the social workers constructed their meaning-making primarily from a socialized order of consciousness. The other five were situated in a more self-authoring order of consciousness. This dichotomous representation of participant orders was reflected in variations of meaning-making of professional boundaries.

Social workers operating primarily at a socialized order of mind described boundaries in terms of rules to be followed. One of their big concerns was balancing the client/worker relationship so it did not move from professional to personal. They were most rewarded when others—clients and supervisors—acknowledged their hard work. Their value system was based on the values of important institutions in their lives: family, church, education, the profession, etc. They were uncomfortable with conflict and subconsciously found ways to avoid or minimize it.

The five educators had transitioned into more complex ways of making meaning. One educator showed evidence of constructing reality from a self-transformational, or fifth, order. She had achieved all that accompanies fourth order meaning-making but was more global, less polarized in her thinking, and saw her role as that of teacher, mediator, and system changer versus individual changer. The other four educators were partially or wholly situated in the fourth, self-authoring, order.

These social workers were able to step away from the guidelines posed by the profession and discuss boundaries in relation to their own value system. Participants operating at the fourth order were seldom conflicted and did not rely on others to relieve them from uncomfortable situations. They had created their own internal set of rules and were confident in their decisions. The pairs of quotations in Table 4 are examples of meaning-making by social workers operating from the second/third orders of mind contrasted with the workers operating from the more complex meaning-making positions of the fourth/fifth orders of consciousness.

5. **Limitations**

The very nature of this topic posed a limitation as well as an ethical situation. Many of the interviews started with a similar chord; hailing the code of ethics as the ultimate standard for the profession. The social work practitioners, in particular, talked of frequently referencing the code, using it to guide decisions, reviewing it periodically as a professional reminder (Participants 1P37, 2P37, 8P28). It appeared as if the practitioners were concerned about giving the professionally “correct answer” when discussing boundaries. As each interview progressed, the responses came from deeper, more personal places. Initially, however, this was challenging as an interviewer. The sensitive nature of this issue caused some participants to edit their words and stories as a means of protecting themselves or others. This may have impacted the SOI rating as it was difficult to discern between comments that may have been the participant’s unwillingness to share as opposed to the participant being subject to (not being able to see) the complexity of the situation.

An additional limitation was the nature of the sampling process. As Fine and Teram (2009) reported in their research, voluntary recruitment often results in participants who feel passionately about the research topic. The comments from the educators and practitioners in this study may reflect social workers who possessed a strong stance about boundaries. As with most qualitative studies, generalizations would be inappropriate (Patton,
A New Look at an Old Issue: A Constructive-Development Approach to Professional Boundaries

Table 4

Dichotomous Responses

<table>
<thead>
<tr>
<th>Less Complex Responses</th>
<th>More Complex Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>When faced with a task they disagreed with:</td>
<td></td>
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<tr>
<td>If I have to do it, I’ll do it. If the supervisor tells me that’s what you have to do, I will do it. If it’s left up to me, I wouldn’t do it. (But) I can’t just go against what my supervisor says. (Participant 5P30)</td>
<td>I wouldn’t do it. I would figure out a different way. I would argue. I was very strong about that. Everyone knew me as someone who wouldn’t back down. (Participant 6E55)</td>
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The role of blame when something goes wrong:

| When I thought one of my clients had died, I thought “Oh my God, I didn’t document those two days in court even though I went. I went but I didn’t document it and it’s a week later.” (Participant 8P32) | It’s not about policing people. If something goes wrong, looking at yourself. What part did I have in this rather than who can I blame? (Participant 6E55) |

Becoming aware of a boundary situation:

| If I knew that somebody stepped over (a boundary), I would struggle. I am not someone who stands up in that situation. (Participant 2P37) | I said to her, “You are not getting this. And if I have to be that directive to help you, I am going to be and here’s why.” (Participant 10E49) |

Perception of self in relation to client success:

| (The family) now donates money each month to the agency. They state that it was because of the great care he received. That makes me feel good because I helped him, and he must have spoken highly of me. They would not have gotten that money had I not treated him well. (Participant 1P37) | This (gift giving) was very much centered on their success, not mine. We were proud of them and happy to celebrate it but not own it. Even after I left, I heard they continued to donate (to the agency). It was a marker for them. (Participant 4E55) |

Speaking out against injustices:

| I just don’t like conflict from a personal point. I am just not a conflict person. I just keep my mouth shut. I will internalize it. I just don’t want to make waves. I would rather make friends. (Participant 2P37) | I try to teach my students this—that you have to speak out and you have to have that uncomfortable conversation. Because if you don’t then, I think there’s a vicarious liability that you actually have to own. (Participant 6E55) |
2002) but, in this case, it may be even more unsuitable due to this limitation.

The recruitment strategy used in this study impacted not only sample size but diversity. By putting limitations around years of practice, the social workers that participated were of a similar age. This may have impacted, to a small degree, their developmental order (Kegan, 1994). Polling from a larger group of practitioners without regard to years in practice may have yielded a larger sample as well as more diverse orders of consciousness.

An important consideration in this discussion is my own orientation to the world. As suggested by their interest in the meaning-making of others, researchers who are drawn to the SOI protocol are likely to be operating from the fourth order. Furthermore, the process of studying, conducting, and analyzing the SOI can be a transformational process for the interviewer as well as the interviewee (Lahey, Souvaine, Kegan, Goodman, & Felix, 1988). As the primary investigator in this study, my personal order of consciousness likely impacted how I conducted the interviews, framed questions, and analyzed the results. In reality, this is a limitation to any study that uses Kegan’s theory and the SOI protocol as its framework. Furthermore, researchers may be limited to recognizing only those elements that are object to them. For example, researchers who construct their reality from a fourth order are subject to what a fifth order participant holds as object. This raises the question: Can researchers of less complex orders recognize higher orders of consciousness in a research participant? This question, in and of itself, would be an interesting topic for future research.

In spite of the limitations of this study, the participant responses raised provocative comments regarding professional practice decisions, the role of agencies and supervision, and educational approaches in social work.

6. Implications for Practice

Responses from the participants in this study described not only how they made meaning of professional boundaries, but how their orders of consciousness influenced their entire social work practice. Relationships with clients, the interface between professional and personal values, the role of authority, and identity with the profession were specific themes that emerged. These themes have implications for practice in three distinct, yet interrelated, areas: critical thinking, agency expectations, and role of supervision.

The social work profession relies on practitioners to use critical thinking skills when faced with boundary and other ethical challenges (Doel et al., 2010). As stated by one educator in this study, “You are the critical thinker. You already have your professional degree. You are the critical thinker who has to navigate through that and figure it out” (Participant 10E49). Having a professional degree may not guarantee critical thinking skills in the way this educator envisioned. At less complex orders of mind, thinking is influenced by the values and preferences of the institutions with which individuals align themselves. In the present study, third order practitioners used the code of ethics and social work values to “get out of” conflicts. On the surface, this may sound like the ultimate goal. However, it is not evidence of critical thinking. It is evidence of alliance to the profession.

In undergrad, it was pounded into our heads—the social work ethics and boundaries. So, I guess after ethics and boundaries of “you can’t be friends with your clients. You can’t do this,” I have to stop myself before I get too involved. (Participant 5P30)

As this practitioner illustrated, her processing of certain situations was dependent on the rules in the code, not decisions she concluded on her own. Furthermore, when faced with situations that are not addressed in the code, third order practitioners turned to other institutions for their decisions. The notion of social workers’ reliance on internal values and traditions has long been evidenced in the social work literature (Buchbinder, 2007; Dewane, 2006; Françozo & Cassorla, 2004; Mandell, 2008). This discussion is not new to the field of social work. However, the epistemological approach...
A New Look at an Old Issue: A Constructive-Development Approach to Professional Boundaries

of constructive-developmental theory to this topic raises new questions.

A second theme revealed in the present study was the impact of developmental order on daily practice. For example, what happens to social workers who get pulled to stretch their professional boundaries when it pushes against agency policy or some other institution to which the worker is aligned? Fourth order practitioners were comfortable making decisions based on their own internal value system. Third order practitioners sought a decision from another source. One practitioner discussed transporting clients for one- to-two hour car rides, “The code doesn’t tell you what you should say during a car ride. Some people are better at small talk than others” (Participant 7P28). Coming from a socialized order of mind, this worker was uncomfortable in the close, somewhat personal confines of the car and sought an answer from the rule book. In the absence of a rule, he based his decision about appropriate and inappropriate client conversations on the opinion of other important people or institutions in his life. If this worker’s other allegiances (family, religion, etc.) taught him that inflexible boundaries can hinder relationship building, he might engage in conversations with the client that put him on a slippery slope (Gottlieb & Younggren, 2009), placing both he and the client in a precarious situation. If he were operating from a fourth order, the worker would be confident in seeking consultation, considering all perspectives, and self-defining his boundaries around casual client conversations. This story exemplifies the daily boundary decisions that social workers must make and how they proceed to make them based on developmental order.

Considering that half to two-thirds of the population never move fully into the fourth order (Kegan, 1994), a large percentage of social workers may be ill equipped for the complexity of their work. The very nature of social service agencies and the tasks required of social work puts workers in conflicted situations.

In my current job, I do mental health and I do child protective services.

Child protective services is really hard for me. I don’t like it. It’s too hard for me. I feel bad. I want to take the kids home. It’s hard. It’s hard for the kids. It’s hard for the parents. Everyone is crying. Everyone is…I still feel bad. I feel bad for everyone. My job is half and half. I have done half and half for four years. And it’s still the same. Nobody can make me feel better about it. (Participant 5P30)

This practitioner epitomized a third order individual who is torn between the expectations of her job and what she feels is right (based on institutions from her personal life). Kegan (1994) described these types of circumstances as being “in over our heads.” The demands of her job put her in positions of making decisions and actions that conflict with other values she holds. This conflict could, over time, have a negative effect on the worker, the agency, and the clients.

So, what’s gonna happen after I have to do something I don’t want to—that I don’t feel is right? What happens after that? I don’t want to go to work. I don’t want to go back to their house. I don’t want to have anything to do with it. I don’t want to talk about it anymore. I’ve already told you I didn’t like it. You’re not going to talk me into liking it—which supervisors try to make you see that this is good. And, it’s not. And, you’re not going to change my mind. I get what you are saying. But, it doesn’t feel okay. It doesn’t. (Participant 5P30)

As illustrated by this struggling practitioner, the role of supervision is critical to this discussion. Every study participant mentioned reliance on supervisors and other colleagues in some capacity when faced with practice dilemmas. Fourth order participants sought consultation as a means of gathering input as they processed their actions and made their decisions. Third order participants
relied on consultation as a means of securing direction from someone in authority.

In her consultant role, one fourth order educator stated confidently, “When people contact me in the middle of (a boundary situation), they know something is wrong” (Participant 10E49). However, if the practitioners are operating from a third order, they may not "know" something is wrong. Rather, they may find themselves in a situational conflict and are feeling torn. Individuals operating from the socialized mind will seek advice in order to avoid choosing between two competing institutions. They look for someone (such as a consultant or supervisor) or something (such as the code) to make the decision for them. Asserting assumptions about what is right and what is wrong may actually contribute to keeping a worker at a lower order of complexity. By not recognizing and supporting a different way of making meaning, supervisors may inadvertently stifle development.

Fortunately, agencies and supervisors are in ideal positions to support workers’ development to more complex ways of making meaning. They must first and foremost, however, create a holding environment in which the workers are acknowledged and supported at their current order of consciousness while gently encouraged and nurtured as they move to more complex ways of making meaning (Kegan, 1982, 1994; Love & Guthrie, 1999). This holding environment would need to be applied at all levels of the organization: individual workers, teams, and administration in order to create a culture of change (Kegan, 1994; Kegan & Lahey, 2009).

### 6.1 Implications for education

The results from this study may imply that teaching from the common place of NASW-prescribed social work values, principles and the code of ethics does not ascertain that individual social workers view their roles and responsibilities the same way. Developmental order, more than content, influenced how the participants made meaning of what they were taught. This revelation points to the implications for social work education.

Social work education has long been poised to help students develop more complex ways of making meaning. Students are challenged to explore their values, biases, and worldviews through a series of self-reflection assignments. While self-reflection alone does not move someone to a more complex order, it can create personal disequilibrium which sets the foundation for developmental growth (Helsing, Drago-Severson, & Kegan, 2004; Kegan, 1994).

In addition, many social work programs are structured around a cohort model which admits groups of students into the program at the same time each academic year. As a group, students progress through courses over one to three years (depending on the program). This cohort model provides an informal holding environment for students as the relationships with their classmates and professors that develops over time simultaneously provides support and challenge (Drago-Severson, 2004; Helsing, Drago-Severson, & Kegan, 2004; Kegan, 1994).

In spite of the positive foundation that exists in current social work programs, there are a few areas that pose challenges for Kegan’s theory. The first is the length of time that students are engaged in the social work curricula. Undergraduate programs are typically two years long; graduate programs range between one and two years (CSWE, 2008). Thus students may only be in that holding environment for four semesters, interrupted by winter and summer breaks. While that has been proven to be an adequate length of time for individuals to transition to higher orders of consciousness, it is a very gradual process (Kegan, 1982, 1994) and may not carry over once students leave the academic environment. That is a shortcoming that could potentially be addressed through continuing education requirements. Infusing Kegan’s constructive-development theory into the social work curriculum may be another strategy to invite students to more complex orders of consciousness.

The second focus lies with faculty. As adult learners, students must first be recognized as
“knowers” with underlying beliefs that shape and influence multiple aspects of their lives (Helsing, Drago-Severson, & Kegan, 2004, p. 167). Faculty could be educated in constructive-development theory in order to provide a classroom environment that allows students to safely explore their constructs. Understanding and supporting the resistance and struggle that accompany the transition to more complex ways of making meaning is crucial to the development process. Instructors could employ teaching strategies tailored to the individual development of students as opposed to heavy reliance on group distribution of content (Helsing, Drago-Severson, & Kegan, 2004; Kegan, 1994; Kegan and Lahey, 2009).

The final implication for social work education applies to both university classrooms and ethics and boundary workshops. Social work educators teach, endorse, and applaud adherence to the profession’s values and code of ethics. As suggested by this study, adherence does not equal understanding. For third order workers, it may simply mean they traded the values of one institution (such as family or religion) for the values of another—the social work profession. This does not encourage development into more complex orders. In fact, it may encourage stagnation if students fear failing grades or workers fear disciplinary actions. Assuming that more complex orders of consciousness would benefit the profession and individual social workers, teaching the values and code of ethics of the profession from a constructive-development perspective could enhance learning.

Education efforts may need to include regular, ongoing (beyond college education) exercises to support self-reflection and developmental growth. Training ethics and boundary presenters in Kegan’s orders of consciousness could provide a new approach to this area of social work. If ethics and boundary workshops were viewed as holding environments, not merely biennial updates, workers would be invited to transition into more complex ways of knowing. Overall, this may impact more than boundary decision-making. It may influence many aspects of worker’s professional practice.

Considering mainstream higher education practices and budgetary restrictions on agencies, the implications of this study are intriguing. In order to meet and support students and workers in their developmental journeys, educators and supervisors must assess and provide appropriate interventions for each individual in their charge. While this may seem like a daunting (if not impossible) task, the upfront effort may be worth the long term gain as it potentially protects agencies, workers, and clients.

7. Implications for Future Research

The limitations and implications of this study point to several opportunities for further research. The first suggestion for future research is to repeat the study with a larger pool of direct practice social workers. This would allow for consideration of mediating variables such as educational background, years in practice, and age. While originally thought to confound the study this would, in actuality, enrich the data and allow for deeper analysis of the implications of developmental order on social work practice and professional boundaries.

The results of this study suggested that education combined with job responsibilities may impact the developmental order of social workers. It would be a valuable contribution to the current body of knowledge to conduct a similar study with two other groups of social workers: university professors (regardless of level of degree or experience with ethics and boundary trainings) and social workers who have administrative and/or supervisory responsibilities.

Considering the educational implications of this study, an important group to add to future research is social work students. Professional standards and codes, including those dealing with boundaries, are introduced to students in their undergraduate classes. This prompts the overarching question: Are undergraduate students developmentally capable of navigating the complexities required by the social work profession and the code of ethics?

This study was a launching point for understanding the role of developmental order and social
work boundaries. The final suggestion for future research is replication of the current study from a broader perspective, i.e., how social workers make meaning of their professional practice. Replicating the study from a broader view may strengthen the analysis of how orders of consciousness impact social work practice decisions.

8. Conclusion
In spite of the challenges surrounding professional boundaries, it is important to the profession, practitioners, and future clients to keep the topic of professional boundaries at the forefront. Future research agendas should include a focus on adult development and methods of supporting social workers as they grapple with the complexities of professional boundaries.

References


