



Journal of Social Work Values and Ethics, Fall 2008, Volume 5, Number 2
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Editorial: Measuring Success

by Stephen M. Marson, Ph.D., ACSW

Based on past experience, I thought *The Journal of Social Work Values and Ethics* would need about three years to build a subscription rate of 300. Prior to the end of 12 months, the subscription rate was over 1,000. At the time of this writing, the subscription rate is approximately 4,500. In my mind's eye, that is a success.

Another way of assessing the success of *The Journal of Social Work Values and Ethics* is to examine how and when articles are cited in other publications. Recently, I reviewed a new social work ethics book and was happily surprised to see numerous citations from JSWVE. In my mind's eye, that is a success.

Are students, practitioners, and professors reading *The Journal of Social Work Values and Ethics*? Unlike paper journals, we can count hits for each issue and each article. Of course, counting hits is not absolute assurance that JSWVE is being read. What would be a better way to assess the impact of JSWVE on readers? How about a reader's willingness to write a detailed commentary regarding a recently published article? In this issue, Paul Adams, from the University of Hawaii, contributes a commentary on the work of Spano and Koenig entitled, what is sacred when personal and professional values collide? In addition, within this issue, Spano and Koenig respond to Adams. In my mind's eye, that is a success.

If you have thoughts you would like to share with our readers, I am interested in receiving them. Send your commentary to smarson@nc.rr.com.

Announcement: Term Paper Contest

The Journal of Social Work Values and Ethics (JSWVE) and the Association of Social Work Boards (ASWB) are sponsoring a term paper contest. The term papers will be collected by the JSWVE editorial board and judged by ASWB staff.

Details for the contest are listed below.

- Must have a central theme of social work values or social work ethics.
- Must be written as an MSW or BSW student. (Student may have graduated.)
- Must be nominated by a faculty member.
- Must follow the general manuscript submission guidelines found at

<http://www.socialworker.com/jswve/content/view/4/27/>

- Must be in APA citation style.
- Deadline for submission: May 15, 2009
- Paper must be submitted by e-mail to finnj@u.washington.edu
- Winning term papers will be published in *The Journal of Social Work Values and*

Ethics.

- Judges will be the staff at the Association of Social Work Boards.
- Judging criteria will include:
 - Knowledge of Material
 - Relevance of Citations on the Central Theme
 - Coverage of the Topic
 - Number and Appropriateness of Citations
 - Organization – flow of ideas
 - Quality of Writing – spelling, grammar, coherence
 - Originality of the Presentation

Letters to the Editors Fall 2008

Dear JSWVE,

Thank you for the recent issue of the *Journal of Social Work Values and Ethics*. I shall share the information with my teacher colleagues and students. Thank you once again.

Sudhir Sharma
Principal/Director
Centre for Studies in Rural Development Institute of Social Work and Research Ahmednagar,
India 414 001

Steve,

Once again, I wanted to let you know how much I value and appreciate your journal. Great work.

Grafton Hull

Additional Features at the *Journal of Social Work Values & Ethics*

The Journal of Social Work Values and Ethics has been accepted by *Academic Search Complete* and is now completely indexed in the comprehensive database. Since its inception, JSWVE has been indexed in *Social Work Abstracts* and *Social Services Abstracts*. With the inclusion of *Academic Search Complete*, JSWVE's readership will greatly increase.

The Journal of Social Work Values and Ethics has its own search protocol. Subscribers and readers can find it on the top left side of the home page immediately under the "time." I (Steve) have experimented with this feature and it works GREAT. The search engine is limited to articles published in JSWVE. Try it out. Insert a key word (concept, author's name, and so forth) and let me know how it works.

The Journal of Social Work Values and Ethics is listed in [The Directory of Open Access Journals](#). Click to learn more about DOAJ. If you have suggestions for additional features, let us know.

Guest Editorial: The Code of Ethics and the Clash of Orthodoxies: A Response to Spano and Koenig

Paul Adams, Ph.D. University of Hawaii

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Abstract

This article argues for restraint in interpreting the *NASW Code of Ethics* in ways that assume and enforce an ideological orthodoxy, whether secularist or religious. Orthodox secularism is neither compelling in itself nor required by the *Code*. It is inappropriate for a professional code of ethics to impose a narrow ideological orthodoxy or party line.

Key Words: code of ethics, social work, secularism, orthodoxy, religion

Introduction

Both critics and some defenders of the *NASW Code of Ethics* (1996, 1999) see the *Code* as requiring members of the profession to uphold orthodoxy in matters that are highly contested in the larger society. Some writers deplore the alleged ideological narrowness of the *Code* and its coercive use against social workers whose views conform to the Judeo- Christian social ethic once assumed by the profession. Others approve of the *Code* precisely because they see it as marking a definite break with traditional positions that they deplore.

In their recent contribution to this journal, Spano and Koenig (2007) ask, “What is sacred when personal and professional values collide?” and offer a surprising answer--the *NASW Code of Ethics*. The authors note the clash of personal worldviews “between Evangelical Christians and progressive writers.” They refer to “radical” positions, but seem to mean here those of the evangelicals, not those of social workers who have traditionally called themselves radicals and in some cases sought to develop a radical social work (Bailey & Brake, 1976; Galper, 1980; Longres, 1996; Reisch & Andrews, 2002). In any case, they propose the *Code of Ethics* as a “screen through which competing worldviews must be drawn to create constraints on professionals’ behavior.” The *Code* is thus elevated to a position outside and above competing worldviews. The latter are

contingent and individual, the former absolute and binding. To further their proposal and its application to evangelicals within the profession, the authors offer a six-stage model for practitioners to examine—and be held accountable for—the relation between their worldview and the *Code*.

The *Code* is intentionally broad in its language and, like other “sacred texts,” is subject to a range of interpretation. If the authors’ solution is to work as a way to bring evangelicals into line, therefore, they must narrow the range of acceptable interpretation to exclude or at least challenge the evangelical reading of the *Code*. Here, not from an evangelical perspective but from within the orthodox Judeo-Christian tradition, I want to raise some preliminary questions about this approach to the Code as sacred text or ideological enforcer, or even as screen in the way Spano and Koenig (2007) propose.

On Truth

I want first to note and then sidestep the difficulties raised by the authors’ use of “Truth” in quotes. The point here seems to be that people who hold radical positions (evangelical or progressive or both?) believe they have the Truth and draw from this belief the conclusions that (i) the *Code* should be reinterpreted to be consistent with this Truth, and (ii) therefore [*sic*] there is “little need for self-reflection related to the consequences for clients when we impose our ‘Truth’ on them.” Since neither conclusion follows from the premise, I take the authors to be describing a mindset rather than an argument. Certainly, there has been no shortage of social workers’ imposing their views of a situation on clients, whether their perspective was Freudian, Marxist, or Christian. Galper (1975), for example, proposed a rigorous client selection process in which radical social workers would see clients as political allies and select them on the basis of what could be achieved politically with them. One, perhaps cynical, way of thinking of therapy is as an effort to get clients to abandon their own view of their world and accept that of the therapist. The *Code* rightly warns against the temptations involved and the threat to self-determination.

Truth, of course, is currently a contentious concept. By using the term as they do, the reader may ask, do the authors have in mind its religious use referring to the ultimate meaning, purpose, and direction of life, as in “I am the Way, the Truth, and the Life” (Jn 14:6)? Or are they communicating a belief that there is no objective truth, that all truth is relative (except, presumably, the assertion that that is the case)? Or do they simply mean that some people are dogmatic and

closed-minded, lacking in the virtues of critical thinking? I will assume the authors want to suggest the last of these, which is in any case, the least controversial. Again it is true of certain militant atheists and radicals and revolutionaries of all kinds, and of complacent liberals, too. It is a useful reminder that social workers of all persuasions need to improve their critical thinking skills, to be more tentative and less dogmatic.

The Context

As Spano and Koenig (2007) observe, the *Code of Ethics* is not a fixed text but has evolved through several iterations in the direction of greater complexity and specificity. As a guide for practitioners, it offers both enforceable guidelines and standards to which social workers are exhorted to aspire (Reamer, 2006). “However,” argue Spano and Koenig (2007), “the values, principles, and guidelines in the Code are sufficiently broad to allow reasonable people to understand and apply principles in different ways.” There is good reason for this. A professional code of ethics is meant to be authoritative for members of the profession—it is necessarily broader than the policy statements that NASW or similar organizations issue from time to time on controversial issues. These latter reflect the dominant view within the organization but bind no one. In contrast, the more specific a code of ethics becomes, and the more it seems to require adherence to a particular ideological orthodoxy, the more it lays itself open to precisely the charges that have been made against the NASW *Code*.

In 2007, the National Association of Scholars (NAS) released a report about the enforcement of NASW’s code of ethics in schools of social work. It was called *The Scandal of Social Work Education*, and the scandal alleged was one of ideological coercion, discouragement of open discussion, and suppression of dissenting views. The study cites several cases in which students allegedly were coerced into advocating to their state legislature for such causes as homosexual foster homes and adoption, and abortion—and penalized when they refused or advocated for a different position. As Will (2007) sees it, NASW “adopted a surreptitious political agenda in the form of a new code of ethics....” NAS president Stephen H. Balch summarizes it like this:

"What we've uncovered," observed Dr. Balch, "reveals a field that has supplanted open minded inquiry with left-wing, morally relativist, and occasionally paranoid dogma. There is certainly room for vigorous debate about the extent to which responsibility for life's problems derives from individual choices as opposed to social structures, discrimination, or even, as the CSWE would have it, 'the global

interconnections of oppression.' But there is little in the doctrinaire, activist stance of contemporary social work education to encourage such colloquy. Instead, academic freedom has been replaced by ideological lockstep” (NAS, 2007a).

I quote this passage not to endorse it, nor to address the extent to which the abuses cited by the report are typical, but because it illuminates the context in which Spano and Koenig (2007) argue for a stricter, narrower interpretation of the *Code of Ethics* than that suggested by evangelicals in social work. In the wider context of voluntary social services, their position appears to be of a piece with current efforts, successful in Massachusetts, to drive agencies that have an orthodox religious identity, like Catholic Charities, out of the adoption business; to prevent such agencies hiring leadership employees of like faith to carry out their mission if they also provide services utilizing state funds, as in Colorado (Chaput, 2008); or to refuse to allow a religious exemption when a physician or hospital otherwise would be expected to perform an abortion, or a pharmacist to provide an abortifacient drug, as in New Jersey (National Conference of State Legislatures, 2007). All aim at restricting religious freedom in the delivery of social welfare services. Looked at in this way, we can see that the divide is not between “Truth” (in quotes) and dogma on one side and on the other, Reason and reasonableness as embodied in the *Code*. Each side in this ideological divide or “culture war” sees the other as (i) imposing its ideology or worldview on those over whom it has power, (ii) blinded by its own conviction that it has Truth on its side, and (iii) intolerant of different views. It is a clash of orthodoxies.

Clash of Orthodoxies

In characterizing these opposing orthodoxies, I follow Princeton legal philosopher Robert George (2001), because he offers a clear way of differentiating the division between traditional/religious and secularist orthodoxies without a theologically tendentious typology of Christians such as that of Keith-Lucas (1983, cited by Spano & Koenig, 2007), in a way that clearly delineates the divisions and alliances among Christians and between them and those of other faiths. In this clash of orthodoxies, George (2001) explains, “Orthodox Jews, conservative and evangelical Protestants, faithful Catholics, and eastern Orthodox Christians today find themselves allied with one another in defending, say, the sanctity of human life or the traditional conception of marriage against their liberal co-religionists who have joined forces with secularists of various stripes to support such things as legal and publicly funded abortion, physician-assisted suicide, no-fault divorce, and the social acceptance of homosexual and other forms of nonmarital sexual

conduct” (p. xiii). For the purposes of his discussion, therefore, George (2001) treats theologically liberal Christians and Jews who share these positions with their non-religious allies as part of the secularist camp. The same practice is followed here on the grounds that these theologically liberal groups do in fact consistently side with secularists on the issues cited by George (2001). Note that the concept of religiously orthodox as used here denotes a larger set than evangelical Protestants, the group targeted by Spano and Koenig (2007). It embraces also faithful or theologically orthodox Roman Catholic and eastern Orthodox Christians, Jews, and Muslims.

Secularist orthodoxy goes far beyond the common and traditional understanding of the First Amendment, which protects religious freedom from state restriction or subsidy. It aims at the complete separation of faith and public life, keeping “the public square naked of religious symbol and substance,” as Neuhaus (1984, p. 21) puts it. “Secularism,” in George’s (2001) description, “aims to privatize religion altogether, to render religiously informed moral judgment irrelevant to public affairs and public life, and to establish itself, secularist ideology, as the nation’s public philosophy” (p. 6). In the most extreme version, as expounded by Dawkins (2006), raising your children in your own faith becomes a form of child abuse. Religion is to be practiced, if at all, only between consenting adults in private. Against this effort to push it to the margins of society, political scientist Hugh Heclo (2003) says, “[A]uthentic religion refuses to stay something private and confined inside people’s heads and hearts. It demands to be engaged in the public choices that lie in government hands. It invites others to see that the United States has much more to offer the rest of the world than secular materialism” (p.18).

The issues at stake “have mainly, though not exclusively, to do with sexuality, the transmitting and taking of human life, and the place of religion and religiously informed moral judgment in public life” (George, 2001, p. 4). George sets out to demonstrate without appeal to revelation that Christian morality is *rationaly* superior to the secularist worldview that has established itself “in the academy and other elite sectors of Western culture” (p. 4), not least, I might add, in that historically most Christian of fields, social work.

George (2001) recognizes that for an orthodox Christian or Jew to justify a position on the basis of revelation—that homosexual conduct (i.e., acts rather than disposition) or euthanasia is wrong, for example—carries no weight with someone who does not accept the revelation in question. Nor, I would add, is it persuasive to argue that my opposition, say, to same-sex marriage

or abortion, is rooted in my faith, and that you should accept my position in the interest of religious diversity. If Spano and Koenig (2007) are right to claim that the orthodox Judeo-Christian—and virtually universal, until yesterday—view of marriage is discriminatory and oppressive, it is a poor response to say, so to speak, God made me do it and you should respect my religious beliefs and right to oppress and discriminate. This is a kind of multiculturalist argument, and as such is open to the very problem with moral and cultural relativism pointed to by critics of multiculturalism—it leads ineluctably to the denial of universal human rights for women, children, and dissidents (Barry, 2001; Kelly, 2002; Jones, 2006; Okin, 1999; Sandall, 2001).

George's book on *The Clash of Orthodoxies* (2001), therefore, relies on reason unaided by revelation or special pleading. It appeals to public reasons that are accessible to anyone with or without a particular religious belief. Indeed, there are some secular writers who support the positions George (2001) defends with respect to abortion and euthanasia: see, for example, the compelling work of author and journalist Nat Hentoff, who describes himself as “a Jewish, atheist, civil libertarian pro-lifer” (2005, p. 6). George (2001) aims to engage secularists on the ground they appeal to, that of reason and reasonableness, arguing that the Judeo-Christian ethic is rationally superior to the secularist alternative. One of the rhetorical challenges to this approach is the tendency of secularists to dismiss all arguments against certain practices, like abortion, as deriving from religion, which they claim to be a private matter that should be kept to oneself and not introduced into the realm of public policy or professional practice. Even secular, non-religious arguments against abortion or same-sex marriage are thus conveniently dismissed without a hearing.

Arguing the rational superiority of the Judeo-Christian orthodoxy over its secularist rival goes beyond the scope of this paper. My aim is more modest, namely, to show that the NASW *Code* does not work well as an ideological club with which to beat Christian colleagues into either compliance or leaving the profession. Unlike NAS (2007b), I hold that the *Code's* (and CSWE's) commitment to social and economic justice, for example, is not unreasonable in itself (although its interpretation may be narrow, partisan, and coercive). Justice, after all, is an apparently universal virtue across widely differing cultures and religions (Peterson & Seligman, 2004). In our own place and time, theorists like Rawls (1971), Nozick (1974), and MacIntyre (1984, 1999) have differed substantially on what is fair and just in society; but they all agree that (social) justice is a

public good and a virtue. At the same time, the NAS initiative—like Spano and Koenig (2007), but from an entirely different perspective—reminds us of the dangers of imposing our views on others, failing to reflect properly on our professional use of self, and the challenge of serving, in policy and practice, the needs of those who are most vulnerable and disadvantaged in society. I will argue that in all these respects, the secularist orthodoxy is neither compelling in itself nor required by the *Code of Ethics*.

Christianity and Social Work

In the context of evangelicals' complaints that they have been subject to discrimination and lack of collegial respect within the profession, Spano and Koenig (2007) say ominously, "Not all perspectives can find a home within the social work profession." This is literally true, no doubt, as one can see by thinking of Nazi ideology, to take an extreme case. But remarkable in the hostility Christians perceive from their professional colleagues toward themselves or their religion is how that intolerant stance ignores the central role that Christians have played in social work and social welfare. This blindness to Christianity's centrality in the development and current provision of social services is general in the social science literature, as the exceptions to this rule have complained (Boddie & Cnaan, 2007; Brandsen & Vliem, 2007; Cnaan, 2002; Scales & Hugen, 2002; Unruh & Sider, 2005; Wuthnow, 2004).

Yet Christianity identified love (*caritas*, charity) toward those outside the tribe or community as well as inside as central to the faith and to their understanding of God. In this vein, Pope Benedict XVI's (2005) first encyclical letter, *Deus Caritas Est*, links love as a theological virtue and definition of God to the current charitable activities and obligations of the Church and its social services in a secular age. Stark (1996) helps us understand how new and distinctive the Judeo-Christian thought was that developed in the Roman Empire linking a highly *social* ethical code with religion. The notion that because God loves humanity, humans cannot please God unless they love one another was completely alien to contemporary paganism. The famous passage in Matthew 25:35-40 that begins "For I was hungry, and you fed me," expressed a morality that was new and different in the early Christian centuries. This difference between Christian and pagan morality showed itself dramatically in the differential responses to the great plagues that swept the Roman Empire with devastating results in the second and third centuries. In a nutshell, the pagans, including the great physician Galen, abandoned the sick and dying and fled the cities for the hills

and country, while the Christians stayed and nursed the sick, both Christian and pagan (Stark, 1996).

Charity in subsequent centuries had its roots in this ethic of self-sacrificing service and love of neighbor, and monasteries and religious orders, as well as bishops, priests, and deacons, were central to the provision and development of social services in Christian countries and beyond. The systematic ignoring of this rich tradition in the social work literature is itself a kind of scandal, a “secular bowdlerizing of the history of social work” that Wolterstorff (2006, p. 139) describes as “academically irresponsible and morally reprehensible” (p. 139). It is true, of course, that Christians came to face the persistent problem of poor relief that vexes secular policymakers to this day—how to provide adequately for those who are poor and hungry while not giving incentives to idleness and dissolute behavior. But it was the secular authorities and policy experts who developed that first great triumph of modern liberal social policy, the great Poor Law Reform of 1834 in England and parallel efforts at “detering pauperism” through the workhouse in the United States.

The challenge for social work in this respect, from the Charity Organization Societies to evidence-based practice, has always been to combine, on the one hand, professionalism, science, efficiency, effectiveness, and accountability with, on the other hand, the disinterested charitable, caring impulse that first linked a highly social ethic with religion. Without going further into the history of social welfare and the key role of the early and medieval Church, it is not hard to see that Christianity in recent times—from the Christian socialists of Oxford who started the settlement house movement, the Social Gospel advocates, the urban missionaries of the Salvation Army, the Christian providers of healthy alternatives to the saloon through the YMCA and YWCA, to the vast social service network of Catholic Charities today—has played a central role in the development of both social welfare and the profession of social work (Leiby, 1978). This role includes active involvement of Christians, including evangelicals, in social reform movements, such as the abolition of slavery, emancipation of women, against the eugenics movement (then and now), for civil rights, and in defense of the dignity and worth of the individual from conception until natural death.

What NAS (2007b) found in its study confirms what many Christians in social work schools today report—that those who adhere to the Judeo-Christian orthodoxy on which their

chosen profession is founded feel intimidated into silence by the force of secularist orthodoxy, not in society at large or in working with clients, but among their student peers and especially their professors. This is the abuse of power that gains license and credibility from statements like that of Spano and Koenig (2007), which in context raises the suggestion that orthodox, observant Christians do not belong in social work.

Broadly but Reasonably

Spano and Koenig (2007) rely heavily on an unpublished (but Internet-accessible) commentary on the *NASW Code of Ethics* by Ressler (1997) to show how orthodox Christians, or at least evangelicals, willfully distort the *Code's* clear meaning for their own ideological purposes. The Spano and Koenig (2007) critique inadvertently raises the question of whether the NAS is right in claiming that the *Code* enforces a narrow, doctrinaire stance that brooks no dissent. It also invites us to ask whether what is clear from the standpoint of the secular orthodoxy is as True and obvious as the authors suggest.

For example, the authors use a quote from Ressler (1997) about the “Commitment to Clients” standard. They say that the National Association of Christian Social Workers (NACSW) “equates ‘abortion, sexual behavior, gambling, and control of pornographic material’ with child abuse.” The quote from Ressler does not mention child abuse, and the word “equates” is not his. Spano and Koenig (2007) presumably have in mind the example provided in the *Code* under Standard 1.01 of the obligation to report child abuse or threats of harm to self or others. The Ressler commentary here is indeed confusing, since the standard seems to be referring to the kind of situation in which a social worker learns something from a client who does not want it revealed, but must decide whether (or is required by law) to report it to a third party, even if not required by law to do so. Reamer (2006), for example, gives three further examples that all follow this pattern. Ressler’s (1997) comment may appear under the wrong standard as well as suffering from non-parallel construction (I assume he means gambling is bad but control of pornography is good, and “sexual behavior” is good but only within marriage, though he lists them side by side as if all were bad). Nevertheless, it raises an important question about the potential conflict between a client’s behavior or intended behavior and the well-being of society.

Child abuse is clearly harmful to the child and to society, which has a legitimate interest in the protection of children. But if—as traditional orthodoxy asserts—the child in the womb has an

intrinsic dignity and worth, it is reasonable to argue that abortion, which kills the unborn child, is certainly no less harmful. It violates at least one core social work value, the dignity and worth of the person. The concept of “person” is, of course, highly contentious in this context.

In the implicit view of some defenders of abortion, the human body is extrinsic to the consciousness that inhabits it, so that “your human organism came to be at one time but that *you* came to be at another time (say, with the emergence of your self-consciousness)” (Lee & George, 2005, p. 5). In this “dualistic delusion,” as Lee and George (2005) call it, the person inhabits the body, like a ghost in a machine. But if this body-self dualism is a mistake—“since we are not consciousnesses inhabiting bodies but are physical organisms possessing from the beginning a human (i.e., rational) nature—it follows that we came to be when these physical organisms came to be” (Lee & George, 2005). The contrary position, that there is something intrinsically valuable in human beings only when certain mental functions or states are present, allows for the intentional killing of innocent human beings at either end of the life span and those with serious disabilities..

This is, of course, no more than a hint at the kind of discussion of the personal and social implications of abortion that could be had without appeal to revelation or religious belief as such. The *Code of Ethics* (as distinct from NASW) is silent on all this, and rightly so, but it commits the profession to social justice, to the dignity and worth of the person, and to the defense of the most vulnerable and disadvantaged in the society (and who is more vulnerable in these terms than a person at the embryonic stage of life, unless a comatose person in the last stages?). The *Code* holds to client self-determination as an ethical standard, but whether this includes a professional obligation to assist a client in obtaining an abortion must be tied to the question of whether we see her “choice” as exercising a right to control her own body or as cutting short a separate human life with its own DNA and principle of development in the body she temporarily shares with it. No one (unless the philosopher Peter Singer, who admits the lack of moral distinction between abortion and infanticide but justifies both) argues that a “right to choose” as a matter of self-determination extends to killing another innocent human being (Singer, 1999). The question is whether that is what is involved (Horne, 2007).

My point is not to try to settle the matter here, but to suggest that our values and code of ethics require us to take these issues seriously and not treat them as settled by resort to a sacred text, even our own. No professional code could in any case make facilitating the intentional killing

of an innocent human being right or just. Spano and Koenig (2007) assert that “when personal values conflict with professional values, the *Code of Ethics* as understood within the knowledge base of the profession, should take precedence.” But if a professional code did endorse or permit the intentional killing of innocents—as one can imagine in a state like Nazi Germany that made such killing official policy or in contemporary European countries where legal guidelines are being developed for baby euthanasia or killing babies with disabilities (Smith, 2006)—such a code could not bind the conscience of a helping professional, secular or religious. Such a code would need to be challenged and resisted.

Fortunately, the NASW *Code* does not require participation or collusion in any such action. There is, then, no ethical justification for treating issues like abortion or euthanasia as settled and beyond discussion for social workers—with the suggestion that those who adhere to the orthodox Christian view of the sanctity of life do not belong in the profession.

In their discussion of professional ethical action, which is Stage 6 in the authors’ six-stage model, Spano and Koenig (2007) return to the question of abortion. They offer a scenario in which a social worker who believes abortion is wrong is working with a single pregnant woman who at first decides to have her baby but then is faced with changed circumstances and is rethinking her decision. Citing the *Code of Ethics* on termination of services (Section 1.16), the authors comment:

Even though the client made an initial decision that is consistent with the social worker’s worldview, it is imperative for the social worker to remain involved with the client (and not abruptly terminate services) to help her address difficult decisions about whether or not she can keep and provide for her baby because she must return to work. As consistent with the *Code of Ethics* (Section 1.16), social workers should not terminate services abruptly but continue to monitor the client’s situation even if clients are considering decisions that are not consistent with the social workers’ personal worldviews.

Well, of course. There is nothing about Judeo-Christian orthodoxy that would suggest a social worker should abruptly terminate services in these circumstances. The client has not even made a decision yet in this scenario, and if she decides not to keep her baby, there are obvious alternatives to abortion that do not involve the death of her child. If she does have an abortion, a social worker who believed that she had acted wickedly would still not be obliged by virtue of that belief to terminate services abruptly, or at all. Do not all social workers work with clients who

make what they consider to be bad choices, whether these involve crime and delinquency, adultery, child maltreatment, abortion, promiscuity, substance abuse, or self-mutilation? Some of these practices are illegal, some not, but all may reasonably be considered harmful to oneself, others, or society at large. The counsel against abrupt termination has nothing specifically to do with the orthodoxy to which the practitioner subscribes, whether it is Judeo-Christian or secularist.

On the question of abortion itself, as well as in terms of religious or denominational affiliation, it should be noted that it is the social work secularists who are out of line with their clients' values and worldviews. In Hodge's (2003) analysis, the graduate social workers supported the view that a woman should be able to obtain an abortion for any reason by 77% to 24%, whereas members of the working class answered negatively by 64% to 36%. This analysis of General Social Survey data from 1972 to 1998 suggests that issues of self-determination and managing personal and professional value conflicts are likely to be at least as challenging for liberal secularist social workers, since there is a much wider discrepancy between their values and worldview and those of their clients.

Marriage, Sex, and Children

Another area of contention between the two orthodoxies lies in the domain of marriage and sex. Here Spano and Koenig (2007) again treat the orthodox secularist view as self-evident and I will argue that it is neither persuasive nor required by the *Code*. This is a difficult area for at least two reasons. First, the institution of marriage, essentially universal and understood everywhere to be about sex and children, has become dramatically weakened in the West in conception as well as practice, both reflecting and reinforcing class and ethnic inequalities. Second, it has become enmeshed in what Blankenhorn (2007) argues is an entirely different issue, namely the rights of homosexuals to equal respect and dignity. Because this mixing up of gay rights with the fate of marriage is readily accepted or taken for granted by Spano and Koenig (2007), and by some courts and legal scholars, too, it is necessary to deal with the social ethics of marriage at some length. We need to do this in order to examine whether this confidence in a position previously unknown in the history of social work is justified.

Marriage and family structure are matters central to the concerns of social welfare policy and social work practice, and indeed to the well-being of children, adults, and society as a whole. We have seen in recent decades a dramatic decline in marriage as a social institution that provides

a stable, long-term, socially recognized and supported context for sexual intercourse and the rearing by their own parents of any children that result from it (Blankenhorn, 2007; Child Trends, 2006, 2007; Hymowitz, 2006; Waite & Gallagher, 2000).

The weakening of marriage is evident in the very definition of the institution, as well as in high rates of divorce, co-habitation, births, and childrearing outside wedlock. The causal links and interactions among these developments may not be universally agreed, but the effects on children and adults are increasingly clear and recognized across the political spectrum. Marriage is a very powerful protective factor in all sorts of ways—greater emotional and financial stability, support from the families of both parents, increased earnings, and so forth. Even at the same level of poverty, marriage protects children from all the familiar forms of child *ill-fare* (Hymowitz, 2006; Waite & Gallagher, 2000). Put the other way around, as the report, *Can government strengthen marriage?* (National Fatherhood Initiative, Institute for Marriage and Public Policy, & Institute for American Values, 2004) summarizes the scientific evidence:

A growing consensus confirms that children raised outside of intact marriages are at higher risk for experiencing a variety of negative outcomes including higher rates of poverty, welfare dependency, crime, school failure, substance abuse, juvenile delinquency and adult criminality, Medicaid costs, mental illness and emotional distress, domestic violence, unwed teen pregnancy, sexually transmitted diseases, poor quality family relationships, and child abuse (p. 6).

Whether parents get and stay married has an enormous impact on their children. Even controlling for important family characteristics like parents' race, income, and socioeconomic status, children of married parents are physically and mentally healthier, better educated, and later in life enjoy more career success than children in other family settings-- advantages that disappear if the parents divorce (Amato, 2005; Blankenhorn, 2007; Center for Marriage and Families, 2005; Glenn, 2001; Marquardt, 2006; Waite & Gallagher, 2000). For children as well as for women in relationships, marriage is the safest place to be, with much less child maltreatment and partner violence. Having a live-in boyfriend, on the other hand, is itself a risk factor for the woman's children (Waite & Gallagher, 2000). As more recent and sophisticated studies have shown, these links cannot be explained simply as a selection effect (i.e., those who are healthier and richer are more likely to get and stay married in the first place). Marriage itself has an important and independent protective effect for children, women, and men (Waite & Gallagher, 2000). It is our

major pro-child institution, and its breakdown merits the concern of social workers and all those concerned with the disastrous social consequences, above all for minorities and those in poverty.

“In all observed societies,” Scruton (2006) observes, “some form of marriage exists, as the means whereby the work of one generation is dedicated to the well-being of the next” (pp. 82-83). The research shows clearly how changes in family structure explain most or all the increase in child poverty in recent decades (Sawhill, 2003). A study by the Urban Institute scholar, Robert I. Lerman (1996), found that the trend away from marriage in the 1970s and 1980s “accounted for almost half the increase in child income inequality and for more than the entire rise in child poverty rates” (p. S119).

The weakening of the links among marriage, sex, and parenthood (Marquardt, 2006) has affected even the way we define and conceptualize marriage. This is apparent in the widespread tendency to reduce our concept of marriage to a kind of Hallmark card sentiment, having to do with the feelings of love and commitment between two adults, but nothing intrinsically to do with sex or children. Thus, when Spano and Koenig (2007) describe marriage as “one of the central elements of our human existence,” they seem to have this adult-centered meaning in mind. Contrast the definition offered by Blankenhorn (2007) on the basis of his lifetime’s research on marriage and the family in the United States, across the world, and throughout history:

In all or nearly all human societies, marriage is socially approved sexual intercourse between a woman and a man, conceived both as a personal relationship and as an institution, primarily such that any children resulting from the union are—and are understood by the society to be—emotionally, morally, practically, and legally affiliated with both of the parents (p. 91).

This understanding of marriage is reflected in the U.N.’s Universal Declaration of Human Rights, as spelled out in the Convention on the Rights of the Child adopted by the U.N. in 1987 in this passage from Article 7:

The child shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality, and, as far as possible, the right to know and be cared for by his or her parents (quoted by Blankenhorn, 2007, p. 188).

Or as Blankenhorn (2007) puts it: “*I have a right as a child to the mother and father who made me*” (p. 189, italics in original).

Looked at in this way, it is incorrect to say that homosexuals are denied the right to marriage as Blankenhorn (2007) defines it and as it has been generally and universally understood, at least until very recent years. Marriage as an institution is mute and formally indifferent on the question of sexual orientation or disposition or desire. Sexual desire or orientation is not a criterion for admission to or exclusion from marriage. And for good reason. As Blankenhorn (2007) says, “But if we as a society cross that Rubicon—if sexual desire becomes a valid legal principle for structuring a marriage—it is hard to imagine the moral metric by which bisexual spousal groups would be excluded from this newly orientation-sensitive institution” (p. 259). Indeed, something “very close to a socially recognized group marriage” (Blankenhorn, 2007, p. 258) took place in the Netherlands in 2005, involving a man self-identified as heterosexual and two women who called themselves bisexual.

Yet Spano and Koenig (2007), who are not alone in this, see the denial of marriage (to each other) to homosexual couples as discriminatory, oppressive, and by inference, incompatible with the *Code of Ethics* (despite the latter’s silence on the point). But what could marriage mean in this context? If it is, say, a legally recognized relationship between two (for the moment, anyway) interdependent adults who love each other, why would it exclude the two elderly English sisters, 88 and 81 years old, who had cared for their parents until their deaths and now cared for each other? The Burden sisters brought their case to the European Court of Human Rights in 2006 and at the time of writing it is under appeal. The case raises the question of what combination of two—or more? — people living together in a household should be eligible for tax and other advantages if marriage and its legal benefits are extended beyond heterosexual couples and the state’s interest is extended beyond its traditional primary focus, that of supporting and protecting children. The Civil Partnership Act of 2005 in the U.K. extended tax exemptions and benefits formerly reserved for married couples to same-sex couples. If such an extension becomes law, here as it has in the U.K., should eligibility for benefits require (a) that the couple not be related by blood and/or (b) that they are in a sexual relationship? The two sisters demanded, in effect, to be treated like lesbians (Rozenberg, 2006).

If sex is seen as essential to the definition of marriage, as it always has been, we have to ask, when sex gets detached from parenting, what is the state’s interest in whether or not a couple is having sex? And if marital sex is no longer understood as intercourse between a woman and a

man whose one-flesh union becomes in principle a single reproductive unit, then why should marriage be limited to two people, as polyamorists reasonably ask?

Some same-sex marriage advocates, like Spano and Koenig (2007), see marriage as a good that should be open to same-sex couples. Others (e.g., Coontz, 2005; Stacey, 1996) see marriage as a bad institution that needs to be undermined and deconstructed by extending its definition to include same-sex couples (and some would add polyamorous groups of any number and combination of sexes). In either case, the effect is to hijack marriage as that institution the most important purpose of which, from the earliest legal codes on, has been to “give to the child the mother and father who made the child.” Blankenhorn (2007) continues, “Marriage does not exist in order to address the problem of sexual orientation or to reduce homophobia. Marriage does not exist in order to embody the principle of family diversity or to maximize adult choice in the area of procreation and childrearing” (p. 199). Whether the aim is to deinstitutionalize marriage completely, as Coontz (2007) would have us do, turning it from a structured social institution into a private relationship, or simply to extend the institution to a new population, as Spano and Koenig (2007) want, the effect is to take our most pro-child institution and transform it in ways that subordinate the rights and needs of children to the freedoms of adults.

In this discussion, I have sought to show that the views of sex and marriage that Spano and Koenig (2007) take as the default position implied by the *Code of Ethics* and against which the religiously orthodox need to assess their own “personal world view,” are very far from settled or compelling. The position of the secularist orthodoxy is not a requirement for social workers or anyone else concerned with the social problems that beset their clients, not even remotely. Nor does the *Code* take, require, or imply the Spano and Koenig position on these questions.

Spano and Koenig (2007) are also concerned with a different question—that of how and whether social workers who consider homoerotic or other sexual conduct outside marriage to be immoral can work professionally with those who engage in it. This can be addressed more briefly. As I noted earlier, it is not different in principle from other cases in which clients engage in practices that their social worker considers wrong or harmful. Indeed, that is typically the case, surely. Now as to assisting clients who *want* to try to change their sexual orientation through conversion therapy or some related treatment, is that not a matter of client self-determination? No, the authors seem to say, because it does not work and is therefore unethical and harmful. One too

flippant response would be to point out that if using ineffective treatments were a crime, we would all be in jail.

But what if the treatment were improved to the point where it demonstrably did work? Would the objection disappear, and how would a secularist social worker, in self-reflective mode, deal with a client who wanted to change his or her sexual orientation? Would it depend on the client's wishes and goals, or the practitioner's views of the sexual behavior in question? For example, would it be yes for treating necrophilia or pedophilia (a field where ineffective treatments continue to be used with sexual predators for lack of anything better), but no for homoerotic desires? Would the worker's refusal to help the client meet their goals in this case be based on nothing more than the worker's personal worldview which rejects the traditional Judeo-Christian and natural law-based view of homosexual desire as intrinsically disordered (e.g., Budziszewski, 1997; Finnis, 1997; George, 2001)? In that case, it would be the secularist practitioner's view of the disposition or act that prevailed, not the client's view or wishes.

On the question of professional decision making, Stage 5 in the authors' scheme, Spano and Koenig (2007) cite the *Code of Ethics* to the effect that social workers "assist clients in their efforts to identify and clarify their goals" (Section 1.02). They then offer a remarkable example: "a gay couple may meet with the social worker to strengthen their emotional, spiritual, and physical connections. If the social worker refuses to assist the couple in meeting their goal based on a personal worldview that defines homosexual relationships as immoral, this represents a lack of professional integrity, runs contrary to the *Code*, and is an outright rejection or denial of the clients' expressed goals." This surely is a wildly irresponsible application of what the *Code* actually says. The section cited speaks of assisting clients in their efforts to identify and clarify their goals, not of a requirement to endorse or help them meet those goals, which may or may not be appropriate depending on what they are. The authors fudge the distinction they themselves quote the religiously orthodox as making, between homosexual conduct and sexual orientation or desire, by using the term relationships. If anything, one could argue that it is the practitioner who agrees to help these clients to work toward their stated goals who lacks professional integrity, since her professional competence and license probably do not extend to helping people make physical connections with each other.

Conclusion

In all the issues raised by Spano and Koenig (2007), there is a need to open up discussion within the profession, not to close it down. The aim here has not been to settle these questions definitively, but to show that the positions held by social workers who orthodox Christians or Jews are no less rationally defensible than the positions Spano and Koenig (2007) take for granted or assume to be required by the *Code* of all professional social workers. The authors' case against a permissive approach to interpreting and utilizing the *Code*, of the kind suggested by Ressler (1997), is unpersuasive both because the authors' position on the issues in contention is weak and because it is in any case not required by the code on which they rely. Appealing to the *Code* as arbiter and at the same time interpreting it as they do, these authors hold evangelicals' feet to the fire, but keep their own at a comfortable distance.

This is to use the *Code* in a way that may be appropriate for a church or political party, but not for a profession. It is to replace the virtues needed for professional excellence, such as practical judgment and self-regulation, with an appeal to authority—an authority that, in any case, neither requires the positions they take nor excludes those they attack.

In its 1943 ruling in favor of the Jehovah's Witnesses in a First Amendment flag-saluting case, the U.S. Supreme Court (1943) said, "If there is any fixed star in our constitutional constellation it is that no official, high or petty, can prescribe what shall be orthodox in politics, nationalism, religion, or other matters of opinion or force citizens to confess by word or act their faith therein." A key question inherent in Spano's and Koenig's (2007) helpfully provocative paper is the extent to which this principle applies to a profession the title and practice of which are subject to state licensing laws. As a profession, licensed and supported by the state and its revenues, are we in the position of a political party or church, which surely legitimately can prescribe what shall be orthodox for its members, or that of officials, high or petty, who cannot? If we as a profession embrace those principles of American liberal democracy that prohibit the state from supporting or requiring adherence to political parties or churches, should we ourselves as a state-supported profession not observe restraint—at least in terms of our code of ethics—in seeming to act like a disciplined, collective adherent of a political party, ideology, or agenda?

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Guest Editorial: A response to Paul Adams. The code of ethics and the clash of orthodoxies.

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Introduction

We want to express our thanks to Professor Paul Adams for his response to our recent article, “What is sacred when personal and professional values collide?” It was our hope that we could generate ongoing dialogue on what we believe to be longstanding and important challenges to each of us as social work professionals. We believe that the profession benefits from thoughtful critiques that engage differing positions rather than in retreating from difficult challenges. Perhaps these exchanges signal an opportunity to those of us who are interested in exploring values and ethics—to find additional avenues to exchange our thinking.

Reclarification of our position on the relationship between personal and professional values

In order to respond to Adams, we think it is important to first delineate major assumptions that support the ethical decision-making framework as described in our article. We are choosing to re-emphasize these assumptions because some of Adams’ criticisms are based on misunderstandings of our position.

- People have fully formed personal worldviews, drawn from many different sources (including religion, philosophy, and political science) that they bring to the social work profession. We know and accept this reality and only challenge personal worldviews as they relate to the operationalization of professional social work responsibilities.
- Adams’ interpretation is that our position is anti-Evangelical Christian when, in fact, we use this religious position as only one example of the kinds of conflicts that may exist between personal worldviews (e.g., radical feminist, radical Marxist, pro-Democrat) and professional mandates.

- It does not matter what the personal worldview is; it needs to be mediated by the social work profession through examination of the *Code of Ethics* using professional literature as a basis for interpretation.
- At no point does Adams acknowledge the inherent power differentials in professional relationships (e.g., worker and client; supervisor and supervisee; instructor and student). This power differential, inherent in any fiduciary relationship, necessitates limits or constraints on people's professional behavior to ensure the protection of less powerful persons. With privileges and the exercise of special rights inherent in professional status come certain responsibilities that govern and restrict behavior, e.g., having sex with clients is never acceptable professional behavior.

Specific responses to Adams' critique

- We have no issue with Adams' right to hold his thoroughly articulated definition of marriage; however, Adams fails to recognize that his definition of marriage creates inequities in access to resources and services connected to a legal status of being married. His line of argument would exclude major portions of the world's population who do not fit his definition of marriage.
- We agree with Adams that there are instances in which social work faculty have violated the Code of Ethics and that those violations need to be addressed. However, those violations do not rest on a free speech argument put forward by Adams and NAS. Our framework does not address free speech in the public square (which we fully support). However, in professional relationships in which there are power differentials, we are granted certain rights, and with those rights come responsibilities and limits on our behavior.
- We find it troublesome that Adams dismisses Keith-Lucas' legacy in the social work literature. Keith-Lucas, whose prolific work on the relationship between Christianity and social work and who founded the National Association for Christian Social Workers, is dismissed out of hand as irrelevant to the discussion of the central issues in our paper. Instead, Adams substitutes the work of George (2001), who "treats theologically liberal Christians and Jews who share these positions with their nonreligious allies as part of the secularist camp" (p. 6). Adams dismisses major elements of Christian communities who are not orthodox. The very accusation he levels at our work claiming we are imposing our orthodoxy on others is blatantly demonstrated in his own argument. Further, his lengthy discussion of marriage and abortion is framed in a broad social context with no specific ties to professional social work relationships. Adams' use of George's differentiation appears intentionally polarizing—excluding even one of the authors from membership in the Christian community.
- Both NAS and Adams argue that free speech must somehow be protected. For example, Adams notes that there are differing views of social justice in professional literature (e.g., Rawls, 1971; Nozick, 1974; MacIntyre, 1984, 1999). We support the notion that these differing views of social justice should be presented in the social work classroom. However, as professionals, these ideas must be examined as to their consequences relevant to our social work professional responsibilities (NASW Code

of Ethics, 1999). One can argue social justice based on equality or equity (e.g., social justice in the job market could be based on the equal treatment of those seeking a job; or based on people being treated equitably as a result of special circumstances that might include the underlying argument for affirmative action). However, the choice for a particular definition of social justice should be understood as it mitigates oppression. Social work's *Code of Ethics* (NASW, 1999) mandates that professionals address "oppression with respect to race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion and mental or physical disability" (p. 9). Therefore, in order to be consistent with the *Code of Ethics*, the argument for social justice based on equity would take precedence over the argument based on equality.

- Further, we do not believe that every interpretation of the *Code of Ethics* or of ethical principles and values should be treated equally. Indeed, we think it is critical to ask questions such as "Who seeks to gain and lose from a particular interpretation of the *Code* that marginalizes people such as women or those who identify as gay, lesbian, bisexual or transgender?" In effect, social work's history has been about supporting and helping marginalized groups to gain power and resources. How could this interpretation of the *Code* (i.e., to discriminate against sexually different groups) ever be acceptable in the social work profession?

Summary

In summary, we are trying to draw social workers' attention away from broadly couched discussions of rights to free speech and respect for diverse perspectives held by professionals – back to the *Code's* primary purpose, which is to protect clients. The acknowledgement of power differentials between clients and social workers in professional relationships necessitates certain restrictions on professionals' rights for the purpose of ensuring that clients' best interests are served, which is the responsibility we accept when we enter the social work profession. If professionals are allowed to reinterpret the Code based on personal worldviews, there is no protection afforded clients, nor are there standards for care that can be expected when seeking services from members of the profession.

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On the Readiness of Social Work Students to Blow the Whistle to Protect the Client's Interests

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Abstract

In this paper, we discuss the relationship between social work and whistleblowing. Our claim is that in spite of whistleblowing being an important dilemma for social workers because it puts to a test the commitment to promote and protect the welfare of their clients, there is little research done on the subject. The paper presents a study to examine the self-reported readiness of undergraduate and graduate students of social work to blow the whistle in protection of their clients' interests.

Key words: whistleblowing, ethical dilemma, social work students, client's interest.

Introduction

Whistleblowing is the disclosure by a person, working within an organization, of facts, omissions, practices, or policies by that organization or by their employees that wrong or harm a third party. The objective of the disclosure is to stop the harmful behavior and to prevent such conduct in the future. The revelation can be made to superiors within the employing organization or to authorities outside the organization who are in a position to help, such as journalists, the police, or a regulatory agency with oversight responsibility (James, 1980; Miceli *et al.*, 1991).

Whistleblowing is a complex dilemma with implications for professional performance. Employees who are aware of an act of wrongdoing carried out by the organization that employs them or by other employees must choose between the public benefit and their allegiance to their employer. If they do decide to disclose the act that caused the injustice or damage, they will be acting in the best interest of the public and against their place of work and their colleagues. In such cases, whistleblowers put themselves at risk because they are likely to clash with colleagues or superiors and might even jeopardize their jobs. For social workers, whistleblowing presents an even greater dilemma since the third party involved is usually the social worker's client. This

means that if social workers decide to do nothing to stop a colleague's or a supervisor's harmful conduct, they may be violating their basic professional commitment to promote and protect the welfare of their clients and, in fact, undermining the very *raison d'être* of the profession.

The complexity of the dilemma of whistleblowing in social work might be one of the reasons why so little research has been done on the issue. In other professions and in the organizational field, hundreds of studies have been published during the last 20 years (De Maria, 1993). To our knowledge, only three papers on whistleblowing and social work have been published in peer-reviewed journals. De Maria (1996) has examined the plight of Australian welfare professionals who made public interest disclosures. Mansbach and Kaufman (2003) have presented a case study of the Israeli Association of Social Workers' treatment of a social worker who reported his colleagues' unprofessional conduct to the media. Greene and Latting (2004) have argued that whistleblowing is a form of advocacy and offered guidelines for social workers and organizations.

The complexity of the dilemma for social workers might also explain why we find such various and contradictory opinions among the few researchers who have studied this subject. Reamer and Siegel (1992) present opposing views on the desirability of reporting an incompetent colleague, with Reamer, who favored reporting, emphasizing that the worker's unprofessional conduct jeopardized her clients, and Siegel, who opposed reporting, contending that blowing the whistle jeopardized the agency and the good work it was doing in the community. In contrast, although De Maria (1996) recognizes the difficulties inherent in whistleblowing, he stresses the need for social workers and welfare workers to take such action because of its social importance. Greene and Latting (2004) view the subject in an entirely different way: they claim that whistleblowing must be considered as an important professional tool for social workers, a special form of advocacy that is necessary to protect the rights of their clients.

The paucity of studies on whistleblowing in social work does not stem from the absence of abuses that might warrant reporting. Social workers, like the employees in any other field, sometimes witness harmful acts, omissions, practices, or policies by their employer or colleagues. The case of Allison Taylor, a social worker who disclosed the long-term and sustained sexual, physical, and emotional abuse of children in shelters in Wales, is a good example (Taylor, 1998). Although cases are generally of a much smaller scale than that disclosed by Taylor, they are no

less serious in terms of their ethical and/or professional ramifications. Given both the importance of the issue and its many complexities, the lack of research in this area is a serious omission.

The present study makes a modest effort to begin to fill in the gaps. More specifically, it examines the readiness of undergraduate and graduate social work students to blow the whistle, whether internally or externally. Internal disclosure entails reporting the wrongdoing to an authority within the organization. External disclosure entails reporting the offense to an outside agency, such as the police, professional organization, or the press. In most cases, whistleblowing is a two-step process. Whistleblowers generally report that it was only after their internal disclosure failed to put a stop to the wrongdoing that they decided to disclose the behavior to an external authority (Benson & Ross 1998; Dworkin & Baucus, 1998).

Method

Sample

The convenience sample was comprised of 162 participants divided into two groups: 45 graduate and 117 undergraduate students of the Department of social work at Ben Gurion University, Beer-Sheva, Israel. The important distinction between the two groups is that they differ in terms of their professional experience in the field. The Ben-Gurion University graduate program (MSW) requires candidates to hold a BSW degree, as well as several years of work experience in the profession.

No statistically significant differences were found between the two groups regarding the demographic characteristics of gender ($\chi^2=0.1$, $df=1$, NS) and country of origin ($\chi^2=5.4$, $df=2$, NS). However, statistically significant differences were found with regard to age and marital status: Subjects in the graduate students' group were older than the subjects in the undergraduate students' group ($M=33.82$, $SD=6.8$ vs. $M=24.55$, $SD=3.2$; $t=8.7$, $p<0.001$), and a higher percentage of them were married ($\chi^2=47.50$, $df=1$, $p<0.001$).

Procedure

A questionnaire was administered to students in class. The undergraduate students completed the questionnaire at the start of their first class in a required course on professional ethics. The graduate students completed the questionnaire in a required course on social policy. The distribution and presentation of the questionnaire was identical for all respondents and was done by an experienced research assistant. The prospective respondents were informed that the

questionnaire was part of a survey on ethics, and that the gathered data would be used for research purposes only. Before they received the questionnaire, the respondents were explicitly told that their participation was voluntary and anonymous, and that it was not part of the course requirements. After the students filled out the questionnaires, they were collected by the research assistant, who put them into a sealed envelope and delivered them to the researcher. The administration of the questionnaire lasted for about 15 to 20 minutes. The response rate was very high (94%).

Measures

The questionnaire was comprised of multiple-choice questions regarding socio-demographic details and two vignettes describing ethical dilemmas that were likely to arise in the workplace. The socio-demographic questionnaire included questions about gender, age, marital status, country of origin, and years of professional experience in social work. The marital status variable was recoded according to a distinction between those who were married and those who were not (single, divorced, and widowed). Professional work experience was also recoded according to those with experience and those without experience. A pilot study was undertaken in which six undergraduate and five graduate students not included in the study completed the questionnaire. Based on their comments, minimal changes were made to some of the questions.

Case Stories

The questionnaire presented two vignettes describing situations in which social workers were required to make a decision that involved whistleblowing. One vignette described an ethical dilemma in which the social worker had to choose between responsibility to the client and loyalty to a colleague. The other vignette presented a dilemma in which the social worker had to choose between responsibility to the client and loyalty to management.

The case stories were designed to replicate specific characteristics seen in acts of whistleblowing. Most accounts of whistleblowing reveal similar procedures. In general, the act of whistleblowing is done gradually. First there is an internal disclosure, i.e., the whistleblower approaches his or her superior or another individual who is higher up in the organization's hierarchy in order to put an end to the wrongdoing or practice that is detrimental to the public or a third party. This procedure is recommended on both ethical and strategic grounds by scholars and by organizations that try to protect and encourage whistleblowers. An internal disclosure is likely

to put an end to the misconduct and, as such, to prevent an external disclosure, which may be detrimental to the organization. In addition to allowing the whistleblower to demonstrate his or her loyalty, an internal disclosure also provides him or her with moral justification for approaching an external party should all internal channels prove unsuccessful (Dworkin & Baucus, 1998).

The case stories were presented to ten students (five from each group) to receive their preliminary input. Their responses were used to finalize the questionnaire. Each story contained five questions: Question 1 asked the respondent to rate the gravity of the misconduct, Questions 2 and 3 dealt with internal whistleblowing, and Questions 4 and 5 with external whistleblowing. The first question was rated on a scale of 1 (not at all) to 7 (very serious). The answers to the other questions were rated on a scale of 1 (not likely) to 4 (very likely). In order to examine the difference between the two types of whistleblowing, Questions 2 and 3 were summed into one index, which represented internal whistleblowing, and Questions 4 and 5 into another index representing external whistleblowing. The two vignettes were presented as follows:

Vignette 1: First Dilemma – Protecting the Client’s Interests vs. Being Loyal to a Colleague.

You are a social worker in a geriatric center. A colleague submitted an application for a supervisor’s job and was chosen for the position. You know that the job requires either an MSW or several years of relevant work experience. You also know that the colleague used a forged degree to get the job and that he does not have the necessary managerial experience, a fact that could harm those cared for by the geriatric center.

- How serious do you consider your colleague’s behavior?
- How likely is it that you will talk to your colleague and try to persuade him to admit his true level of training and his lack of relevant experience to his superiors?
- If you decide not to talk to your colleague, or if you have talked to him about the matter and not succeeded in getting him to admit to his lack of credentials, how likely is it that you will go to someone at the center who has the power to intervene, such as the personnel manager or the center's director?
- If you decide not to approach anyone at the center, or if you do and he or she does nothing to intervene, how likely is it that you will turn to the Social Workers Association, an external body?
- If you decide not to talk to the Social Workers Association, or if you do talk to them and they do nothing, how likely is it that you will report the matter to the media?

The internal reliability of the questionnaire (Questions 2-5) was high ($\alpha=0.80$). The Rho Spearman correlations were ($r_s = 0.63$, $r_s = 0.59$) for the two questions measuring internal whistleblowing and for the two questions measuring external whistleblowing, respectively.

Vignette 2: Second Dilemma – Protecting the Client’s Interests vs. Being Loyal to Management

You are a social worker in the children’s section of a center for victims of violence. It has recently come to your attention that the director of the section intends to use money budgeted for buying equipment for a play corner to buy luxury fittings for her own office.

- 1) How grave do you rate the director’s behavior?
- 2) How likely is it that you will try to persuade the director not to use the money for her own office but to set up the play corner?
 - If you decide not to talk to the director, or if you have talked to her and not been able to change her mind, how likely is that you will report the director's intentions to someone at the center who has the power to intervene, such as the center’s director or the finance manager?
 - If you do not refer the matter to an authority at the center, or if you do and he or she does not intervene in the section director’s decision, how likely is it that you will turn to the Social Workers Association, an external authority?
 - If you decide not to report the matter to the Social Workers Association, or if you do talk to them and they do nothing, how likely is it that you will report the matter to the media?

The internal reliability of the questionnaire (Questions 2-5) was moderate to high ($\alpha=0.78$). The Rho Spearman correlations were ($r_s = 0.59$, $r_s = 0.57$) for the two questions measuring internal whistleblowing and for the two questions measuring external whistleblowing, respectively.

Results

Significant differences between the two student groups were found for the socio-demographic variables of age and marital status. Therefore, these variables as well as the variable of professional experience (inexperienced students/experienced students) were submitted to regression analysis in order to establish each variable’s unique contribution to the variance of the assessed indices. Regression analysis was conducted with regard to the explanation of the perceived severity of the behavior and the internal and external whistleblowing indices in both case stories (Tables 1 and 2). For each of the indices examined (with the exception of the first in each case story), experience was found to be statistically significant. In other words, for both vignettes, the students with no professional experience had a greater tendency toward internal and external whistleblowing in order to change the situation in comparison with the students with

professional experience. It should be noted that age and/or marital status were found to be statistically significant for some of the indices. Age, for example, was found to be a significant predictor for external whistleblowing in the dilemma involving a manager at work. However, in each of the cases, the relative contribution of experience was found to be larger than the

Table 1

Linear Regression: Predictors for the explanation of the severity of the behavior and the indices of internal and external whistle blowing – Ethical dilemma involving a colleague.

	Experience ⁽¹⁾	Age	Marital Status ⁽²⁾
	β	β	β
How grave do you consider your colleague's behavior?	0.08	0.09	0.11
Internal whistle blowing index: The likelihood that you will talk to your colleague and/or approach an authority figure at the center	0.41**	0.22	-0.07
External whistle blowing index: The likelihood that you will approach an external party, such as the Social Workers' Union and/or the press.	0.40**	0.22	0.01

**p<0.01

(1) 0 = graduate students with professional experience 1= undergraduate students with no professional experience

(2) 0 = married 1 = not married

contribution of other variables, such as age and marital status. In other words, experience made a statistically significant and unique contribution to the explanation of the indices assessed in both vignettes and, in cases where age and/or marital status were also found to be significant, experience made the greatest contribution to the explained variance. A comparison of the average scores of the internal and external whistleblowing indices for the two student groups in both vignettes is

presented in Table 3. In both groups, the average score of the internal index was higher than the average score of the external index and the difference was statistically significant. In other words, in both groups, for both vignettes, the likelihood of approaching parties within the organization was higher than the likelihood of approaching those external to the organization.

Table 3

Linear Regression: Predictors for the explanation of the severity of the behavior and the internal and external whistle blowing indices – Ethical dilemma involving a manager at work.

	Experience ^(A)	Age	Marital Status ^(B)
	β	β	β
How grave do you rate the director's behavior?	0.10	-0.06	0.09
Internal whistle blowing index: The likelihood that you will talk to the manager and/or approach an authority figure at the center	0.33**	0.16	-0.22*
External whistle blowing index: The likelihood that you will approach an external party, such as the Social Workers' Union and/or the press.	0.39**	0.25*	-0.16

* $p < 0.05$ ** $p < 0.01$

^(A) 0 = graduate students with professional experience 1 = undergraduate students with no professional experience

^(B) 0 = married 1 = not married

The findings of the two dilemmas were very similar. The students with no professional experience had a greater tendency to act in order to change the situation in comparison with the students with professional experience. In terms of taking steps (internal or external) to change the situation, both groups showed a greater tendency to approach individuals within the organization than those outside of it.

Discussion

The main limitations of this study are that it examines expectations rather than actions and that it does not query the respondents' considerations or reasons for disclosing at the different levels. Another limitation is that neither of the wrongdoings described in the vignettes caused immediate physical harm to the clients. It cannot be ruled out that the study respondents would

have been more likely to blow the whistle on such acts, even externally. In addition, the fact that the study was carried out in Israel raises questions about the generalizability of the findings to other countries.

Table 3

A comparison between the indices of internal and external whistle blowing for experienced and inexperienced students groups, in both vignettes.

	Graduate students with professional experience (n=45)		Undergraduate students with no professional experience (n=117)	
	Mean SD	t value df p	Mean SD	t value df p
Vignette 1: Ethical dilemma with a colleague				
Internal whistle blowing index	5.56 (1.60)	t=7.06 df=44 p<0.001	6.53 (1.22)	t=12.07 df=116 p<0.001
External whistle blowing index	3.98 (1.82)		4.98 (1.69)	
Vignette 2: Ethical dilemma with management				
Internal whistle blowing index	5.84 (1.43)	t=7.86 df=44 p<0.001	6.91 (1.30)	t=10.71 df=116 p<0.001
External whistle blowing index	3.96 (1.73)		5.21 (1.80)	

Taking this into account, the study's findings show that both the undergraduate students and the graduate students with professional experience regarded the two acts – the colleague's use of a forged document to obtain a promotion and the middle-manager's diversion of earmarked funds for her own benefit – as being very serious. They also reveal that both groups were likely to act. Both groups, however, also reported a considerably greater likelihood of blowing the whistle internally than externally. In fact, both groups reported a decreasing likelihood of acting as this action moved from talking to the offender to reporting the offense to an authority in the agency, reporting it to the Social Workers Association, and, finally, to reporting it to the press. The pattern is the same and the means quite similar for both vignettes.

Because this was designed as a preliminary study, the respondents were not asked for their reasons or considerations. The pattern seems to show, however, a desire to correct the wrongdoing
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(evident in the reporting of a high likelihood of acting) along with a progressive retraction as the circle of disclosure widened. This retraction may stem from two different concerns. On the one hand, it may reflect the respondents' awareness of the increasingly serious nature of each level of protest or disclosure. Accounts in the literature clearly indicate that the price paid by the whistleblower is higher when the wrongdoing is reported externally rather than internally (Biklen, 1983; Dworkin & Baucus, 1998). On the other, it may reflect the respondents' concerns that external exposure could have negative consequences not only for the wrongdoer, but also for the agency and for the individuals who receive its services (Alford, 2001).

The findings also show that the graduate students and practicing social workers were less likely to blow the whistle, be it internally or externally, than undergraduate social work students with no professional experience. Moreover, this difference remains—or even increases—concomitantly with the level of activity required to stop the misconduct. These findings are consistent with other studies, where undergraduate social work students display a stronger expectation of contributing to, influencing, and altering society through the profession than practicing social workers (Dhooper et. al., 1990; Cohen & Cohen, 1998; Lev-Wiesel, 2003). They may reflect the practicing social worker's greater awareness of the price to be paid for disclosure, the greater vulnerability that comes with age and personal commitments (e.g., to support families), and/or his or her greater awareness of the complexities of whistleblowing, including the possibilities that it will not be effective and that it may harm innocent persons.

This study and its findings about social work students and their willingness to blow the whistle constitute a first step, one, we hope, that will be used as such for further studies. One objective of such research would be to examine the reasons why social workers decide not to blow the whistle. Do they stem from an individual's socialization within the profession, burnout, desire to avoid confrontations in the workplace, or fear of being fired? A crucial objective would be to understand why the principle of the client's best interest—a central ethical and professional principle designed to all guide social workers—is disregarded when a colleague or senior official in the organization is involved in improper conduct.

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Grounding MSW Students in Social Work Values and Ethics: An Innovative Approach

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Abstract

Teaching social work values and ethics is considered a primary task for social work education. A curriculum innovation is presented as a best practice in socializing students to social work values and ethics as well as graduate education. This article will present the development and rationale for the curriculum transformation, as well as an initial evaluation of the course impact from the students' voice.

Key Words: Curriculum Innovation, Social Work Values and Ethics

Introduction

Social work students are faced with challenges to master a growing body of knowledge for professional practice. In addition to the acquisition of knowledge, students are concurrently becoming socialized to the profession during graduate education. This socialization includes the integration of the professional purpose, values, and ethics with their daily functioning as a student and future practitioner. This challenge brought graduate faculty together to develop an MSW curriculum that would facilitate the socialization process to the social work profession and graduate school. The purpose of this curriculum innovation was to provide graduate students “with a foundation to understand the profession and mission, knowledge, values, and skills of social

¹ The authors would like to acknowledge the work of Professors Emeriti, Val Chang and Marion Wagner for their contribution to the development of Immersion. A paper entitled *Immersion: Introduction to Social Work* (Lay, McGuire, Wagner, & Chang, 2005) was presented at the Annual Program Meeting, Council on Social Work Education.

work and to begin socializing students to the demands and expectations of graduate education and professional practice” (Lay, McGuire, Wagner, & Chang, 2005, np).

The development of this curriculum innovation, the Immersion course, is presented as a best practice in modeling and implementing a purposeful *beginning* for the ongoing process of acculturating social work students to social work values and ethics. This is critical to socialization to the profession which is a key function of social work education (Landau, 1999; Reamer, 2001). In this article, information is provided about the a) development and rationale for curriculum transformation; b) literature review on socialization to the social work profession; c) description of the model; d) pedagogical process; e) analysis of course activities using social work values and ethics; and f) evidence of impact of the model from the students’ perspective.

Rationale for Course Transformation

When the MSW faculty began a curriculum renewal process for the MSW program, they came together to create an innovative and responsive curriculum to move the school forward into the new millennium. Faculty challenged one another to be creative and not constrained by traditional boundaries of past curricula or even the semester structure itself. A core concern identified was that all students, regardless of undergraduate major or years of practice experience, should begin their graduate studies with a basic understanding of professional social work. A review of the school’s admission statistics revealed that over 80% of admitted master’s students did not have an undergraduate degree in social work. The largest number of students came from the disciplines of psychology and sociology, however 52% came from disciplines as diverse as English, general studies, philosophy, wildlife management, art history, accounting, business, and engineering. Faculty members were aware that students come to the MSW program with a fundamental desire to help others by providing services in mental health, child welfare, and a variety of treatment settings with specific populations. However, they often come from a variety of disciplines that do not provide an understanding of the ethics and values associated with professional social work practice.

Students are attracted to the MSW degree because it is portable to a variety of regions and practice settings. Many students are aware that social work practice is regulated from state to state. However, they are unaware that the Council on Social Work Education maintains standards for accreditation of graduate education. The National Association of Social Workers (NASW) has

paved the way for this recognition of professional social work practice through the enduring commitment to the *NASW Code of Ethics* (NASW, 1999) as a standard for practice. The acceptance of these regulatory practices and accreditation standards have led to the reality that more than 60% of all mental health services are provided by social workers (www.socialworkers.org). The desire to help others and the reality of portability draw students to social work as a career without a full understanding of the foundation of the profession.

Although many students have an awareness of social injustice on behalf of a specific population, they do not always grasp the general purpose of the profession as stated in the *NASW Code of Ethics* (1999): “Social workers promote social and economic justice and social change with and on behalf of clients” (p. 1). For example, a student may say, “I want to be a therapist in a mental health clinic, why do I need to understand social policy or research?” Students’ lack of awareness of how work at the macro level impact individuals could indeed and that they would be expected to study and perform in a multi-level practice environment. This one-dimensional perspective is inconsistent with the core values of professional social work practice.

Knowing that the vast majority of our incoming graduate students did not possess an undergraduate degree in social work, faculty identified a need to socialize students to the profession from the beginning of their MSW. We also identified that many of our students, particularly those recently receiving a bachelor’s degree, did not clearly realize the demands for scholarship in graduate education. In addition, a number of students were changing careers and had been outside of the academic environment for many years. Due to these factors, faculty identified that students also needed socialization to the expectations of graduate school. Each of these factors may limit the impact of the MSW coursework provided at both the foundation and concentration levels. Our challenge became to develop a means to socialize these students to the profession of social work and to the process of graduate education in a way that would maximize their learning of the content of foundation coursework and beyond to the concentration level.

Socialization to the Graduate Education and the Profession

Social work education historically has embraced the role of facilitating professional socialization (Baretti, 2004). Socialization is a learning process that involves the internalization of values, beliefs, skills, and knowledge (Schriver, 2004). There are many conflicting studies on how social work students become socialized to the profession and whether social work education is

truly effective in changing student attitudes around the basic values of the profession itself (Baretti, 2004). However, it is clear that a major focus of socialization in social work must include professional values and ethics (Reamer, 2001). “Values are regarded as essential aspects of the professional socialization of social workers” (Pike, 1996, p. 337). As part of students’ socialization, social work education should address these key issues:

- (a) What are the profession’s core values, and how have they evolved over time?
- (b) What professional activities can social workers engage in to reflect these values?
- (c) How do social workers’ values influence their relationships with clients, colleagues, and members of the broader society? and
- (d) In what ways do social workers encounter conflicts involving the profession’s values? (Reamer, 2001, p. 25).

There is some evidence that role modeling and interaction with faculty, field instructors and peers help students acquire professional values and a sense of a professional identity or self (Baretti, 2004). Students who have been socialized to social work values and ethics may be more likely to comprehend “the complexity of the situations and the dilemmas that social workers encounter, than those who have not yet started their professional training” (Landau, 1999, p. 71). Social work education is challenged to pay increased attention to the socialization process of students in a more formal and systematic manner, ensuring that their values are consistent with the profession (Landau, 1999),

In addition to values and ethics, the faculty considered a variety of issues that are related to the socialization of students to the profession. These included critical thinking skills and the history of the profession. Both of these topics are required foundation content for accredited master’s level social work programs as articulated in the Educational Policy Accreditation Statement (CSWE, 2001). These topics, as well as an initial presentation of social work values and ethics, had previously been included in a basic policy course that had been offered in the first semester of the MSW program.

The faculty also identified concerns about the professional writing skills of social work students. This has been identified as a struggle for many social work students (Alter & Adkins, 2001; 2006). Additionally, advances in technology for communication (e-mail, course platforms, etc.) as well as for library research (electronic course reserves, databases and search engines) may be overwhelming. Concerns were also verbalized about students coming from diverse disciplines that may not have utilized American Psychological Association (APA) (APA, 2001) style for *Journal of Social Work Values & Ethics*, Fall 2008, Volume 5, Number 2 -page 45

writing assignments or understand what constitutes plagiarism. As social work educators, we discerned an ethical responsibility to inform students about expectations and facilitate their competence by orienting them to the tools necessary for success in a graduate program.

Faculty conceptualized a course which would facilitate socialization to graduate school and the profession which would be taken prior to the delivery of the traditional MSW foundation content. This innovative course, the Immersion Model, would provide an opportunity for students to develop peer relationships within their cohort as well as nurture student/faculty rapport. At the same time, faculty desired that Immersion be the beginning step in an ongoing process for students to build a lens for social and economic justice through understanding the professional purpose as well as social values and ethics (Lay, McGuire, Wagner, & Chang, 2005). Hence the intensive course—the Immersion Model—was developed. Immersion is defined as “instruction based on extensive exposure to surroundings or conditions that are native or pertinent to the object of study” (<http://www.merriam-webster.com/dictionary/immersion>). The course content was carefully constructed to create the intense experience—immersion.

Pedagogical Process

In designing the Immersion course, faculty considered which strategies would encourage an inclusive climate to promote an optimal teaching and learning environment. Faculty also sought to provide inclusive knowledge about gender, race, ethnicity, sexual orientation, age, ability, and other differences that are a source of identity for clients as well as social workers. This included knowledge about institutionalized oppression based on these identities (Gil, 1998). A diverse teaching pedagogy was seen as one way to meet the challenge. Faculty wanted students to learn that social work practice is not stagnant, that clients experience different issues and that effective social work practice calls for viewing client issues and problems from differing viewpoints in a non-judgmental manner (Sheets, 2005).

The vision for this course included a team approach, inclusive of potential faculty who would represent differing social work expertise in areas such as: clinical practice, community development, policy formation, advocacy, leadership, and cultural sensitivity. The design needed to allow instructors and students to view social issues from a variety of perspectives, a transformative process for both the teacher and the learner (Ramirez de Langer, 2006).

The desire to provide social work students with an accurate intellectual view of reality that would prepare them to function in a multicultural society demanded the utilization of a diverse pedagogy (Kitano, 1997). The literature regarding a diverse teaching pedagogy illustrates that when students learn in a flexible teaching and learning environment, they experience less stress and conflicts in student-teacher interactions, and this in turn builds an atmosphere conducive for learning (Ramirez de Langer, 2006). Faculty also wanted to create a teaching and learning environment that was nurturing, open and safe for the exploration of experiences and ideas that led to a dynamic understanding social work values and ethics.

In any classroom, there is an invisible culture that may affect student behavior and learning (Sheets, 2005) and students are constantly interpreting the invisible culture of their classrooms. A course taught by four instructors had the potential to intimidate students, inadvertently leading to students feeling powerless. Therefore, the course had to be designed with care given to power differentials because it could lead to student-teacher “misunderstandings, misperceptions, and misjudgments” (Sheets, 2005, p. 85) creating discomfort and anxiety for instructors and students. Designing a course that valued multiple viewpoints and used diverse teaching strategies were seen as critical to creating an inclusive and safe climate that privileged diverse ways of learning and knowing (Ramirez de Langer, 2006). In addition, having four social work faculty agree to one syllabus, identical assignments, and readings may have posed a serious challenge. Instructors needed to set aside personal ego and work as a team to foster a collaborative teaching environment. Despite different practice experiences, cultures, and academic ranks, instructors modeled a commitment to social work values and ethics which bound us together. The backbone and integrity of our profession is based on our professional values and ethics no matter how diverse our voices – this was perhaps the single and most powerful message in conceptualizing and design of the Immersion course.

Course Description

Given the rationale discussed above, the Immersion course was designed to be conducted in eight, 8-hour days, over the first three weeks of the semester. The other four first semester foundation courses begin at the third week and continue through the semester, with extended clock hours to meet academic requirements for a three-semester hour course. The course description for *Professional Social Work at the Graduate Level: An Immersion* is:

This foundation course provides an overview of social work including the definition, scope, history, ethics, and values of the profession. This course will provide basic orientation to the available resources and expectations of graduate education in general, and the MSW program, in particular, all within the framework of the adult learner model. Students will develop basic communication, self-assessment, and reflection skills necessary for success in the MSW program. Students will have an opportunity to survey various fields of practice and will begin to identify personal learning goals for their MSW education as well as develop a commitment to lifelong learning as a part of professional practice (see Appendix A for course objectives).

Because of the limited time available for students to complete assignments for this course, a pre-course paper was assigned. Students were introduced to this assignment as well as a model for structured critical reflection (McGuire & Lay, 2007) during the mandatory student orientations for the MSW program and the paper was due on the first day of class. The paper was based upon two books from popular literature--*The Glass Castle* (Walls, 2005) and *Nickel and Dimed* (Ehrenreich, 2001). The themes of these books introduced issues of poverty, income inequality, and family challenges that continue to be important topics for discussion during the course. The pre-course assignment also gave faculty the opportunity to assess student writing and give feedback so that students may access resources to support them in the successful completion of the MSW program.

In-class sessions were a mix of small group sessions with an individual instructor and combined large lecture/video sessions with all four instructors taking turns teaching content. Students were provided a number of learning experiences, based upon a variety of pedagogies, which served to introduce and emphasize the professional commitment to values and ethics requisite for professional practice at the master's level. The following section will highlight those learning activities, categorized around the core values of the profession in the *Code of Ethics* (NASW, 1999).

Analysis of Course Activities Using Social Work Values and Ethics

Teaching MSW students the importance of upholding the National Association of Social Work (NASW) *Code of Ethics* (1999) was a unifying theme of the course, helping students to understand their ethical responsibility to “clients...colleagues...practice settings...as professionals... to the social work profession...and... society” (p. 7) in every aspect of their future practice. It is critical for students, as future practitioners, to have a framework for ethical practice and the NASW *Code of Ethics* has a historical role in providing a unifying lens for social work *Journal of Social Work Values & Ethics*, Fall 2008, Volume 5, Number 2 -page 48

practitioners (Spano & Koenig, 2007). “Preparing social work students for ethical practice begins in the classroom” (Swindell & Watson, 2007, ¶ 4).

Students were asked to read Congress (2000) as well as the NASW *Code of Ethics* (1999) in preparation for a course session where the video produced by NASW “*Professional Choices: Ethics at Work*” (Shapiro & Kenton, 1995) was shown and discussed. This session set the stage for continued discussion of professional values and ethics throughout the course. In addition, students were asked to complete a reflection paper about values and ethics as one of their written assignments in the course.

These activities reinforced the core values of the profession as stated in the NASW *Code of Ethics* (1999) which includes “service,” “social justice,” “dignity and worth of person,” “importance of human relationships,” “integrity,” and “competence” (p. 1). These core values were discussed in one specific session; however, they were continuously highlighted throughout the course by the use of integrative assignments. This helped students grasp early on in their graduate learning that the NASW *Code of Ethics* (1999) offers standards for practice. Ethical standards and guidelines do not provide a list of automatic responses to issues. Students needed to understand that application of the NASW *Code of Ethics* is complex. It serves to inform sound decisions and guides responsible judgments (Corey, Corey, & Callanan, 2003; Meacham, 2007; Spano & Koenig, 2007). Students realized that the NASW *Code of Ethics* may be difficult to interpret; that opinions could vary based on how the NASW *Code of Ethics* is applied to different situations; that it is critical to consult with colleagues and or supervisors; that their own values may be in conflict with the *Code* or particular agency policies, and that ethics must be understood in a cultural context (Corey, Corey, & Callanan, 2003).

Although values and ethics are infused throughout the course; a specific session on ethical dilemmas utilizing the Ethic Model for Decision Making (Congress, 2000) was presented. The Congress (2000) model served as guidance for students in making ethical decisions with clients. Students were asked to use this model to frame challenging situations and identify ethical dilemmas, where two specific dictates of the *Code of Ethics* may conflict. Common risk factors that may impact sound ethical decision making were illustrated to students (e.g., high caseloads, boundaries, fatigue, burnout, lack of sleep, fear of asking for help, not consulting supervisors, and feeling rushed). Class discussions in both small groups and lectures focused on student reflections

regarding the following themes: What is my value and ethical position on the issue? Where did I develop my views? Are my values and ethics open to modification? Am I open to being challenged by others? Am I so committed to my values and ethical beliefs that I will not accept other values? How can I communicate my values and ethical beliefs without imposing them? How are my values and ethics reflected in the way I work with diverse people?

In addition to specific material on values and ethics, other course activities underscored the School's commitment to social work education's role in acculturating students to the values and ethics of the profession. Assignments and activities for the Immersion course were purposely built around the core values of the social work profession: "service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence" (NASW *Code of Ethics*, 1999, pp. 5-6). Course activities and assignments are analyzed below using the core values of the profession (NASW, 1999).

The value of SERVICE

Students, in groups of two or three, were asked to research an assigned social work luminary, a historic figure from the Progressive era, who was instrumental in creating social change. Names for luminaries were drawn from the Biographies section of the *Encyclopedia of Social Work* (Edwards & Hopps, 1995). Working together, students created poster presentations which were displayed on the final day of class in a "Celebration of Social Work History." The MSW Student Association provided a pizza lunch and gave awards for outstanding posters, as well as welcomed the new students to the School and encouraged them to participate in Student Association activities. Students then returned to their individual instructor sessions where they made a brief presentation about their assigned luminary, who literally changed the world with their service.

The value of SOCIAL JUSTICE

The need for commitment to social justice was addressed by providing multiple understandings of oppression through lecture and videos. After a lecture that provides an introduction to the academic understanding of oppression, students viewed a series of videos that highlight sexism, racism, ageism, heterosexism, and ableism that provided a historical look at the impact of these multiple oppressions in the lives of many of clients with which they will be working as social workers. Many of these videos were shown in one very long and intense day to

immerse students in the everyday reality of these issues. The intensity was specifically designed for affective as well as cognitive impact, thus allowing students to feel, as well as think about, the necessity of an ecological approach that addresses client problems on multiple levels. These experiences served to broaden their limited perspective on multiple oppressions and their understanding of social justice. Students were then assigned a reflection paper on this topic to focus and expand their learning, often in the form of self-awareness, on this important value.

The value of DIGNITY AND WORTH OF THE PERSON

One pedagogical strategy that highlights our commitment to this value was the utilization of reflective writing assignments, where students not only are expected to master course content, but they are also encouraged to explore their personal reactions and areas of values conflict in learning to be an MSW social worker. Personalized instructor feedback on these papers assisted students in identifying critical thinking errors in assumptions or challenged them to explore other viewpoints as they consider the material being discussed in courses. If students were articulating major values conflicts between their personal values and those of the profession, action was taken to discuss these issues in a confidential manner that respects the student's right to hold personal values but questions whether social work is the right profession for them to achieve their personal and career goals.

The value of IMPORTANCE OF HUMAN RELATIONSHIPS

The course was designed for a mix of small group interaction with faculty and fellow students as well as large lecture sessions with multiple professors sharing personal experiences. In small group sessions, and often through lunch time as well, students worked together on small group projects for the course. These projects allowed a beginning for students to get to know one another and work together in short-term assignments. During lecture sessions, faculty modeled positive relationships with one another, demonstrating that colleagues may have different experiences and opinions, but that we shared the commitment to professional values and ethics. In that we have varying viewpoints, we sought to model respectful disagreement and debate with one another during class discussions and yet maintained positive collegial relationships.

The value of INTEGRITY

Academic integrity has been identified as a major issue for higher education. For example, a majority (84%) of undergraduate students admit to cheating on written assignments

(www.plagiarism.org). The importance of academic integrity was demonstrated by faculty identifying expectations for writing and professional behavior in the academic as well as the practice setting. A copy of the university's policy on plagiarism was highlighted for students and clarification of the APA style of writing and citing resources were explained. This was framed as an ethical issue and tied to the NASW *Code of Ethics* (1999) and state licensure for social workers. Failure to practice academic integrity including plagiarism was emphasized as not in keeping with the value of integrity. Students who struggled with academic writing were encouraged to utilize the campus writing center for additional assistance.

The value of COMPETENCE

A core value for any academic institution to consider, an expectation of competence, was highlighted throughout the course. This began with an emphasis on critical thinking and continued through expectations for life-long learning. Students were provided with an overview of the basic social service delivery systems to emphasize that regardless of their future practice focus, it is vital for them to understand diverse delivery systems in order to serve clients. In addition, students were introduced to basic policy analysis as a means to understanding how service delivery systems are created and why competent social workers must be concerned with policy practice. A panel of experienced social work professionals practicing at the macro level provided information about leadership roles in multiple delivery systems.

A model for understanding research and best practices from a social work perspective (Petr & Walter, 2005) was discussed, which identifies the importance the professions' values and ethics have in the decision-making process. This too, was reinforced as an ethical responsibility for all social work practitioners.

Although empowerment is not identified as a core value of the profession, it is mentioned in the *Code of Ethics* (NASW, 1999) and was infused in the course, including a lecture/discussion and reading (Simon, 1990). The major course topics were integrated into the final assigned paper (Historical Context Paper). This paper required students to identify a social problem, trace its history, identify the oppressed populations which are particularly impacted by it, and summarize the social work professional response using NASW policies from *Social Work Speaks* (NASW, 2006) and the *Code of Ethics* (NASW, 1999). They were required to use at least one entry from

the *Encyclopedia of Social Work* (Edwards & Hopps, 1995) as well as other social work journals in writing this paper, which was due two weeks after the conclusion of class sessions.

Impact of the Course

The Immersion course has been taught using the eight-day format for the past five years. There have only been a small number of students who have dropped out of the program during/after the Immersion course, but we see this as a significant impact. We have not always been able to obtain information about why a student dropped out of the program. Anecdotally, we are aware that some of these students did NOT have a full understanding of the profession and/or the expectations for graduate study prior to their Immersion experience.

The faculty members who teach the subsequent foundation courses have articulated that the students seem well-prepared to begin their courses, knowing that important content has been covered in this course, particularly around expectations for critical thinking, a basic understanding of the *Code of Ethics* (NASW, 1997), professional writing using APA format, and plagiarism policies. Despite the challenges of a condensed semester for the subsequent foundation courses, and the administrative challenges at the campus level, the MSW committee continues to endorse Immersion as a vital component of the existing master's curriculum.

In order to identify basic themes from the student perspective of the Immersion experience, an Institutional Review Board approval was secured to examine course evaluations from the 2007 full-time and part-time day cohorts participating in Immersion. Ninety-five students were enrolled in the four sections and evaluations were received from 79 students (N=79). A content analysis was conducted by one instructor on the written feedback from student course evaluations and results were reviewed by the other course instructors. School course evaluations include a series of quantitative items, followed by three open-ended items: "What aspects of the course facilitated your achievement of the course objectives?"; "What aspects of the course made your learning more challenging?"; and "Please, offer your comments about the quality of the course and how it might be improved."

Themes identified in the content analysis are listed below and include: Preparation for Graduate School; Diversity of Perspectives for Social Work Practice; Personal Reflection and Critical Thinking; and Values and Ethics of the Profession. Quotes from students are provided that support each theme.

Preparation for Graduate School

- *I feel better informed of what the program entails and look forward to future classes.*
- *I loved it! I feel much more prepared to enter in the program and confident about being a social worker.*
- *This is an awesome Immersion course to set the tone for the remainder of the program.*
- *I think Immersion is a great idea. I feel better prepared to begin graduate school.*
- *The use of APA was a challenge for me. In addition, it was a challenge initially for me to use critical thinking. However, I am more comfortable with both issues now.*

Diversity of Perspectives for Social Work Practice

- *Having four different professors was great because it gave us so many different perspectives.*
- *Small class discussions taught me a lot because I learned from my classmates.*
- *Having the benefit to have instruction from all the professors with their fields of discipline.*
- *Having open discussions in class where all opinions were valued.*

Personal Reflection and Critical Thinking

- *The reflection papers challenged me to examine what I was learning.*
- *Forcing myself to look inward was difficult. To have to identify one's own prejudices is not easy. But it must be done to ensure efficacy.*
- *Critical thinking – being challenged so much to do so really expanded my ability to see “depth” and “breadth” in my understanding.*
- *The critical thinking forced me to push beyond my normal barriers in a positive manner.*

Values and Ethics of the Profession

- *I like the information about ethics & what professionals who are in the field brought. It was helpful to hear how they would handle ethical issues.*
- *Learning about the history of social work and the Code of Ethics.*
- *All of them, especially diversity, oppression, ethics, & the values of social work.*

These statements are a small sample of the students' commentary and provide a snapshot of student feedback. Further evaluation is needed to generalize the findings of this evaluation to other cohorts of students within our program or to other programs regarding the efficacy of the Immersion model. Plans for further evaluation of the Immersion model include obtaining systematic data, either surveys or focus groups, from faculty who teach students immediately

AFTER the Immersion experience as well as a more formalized pre/post evaluation of students' preparation for graduate school and knowledge about the profession.

Conclusion

Given the authors' experience in teaching Immersion and the students' perspective, the authors posit that Immersion facilitates students' socialization to the profession of social work as well as graduate school. The course provides a focused learning experience that engages students both cognitively and affectively. A key strength of the course is that several faculty have participated in the collaborative development and delivery of Immersion since the first offering in 2003. With each iteration of the course, the Immersion team refines content and assignments to maintain a contemporary and consistent delivery. The diversity of the faculty, as well as the diverse pedagogical practices, has provided a safe and inclusive atmosphere for students to understand the profession of social work.

The dual focus of socialization to graduate education and also to the profession then becomes preparation, a plowing of the field so to speak, for the seeds of knowledge that will follow in courses on practice, policy, human behavior in the social environment and research. This learning process builds a lens for social justice as students begin their journey of becoming a professional social worker. Subsequent course content will be filtered through this lens as students continue to develop their professional identity. The Immersion course provides consistent emphasis and modeling the core values of the social work profession (NASW, 1999), preparing students for success in their graduate education, practicums, future practice, and life-long learning.

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Appendix A

Professional Social Work at the Graduate Level: An Immersion

Through active participation in the learning experiences and completion of the readings, assignments, and learning projects offered throughout this seminar, learners are expected to demonstrate the ability to:

1. Understand the history, mission, roles, and basic values and ethics of the social work profession as well as the profession's relationship to the development of social welfare systems.
2. Recognize the effect of social policy on social work practice across all system sizes.
3. Identify the forms and mechanisms of discrimination, economic deprivation, and oppression particularly as they relate to the client's age, class, color, culture, disability, ethnicity, family structure, gender, marital status, national origin, race, religion, sex, and sexual orientation.
4. Identify fields of social work practice, social service delivery systems, and their impact on the life of people from a social and economic justice perspective.
5. Understand the legal responsibilities and current regulation of social work practice nationally and in the state of Indiana.
6. Understand the role of advocacy and the historical impact of an empowerment perspective may play in advancing social and economic justice.
7. Identify critical thinking skills, including the analysis of paradigms, and their role in achieving competence in professional social work practice.
8. Develop a beginning self-awareness and commitment to ongoing reflection and assessment of professional practice.
9. Develop and enhance the basics of professional and scholarly writing by enhancing the critically analyzing information.
10. Obtain an understanding of the IUSW curriculum, the norms for graduate social work education and campus-wide resources available for students.

Ethics as Activity: Building Collaborative, Expansive and Just Social Work

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Abstract

In social work, discussions of ethics often revolve around liability issues and professional codes. We demonstrate and propose that ethics is a collaborative and dialogical activity for social workers in all settings, and that ethics as activity can be used to build inclusive and just social work.

Keywords: Collaborative-action, discourse, ethics, postmodernism, social work

Introduction

As an academic who has been trained in “doing research,” I am familiar with the mandate of practice evaluation and advancing the field through research. However, funding, institutional approval, and research and ethical guidelines privilege who gets to do research, what types of studies are done, and the ways the studies are conducted. (Melville, 2005). My partner and I have done presentations,

trainings and writing together for almost seven years now. I am a social work Associate Professor, and my partner is an LCSW with more than 20 years of experience in urban and rural settings, and medical and mental health settings. When we first started to work together, my partner would come to me enthusiastically with research idea after idea. One of our first professional activities was co-facilitating MSW student groups on diversity. In these groups, intriguing insights emerged from the group conversations. My partner wanted to record these and write about the process. My first response was, "We can't do that. To do research we need an IRB. It would take a month at the very least to get an IRB, and we could not go back and reconstruct comments, because we would need the students' permission before we recorded their comments." He naively asked, "What is an IRB?" I told him about Institutional

Review Boards (IRBs) that are in all academic institutions, hospitals and many agencies. To even begin doing research, you must get your institution's approval—for you are using their time, their students or "subjects," and their facilities. Also, the IRB wants to make sure that you are not doing anything unethical to your subjects—like the Tuskegee Experiment (Drewry, 2004; Jones, 1993). He then said, "But, we aren't doing anything to anybody. We are just having a conversation and creating a group experience." He did have more than 20 years of experience in health and mental health, but he did not know anything about the research process and protocols. So, this research idea was put on hold.

Later my partner went to work for an agency that contracted with a state agency that received federal funds to serve preschool children and their families in rural areas. He came back from this agency with stories of the resilience of the families and the children. In his job, he did meticulous documentation that he thought could be published and provide new information to the field. I patiently informed him about the IRB again and that we would not only need IRB permission from my institution, but from his agency. Even if I only participated in the research to analyze or write about the data, I would still need IRB approval from my university. Also, even though he did the interviews and documentation himself, he did not own these data. If he were to ask permission to use these data, it would quickly get very complicated. He would have to ask the head of the agency that employed him for permission, who would then have to ask the corporate office in another state for permission, who would have to ask the state agency and then probably the federal funders for permission.

This conversation between two of this article's authors illustrates an example of a double bind or contradiction in social work ethics: If we are ethically bound to do research, why is it so difficult for a social work practitioner in the trenches, on the front lines to "do research?"

In this article we present three vignettes, this introductory vignette illustrating the chasm between social work practice and academic and institutional research, the second example from *Journal of Social Work Values & Ethics*, Fall 2008, Volume 5, Number 2 -page 59

rural and community social work practice, and the third describing a school-based program where young people are invited to express their own concerns about confidentiality and ethics and develop their ethical group environment.

While writing this article, we came up with numerous questions and examples of these contradictions and concerns. These three vignettes are examples from our practices and led us to further conversations about the activity of ethical social work, and then led us to write this article in hopes that other social workers would join in this discussion and continue this dialogue. In 2004, the six of us came together with our shared uneasiness about such contradictions, the increasingly litigious nature of social work, and the universal and literal applications of the NASW *Code of Ethics*. The six of us are MSWs who identify ourselves as postmodernists, and we strive to create social environments that are collaborative, expansive, and just. Postmodernism can be an illusive and nebulous concept by definition (Witkin & Saleeby, 2005), but many postmodernists (and the six of us) do share some commonalities. We challenge universal truths, and this includes the universal truths of social work ethical codes. We enjoy playing with ideas and language, and when we are presented with ethical dilemmas or problems, we tend to ask questions, engage in dialogue, and immerse ourselves in collaborative activities (Flax, 1990, Witkin, 2000, Witkin & Saleeby, 2005).

We took the process of writing this article very seriously and very playfully. During the past two years we have met almost weekly by conference call to share our insights, explore new ideas, and advance this “product,” our article. The process and discussion took on a life of its own. The opening conversation is just one example of how we juxtaposed these contradictions and dilemmas in 21st century social work.

In the title of this article, we use the term *expansive*. By this, we mean that we were careful to include each member of our group in the discussion, and we did not want to exclude the perspective of clients, administrators, academics, indigenous social workers, and/or those in need who do not wind up being serviced by social workers. We felt that ethical social work is expansive, not narrow or restricted. In social work, the term *social justice* is frequently used. We see collaborating and inclusion as being just, fair, and as a part of how ethical environments in social work can be created. This article will explore how ethical practices are currently defined in social

work, their impact on clinical practice, community development, and the advancement of the profession, and propose that ethics can and should be a dialogical activity and praxis for social workers.

Ethics: The Foundation of Professional Social Work

Today ethics are an integral part of social work. Many social workers who entered the profession to help others and promote social change, now find themselves especially concerned with protecting themselves from litigation stemming from a breach of ethical guidelines (Bisman, 2004; Brill, 2001; Strom-Gottfried, 1999, 2003). In the past decade, risk management has become a part of social work practice. Elaborate strategies and systems have been developed for social workers to utilize to protect and defend themselves from NASW and licensing board ethics complaints, and lawsuits that allege professional misconduct. (Barker & Branson, 2000; Madden, 2003, Reamer, 2005). Risk management has been incorporated into social work education and continuing education ethics trainings.

In professional practice, accusations of unethical behavior are generally very public and seen as a source of shame and humiliation for social workers. Concerns about dual relationships, boundary violations, and sexual involvement with clients, and protecting oneself from these allegations, have resulted in what some observers have referred to as overly cautious social work practice (Goldstein, 1999; Witkin, 2000;). The debate regarding specific guidelines, as well as an imposed ethical standard in general, still continues (Banks, 2003; Bisman, 2004; Butler, 2002; Clark, 2006; Freud & Krug, 2002a, 2002b; Holzman, 2004; Reamer, 2003).

Values and ethics form the foundation of professional social work. Goldstein (1998) observed that social work practice inherently is an ethical and moral endeavor. Reamer (1999) states that values “are generalized, emotionally charged conceptions of what is desirable; historically created and derived from experience; shared by a population or group within it; and provide the means for organizing and structuring patterns of behavior” (p.10). Moreover, Reamer asserts that social work’s “mission has been anchored primarily, although not exclusively, by conceptions of what is just and unjust and by a collective belief about what individuals in a society have a right to and owe one another” (Reamer, 1999, p.5).

The Roots of Ethics

It is clear that ethics are a part of social work today, but what are the roots of ethics? Historically, ethics has been a branch of moral philosophy. The field of ethics, also called moral philosophy, involves systematizing, defending, and recommending concepts of right and wrong behavior. Dialogues between Socrates and Gorgias or Protagoras come to mind when thinking about philosophy. But when the word *ethics* is applied to the field of social work in the United States, one is more apt to think of risk management and the consequences that can result from ethical violations, such as loss of licensure and sanction. If discourse about ethics was not so overdefined by these fears, the dialogue about social work ethics might have a different conceptual framework (Banks, 1998; Chambron, 1994; Holzman, 2004; Hugman, 2003; Maguire & von Baeyer, 1998). Such a change might frame the discussion to consider questions such as: Do social workers perceive the populations they serve as informed consumers who can freely select from what is available in the marketplace? Does the **social** in **social work** refer to an activity of social change or social control? Do social workers see the people they serve as diagnostic categorizations or populations at risk who require interventions? Would we ever want to be friends with them or have a relationship with them outside of the environment where we meet them, and if not, why not? While writing this article, we came up with more questions than answers. We do not attempt to answer these questions. We believe that if social workers took a more proactive stance in their ethical practice rather than reacting to federal and state policies and laws, codes of ethics, and lawsuits, that social workers could truly advance the quality of their practice and the social work profession.

Ethics as Activity

In this section, we review the literature that supports ethics as activity or discourse. Witken (2000) suggests we view ethics as a form of discourse rather than a system of rules. He cautions about restricting moral discourse to formal or approved approaches. "Like all dominant discourses, mainstream ethical beliefs tend to function in ways that preserve the social order" (p.199). Despite the necessity of codes and rules, he reminds us, they "have a transcontextual quality that favor people in socially advantageous positions" (p. 199). Given the complexities of social life, "to assume the superiority of our ethical beliefs is to silence others and diminish our social resources"

(p. 199). He suggests that as members of a profession that values collaboration and diversity, we engage in a “collaborative discourse” that can only benefit us as a profession.

Maguire and von Baeyer (1998) describe discourse ethics as those which establish and foster conditions of civility and openness in which all members of the conversation are encouraged to voice their concerns, and in which the unacceptability of silent acquiescence, the encouragement to defend one’s convictions, question actions and policies, and the holding of others accountable is implicitly signaled. Discursive interaction is considered to be a stimulator and reinforcer of commitment to moral values and the generator of a community ownership of moral problems.

Chambron (1994) believes that the growing domain of ethics and its recognized experts can have negative implications for the practice of social work if not critically examined. She is concerned that “with its selective emphasis on the advancement of multiple arenas of application, its identification of critical decision points in action and the privileged inquiry into ethical pragmatics and legal competencies, [the discussion of ethics] is not accompanied by a debate on the premises of such a knowledge base and its underlying philosophy” (p. 63). She is particularly concerned that the emergence of recognized experts leads to the rest of social work being defined as unexpert by default.

Hugman (2003) suggests that a code of ethics should be seen as a “discursive document.” He states that a code of ethics should be constantly under discussion and reconsideration. This would necessitate that the process of ethics be regarded as the responsibility of every member of the professional community. This includes not “leaving matters of ethics to the experts...and attending to the capacity to engage in ethical reflexivity as crucially as to other aspects of praxis (the dynamic relationship between theory and practice)” (p.12).

Hugman’s (2005) *New Approaches in Ethics for the Caring Professions* examines contemporary and postmodern approaches to ethics within the context of the ethics of care, ecology, postmodernity, discourse ethics, and discursive professional ethics. Hugman demonstrates how discursive ethics can be “produced from extensive dialogue that involves all those who have an interest in the outcome, at least potentially, can be a process that enables each individual and group to be heard, to listen and to be accorded recognition” (p. 139).

Ethics and the Codification of Ethics

The Education Policy and Accreditation Standards of the Council on Social Work Education (CSWE) states that values and ethics are to be presented through the National Association of Social Workers (NASW) *Code of Ethics* in CSWE-accredited social work education programs (CSWE, 2002) The 1999 *NASW Code of Ethics* is the most specific and comprehensive social work code of ethics to date. Banks (1998) asserts that while a code of ethics may be a feature of a profession, considering that not all social workers are members of the NASW, and that most social workers operate under the surveillance of state or corporate agencies, work in a variety of settings, at disproportionately lower wages than their counterpart professions, and are frequently accountable to supervisors from other professions—such as business, education, law, medicine, and nursing—it is questionable how much autonomy over work a social worker is actually able to exercise. Banks (1998) sums it up this way:

If the occupation is so fragmented, can there be one code of ethics for all types of workers? ...given that much social work takes place in bureaucracies the tension between professional ethics and bureaucratic rules has always been cited as a reason why it is very difficult for a social worker to work as an autonomous moral agent, making decisions according to professional judgments based on the principle of a professional code (p. 223).

Banks (1998) concludes that with the increase in bureaucratic oversight and subsequent increase in surveillance and monitoring of activities of social workers, “it appears that the role of the existing code of ethics in holding together members of a disparate occupational group in the current climate is debatable” (p. 223). She expresses a concern that in the current environment, the social worker is in danger of becoming simply a technician or an official. And that it is for this reason that the code of ethics be re-evaluated and debated within the community of social workers as a whole rather than just by members of a professional organization.

Banks (1998) argues for developing a code of ethics, “not as an imposed set of rules developed by the professional associations, but as part of a dynamic and evolving ethical tradition in social work and as a stimulus for debate and reflection on changing and contradictory values” (p. 213). For such a project to succeed, she believes, the code of ethics must not only be critically discussed, it must also be acknowledged as being embedded in the evolving ethical tradition of social work. Banks (1998) cites Edgar, who was critical of both the British Association of Social Workers (BASW) and NASW codes for not making the relationship of the code and the tradition explicit: “A profession will be underpinned by its own traditions and it is precisely the ethical *Journal of Social Work Values & Ethics*, Fall 2008, Volume 5, Number 2 -page 64

tradition to which a code should appeal in order to ground its interpretation and reinterpretation” (p. 228).

Banks reiterates that for a code of ethics to be a focus for the renewal of an ethical tradition, it must be constantly discussed, debated, interpreted, and reinterpreted. “According to Edgar, unless a code can be formulated as to allow genuine criticism, ‘it remains the pure sedimentation of a tradition, and as such contributes to the reproduction of existing politics of the profession’” (pp. 228-229).

Building Ethical Practice Through Collaboration

Viewing ethical practice as a dialogical activity is consistent with the core social work value of relating to clients as responsible agents in the helping process. It also challenges paternalistic practices. Leonard, Goldfarb, and Surnovic (2000) define paternalism as “the non-consensual interference in self-regarding decision-making of an autonomous person, where autonomous persons are adults, not incompetent, incapacitated, nor under coercion” (p. 323). A paternalist, they caution, is “logically required to believe that the intervener is better placed than the paternalized person to judge the latter’s welfare” (p. 323). Rhodes (1991) questions whether existing social work practice actually empowers clients or undermines it: “the focus on ‘professionalism,’ for example, runs the risk of increasing the power and authority of the worker over the client and thus of empowering workers rather than clients” (p.18).

Fleck-Henderson’s (1991) discussion of moral reasoning in social work includes the practitioner’s colleagues, supervisors, agency policies, and professional code of ethics as possible resources in the interpersonal process of moral reasoning. We would argue that the client also plays a role in the perception, construction, and resolution of a moral dilemma experienced by a practitioner, especially if that moral dilemma involves the practitioner’s interface with the client. We would not view the client as someone who needs to be protected by the practitioner’s moral decision-making process, but rather as a capable co- creator of that process.

The privileging of social workers to make decisions regarding the nature of their relationship without input from their clients may be ethically questionable (Holzman, 2004; Zur, 2002, 2007). A client’s right to self-determination is a fundamental human right that the profession of social work adheres to (Johner, 2006), yet it is the social worker who is assigned responsibility for setting the parameters of the ethical relationship (NASW, 1996; Reamer, 1999). This points to

the moral dilemmas most social workers encounter, because we are more accountable to bureaucratic, legal, and organizational authorities than we are to our clients.

To challenge these dilemmas and to build collaborative practice, Goldstein (1998) suggests viewing ethical social work practice as an art and that "...like any art, ethical and moral understanding is best learned through the experience of human relationships and its many variations" (p. 242-243). Goldstein (1998) encourages us to appreciate the complexities of the human condition: "The social worker as a performing artist has the talent and will to move beyond the constraints of method and technique and respond imaginatively and creatively to the impromptu, unrehearsed nature of the special human relationship" (p. 250). Conceptualizing ourselves as artists who create with clients, colleagues, environments, and experiences is different and perhaps more empowering than seeing ourselves as employees or agents that implement policies and mandates.

Boundaries and collaborative social work activity

Viewing clients as capable of collaborating and defining ethical social work practice leads to the issues of boundaries and therapeutic activity. One of the more notable areas of debate, anxiety and caution in the arena of social work ethics is the dialogue about boundaries and dual relationships. It is an area that has received much attention as a result of cases of sexual abuse of clients and the growing fear of sanctions for inappropriate use of a therapeutic relationship for a therapist's self-interest. This issue has permeated psychotherapy, marriage and family therapy, psychiatry, psychology, and social work. In the interest of stemming the tide of exploitation of these professional relationships, professional associations quickly adopted guidelines in regard to boundaries and dual relationships without a serious exploration of these notions (Zur, 2002, 2007). Hence, a superimposed structure was set forth without tools for exploration and study of the activity of relationship, dialogue, discourse, and decision-making in the therapeutic context.

Boundary violations and dual relationships have become pathologized and equated with sexual misconduct, understood as toxic or as a slippery slope analogous to using drugs. (Coale 1998; Tomm 2002). Zur (2002, 2007) identifies how this climate prevents discourse about closeness and intimacy in the therapeutic relationship, arguing that the simplistic "prohibition of nonsexual dual relationships increases the chances of exploitation and harm" by contributing to professional isolation and disconnection and creating an environment for the novice or

incompetent therapist to work without witness. Witkin (2000) and Maidment (2006) point to the troubling trend toward a more sterile, formalistic approach to social casework.

In the area of legal principles, boundaries, and dual relationships, Ebert (1997) expresses concern about the definitional and legal vagueness of the terms dual relationship and boundary, which therefore allows for abuses and misuses of legal judgment. From a constitutional point of view, prohibitions from dual relationships deny both client and professional the right to free choice, the right to privacy, and the right to free association, concepts that are foundational to the view of the social work profession.

Other authors point out how the dual relationship prohibitions limit the effectiveness and power of the therapeutic effort (Evans, 2006; Ginsberg, 2005; Tomm, 2002; Vodde & Giddings, 1997; Zur, 2001). With prohibitions on dual relationships, “not only is the issue of exploitation being confused, but human enrichment possibilities are being restrained, professional hierarchy is being privileged and social alienation is being enhanced” (Tomm, 2002, p 42). Tomm uses poignant personal examples in his work with clients, students and supervisees to share the positive human impact of multiplicity and complexity in relationship. Zur (2001, 2007) extends this dialogue with numerous case examples of positive outcomes with planned and inadvertent work with clients outside the therapy office.

These observations are consistent with others who point to the quality of the relationship between the client and social worker as being the key to positive outcome (Duncan & Miller, 2004; Norcross, 2002). Duncan and Miller (2004), in exploring what makes for treatment success, debunk the myth of the efficacy of any specific treatment theory employed and postulate the centrality of the relationship alliance and the quality of the relationship in positive therapeutic outcome. In a similar vein, Norcross’ (2002) research and meta-analyses indicate that the quality of the therapist/client relationship is more often associated with positive outcomes in therapy than the theoretical perspective being used or the educational background of the therapist.

Ginsberg’s (2005) *Social Work in Rural Communities* provides chapters on how dual relationships may be inevitable in rural areas and how they can be managed and used to support treatment goals and empowerment in rural areas. Vodde and Giddings (1997) and Evans (2006) support these characteristics and claims in rural social work. Following is a vignette from one of

the authors about this experience as a social worker in a rural area. The complexities and paradoxes of multiple relationships are illustrated in this example.

The Accidental Rural Social Worker

Social work in a rural setting presents challenges not specifically addressed in the Code of Ethics. In these settings, boundaries and confidentiality are difficult to define, especially when the social worker is an outsider in the community. While working as a group therapist, I noticed that the group participants shared a long history, in and out of mental health settings. They often talked about what transpired in the group with each other and family and friends. Often when encountering a group member in a public setting, this author would be introduced as “the person I told you about.” I would often be invited to the homes of families for a social occasion, or to go hunting and/or fishing with them. These invitations were graciously turned down, and opportunities to integrate into the community and learn more about the individuals, their family, community, rituals were denied. It would have been helpful to be able to see the client as someone integrated in a community rather than as a diagnostic label. And it would have been helpful for the community to see me, an outsider, as someone interested in becoming involved in their community, but concerns about boundary violations, confidentiality, liability, and maintaining a professional social distance prevented this. Social distance in these settings can often be perceived as rudeness. Let me relate a story to illustrate this point. While waiting for my lunch in a small, crowded restaurant, the owner came out to speak with me. She was smiling and very warm. She said that she knew who I was, because a former client, whom she named, had spoken of me. She said the client was now living in another state and was doing well and asked her to tell me how much she appreciated our time together. As she spoke, I became alarmed. I could only think of the Code of Ethics and issues of confidentiality and privacy, and the fact that everyone in the restaurant in this small town could hear what she was saying. Thinking only of potential liability, I responded in what I can see now was an inappropriate manner to the situation. After all, it was not as if most people in the restaurant did not know who I was and what I did. I was, after all, the outsider in that community. My response was to state I could not talk about anyone who may or may not have been a client. Her response was that she was not asking me to talk about anything, rather to listen to what was being said.

In subsequent ethics workshops, I discovered that the rules are different in rural settings. And only much later, in researching this paper, did I discover that the rules are primarily focused on clinical practice, and not necessarily appropriate to community practices. But I had internalized the Code of Ethics robotically. Here I was in a community where relationships mattered, and I was concerned only with rigidly defined notions of boundaries. In such communities, everyone knows everyone’s business. If I were to engage in a sexual relationship with a client, I would be ostracized from that community. But my observation of the female clients was that their vulnerability did not include being vulnerable to me. They, after all,

had a much more intimate involvement and awareness of the protocols of the mental health system. They had known more people like me than I had known people like them.

This example illustrates some of the realities of rural social work practice, such as the close proximity of clients and social workers, and their intricate connections and networks. This example also showed the astuteness of many clients and their families and friends in understanding the roles, protocols, and limitations of mental health social work practice. In this vignette, the clients and those in the community had more flexibility in discussing their experiences with the mental health system and the therapist than the social worker did. This led us to wonder that with the ubiquitous focus on person and environment in social work, how can we enter, learn about, and be a part of a rural or any community in a way that promotes social growth and development for those we serve and their communities? Do codes prevent or detract from authentic interactions in social work practice in rural environments?

Ethics and social work education

Other areas of concern are boundaries and ethics in the academic social work setting. An electronic search of the literature from several databases yielded less than five articles on social work ethics and education, two of which are about faculty views of dual relationships with students (Congress, 1996, 2001). The main emphasis of concern appeared to be the ethics of engaging in sexual relationships with students, with a consensus seeming to be that it was okay if the students were no longer students and if marriage resulted from the relationship.

We see ethics in social work education as being more than just views on dual relationships. Ethics education should open learners' minds to critical moral issues and choices and should prepare social workers to be "alert and responsive to questions of moral choice, social justice, prevailing moral codes of conduct, and, not the least, personal accountability whether she is doing research, applying theory, planning, or engaging in practices..." (Goldstein, 1998, p. 246).

Some issues to consider are: If students are future colleagues, then when do the boundaries change from student boundaries to collegial relations? Also, what does it say about students, if student boundaries and client boundaries are similar? And what does it say about clients? Historically in mentorship interactions, students would spend much time with their mentor and learning would take place both in and outside the classroom.

In his essay, Tomm (2002) shares his experience, which included having the option to work with a supervisor he highly respected. In the evolution of the relationship, Tomm described having enriched his connection with his supervisor, whom he respected and emulated, and this gave greater meaning to his own growth.

Building ethical activity through collaboration

In this article, we want to do more than just pose questions and make lofty proposals of how ethics can be a just and collaborative activity. This example shows how an ethical environment was built over time through collaboration.

In social work and other helping professions, confidentiality is a key component of sound ethical practice. The following vignette and reflections are offered to highlight how the ethical practice of maintaining confidentiality can be re-cast as processes and creations between social worker and client rather than as an imposed rule to reconcile ethical dilemmas.

This example comes from the experience of one of the authors, who started a community mental health program 13 years ago in an urban school-based health clinic. In starting this program 13 years ago, I first invited young people to come into counseling with me on a one-to-one basis, and they could bring a friend if they liked. Some did. I observed that many of them seemed to need more support than they had at home or at school to deal with the kinds of stresses they were under. I then told them about my desire to start a group where they could get support. Everyone, without exception, said they were not interested in being part of a group. They didn't want to talk in front of other kids, feeling that if they did, people would "gossip their business" in the halls or think that there was something wrong with them. These fears and concerns were an ongoing topic of conversation with the young people who came to me for counseling in the first few months. Telling them about confidentiality and codes of ethics was not enough.

As we continued to work together, I again shared that I wanted to start a group, and the students once again refused. I took their concerns seriously and as an opportunity to further develop our therapeutic relationship. I then presented them with a contradiction. The students had stated that talking to me was helpful, so I asked them why they thought I would refer them to a

situation, in particular one that I was leading, that would be harmful to them. I invited them to join me in creating a group in support of their relationship with me and my desire to pilot a program that could be of value to them and future students. If, after trying it at least a few times, they did not like it, they did not have to come back. Also, I made it clear that their concerns about gossip were real and on everyone's mind, and that we would need to discuss confidentiality as a group, what

we needed to do individually and as a group, and how I, the social worker, could support the group in creating confidentiality.

At the first group session and throughout the years of this ongoing group with members joining and leaving the group, I have asked the group what confidentiality means, what it means to create confidentiality, why the group needs confidentiality, and what they need to do to practice confidentiality. A founding member of the group stated that “youth are not often asked to create confidentiality. Rather, they are asked to keep things confidential. In creating confidentiality, what is said in the group stays in the room. It is not to be let out of the room, and if it is let out of the room, people could get hurt. In the group, we were asked what it means to keep confidentiality, and how the group wants to practice confidentiality. Confidentiality is an activity, like gossiping and keeping secrets are activities.”

The group also addressed the activity of “gossiping their business,” and what this activity was and what it meant. There were then discussions of what happens if group members tell or break confidentiality. What would the consequences be? Often the group would want to kick members out who broke confidentiality. I would respond therapeutically and state that I was not interested in creating that kind of environment where people can be kicked out. The group members often had to grapple with this I then told them I was interested in creating a group where people can grow, learn new ways of relating to each other, and create choices other than gossip. This therapeutic response illustrates that I too was a part of the group, that I influenced the process like other members of the group. In this group, the young people were not passive, and I was not passive.

This vignette illustrates how confidentiality can be created. The creation in this group involved a collaborative discourse between the facilitator and all the group members, and it is striking that the participants were the ones to initiate this discussion through their concerns and fears before participating in this group. Codes of ethics and rules surrounding confidentiality did nothing to alleviate their concerns. The young people in the group were seen as capable of creating confidentiality and an environment to support choice making and growth.

Conclusion

We offer this final example and article to stimulate discussion and to invite others to join in posing questions, creating ethical activity, and building collaborative and just environments. This can be done through conversations, interactions, reflections, writings, presentations, performances, continuing education workshops, social work courses, class assignments, and other relational and collaborative activities. These can include social workers, clients, those denied services, administrators, academics, family members of clients, students, critics—all persons and

elements involved. More often than not, these are messy activities or processes that can be built, played with, torn down, reconsidered, rebuilt, and transformed. This can and will take time and initiative and is far riskier than robotically following, implementing, and enforcing codes and rules, but by engaging in this activity assertively and proactively we can perhaps bring our fragmented and unfortunately hierarchical profession back to its foundation of social justice and ethical practice.

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Social Work and The International Humanitarian Law: Rights, Roles, and Responsibilities

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Abstract

The Geneva Conventions and their additional protocols, also known as the International Humanitarian Law, are important international laws consistent with social work values that seek to ameliorate the suffering of the most vulnerable and protect human dignity during times of armed conflict. Despite increasing awareness of the international nature of social work services and interests, American social workers tend to be relatively uninformed of the basics of international legal instruments. This article outlines the basic aspects of the law and discusses how social workers must be prepared to understand and implement the spirit and letter of international humanitarian conventions designed to help protect people caught in the middle of armed conflict. Key words: war, law, human rights, Geneva Conventions, international social work

Introduction

Conflict, violence, and war have been unfortunate results of the ambiguous international political environment of the post cold war era. The major alliances constructed from the polar opposition of the superpower nations of the United States and the former Soviet Union, and the political legacies of the earlier colonial era are transforming nation-states in new and unpredictable ways. The by-products of this transformation include the increasing practice of mass terrorism and war. Tensions created by technological revolution have provoked increased instability in world economic relationships. Added to these conditions, the emergence of two simultaneous but apparently contradictory social forces: globalization of information and cultural products on the one hand, and a renewed assertion of cultural and ethnic identity on the other, have combined to foster widespread feelings of uncertainty, political tension, and social injustice based upon bigotry and xenophobia (Bugnion, 2000). Perhaps as a consequence, the horrors of war persist into the present day and the foreseeable future.

Provisions in the United Nations' Charter (1945) outlaw initiating war to solve political conflict, yet military defense from hostilities remains legally available. Increasingly, inter- and intra-national military conflicts occur with tragic consequences of death, disease, and civil dislocation. Despite arguments that war is increasingly becoming more difficult to wage (van Creveld, 1991; Berry, 1997), the number of conflicts, and resulting civilian deaths since 1945, approach outstripping the losses in WWII, and the preceding two centuries (Singer & Small, 1982; Dyer, 1985).

In a globalizing world, still fraught with armed conflict, social workers must be prepared to understand and implement the spirit and letter of international humanitarian conventions designed to help protect people caught in the middle of war. Social workers increasingly find themselves involved with issues of refugee assistance (Balgopal, 2000; Montero, D. & Dieppa, I., 1982; Tran, T.V. & Wright., 1986), international relief and development (Estes, 1992), and the provision of services to persons affected by war and armed conflict (American Red Cross, 2002). The need for social workers to have command of legal knowledge has been raised previously (Madden & Wayne, 2003; Lemmon, 1983; Miller, 1980; Kopels & Gustavsson, 1996), largely in the context of domestic social work practice. Despite an increasing awareness of the international nature of social work services (Healy, 1992), and international human rights (NASW, 2000; Reichert, 2003), social workers tend to be relatively uninformed of the basics of international human rights instruments such as the Geneva Conventions, increasingly referred to as "International Humanitarian Law" (IHL). This article seeks to introduce social workers to the provisions of IHL, and its ramifications for policy and practice.

Social Workers and Armed Conflict

Two major themes permeate the social work literature concerning war. On the one hand are the writings of those in the profession who have had a long history of pacifism, and trying to prevent war through social action (Sullivan, 1993; Verschelden, 1993; Addams, 1907; Schott, 1993), while others who stress social work treatment of war's effects with victims when it becomes necessary (Richmond, 1930; Ross, 1991). The social work literature since the last world war focuses on treatment of a number of different issues concerning the personal and social consequences of armed conflict. Several studies explore direct service intervention approaches with clients who are affected by the psychosocial stresses of combat. These efforts explore direct

practice with soldiers (Martin and Campbell, 1999), military families, and the stress of reintegration of military families back into post conflict life (Knox & Price, 1999; Westhuis, 1999), Additionally, roles by military social workers have focused on the support social work activities can provide to combat readiness (Daley, 1999). Social work practice with refugees uprooted by war has received attention concerning the difficulties of resettlement and acculturation (Lipson & Omidian, 1997), religious and political support, (Canda,1992) mental health (Westermeyer, J., Williams, C.L., & Nguyen, A.N, 1991), and culturally sensitive practice (Brown, 1982).

The changing nature of military conflict, humanitarian relief, and international policy requires social workers to know what international conventions exist that bind combatants to basic standards of humanity. In the absence of a comprehensive international law that outlines the conduct of humanitarian providers, or an "international disaster response law", the IHL at least offers basic protections in those situations of providing humanitarian relief in environments of armed conflict (Hoffman, 2000). In being able to advocate for the rights of persons threatened by armed conflict, social workers need to understand the international "ground rules" from which debate is framed. The Geneva Conventions and their additional protocols constitute a legal and policy framework that seeks to ameliorate human suffering arising from the tragedy of armed conflict.

Social workers have certain rights, roles, and responsibilities under the IHL, yet tend to be largely uninformed as to the basics of these agreements. An electronic title and text search conducted by the present author of all volumes of *Social Work Abstracts* could not discover a single article in that database that discusses the Geneva Conventions or the International Humanitarian law.

Rights & Roles: The International Humanitarian Law

The Geneva Conventions (1949) and their Additional Protocols (1977) are a set of agreements amongst virtually all the nations of the world which specify basic humane conduct in the face of the human suffering provoked by armed conflict. The conventions specify that warring parties make distinctions between combatants and non-combatants and seek to provide basic protections for persons not engaged in the direct conduct of military action. The conventions represent limits in armed conflict have been described as a special and distinctive set of human rights law (Chetail, 2003). At a minimum, the first Geneva Convention required that soldiers

placed "out of combat" by sickness, wounds, or detention, be treated humanely, and violence to their person and dignity, including murder and torture, be prohibited. The soldier is, in a sense, an agent of the state licensed to commit specific violence to pursue military objectives. Wounded or captured, the soldier no longer serves a military function and is entitled to the basic human rights of the individual.

The first Geneva Convention was convened and signed at Geneva, Switzerland in 1864. The impetus for this first agreement is often credited to the efforts of Henry Dunant, a Swiss businessman and social progressive, who was a witness to the sufferings of the wounded after a horrendous battle in Solferino, Italy in 1859. Dunant helped to organize relief to the wounded of both sides with volunteers of a nearby village. In 1862, Dunant published an influential book, *A Memory of Solferino* (1939), and succeeded in forming a committee of influential Swiss citizens of the Geneva Public Welfare Society who undertook to persuade national leaders to agree to basic rules of humanity in times of war. This committee is formalized in the Geneva Conventions as the International Committee of the Red Cross (ICRC), which continues to this day to be a central international organization concerned with humanitarian protection in armed conflicts.

There have been three subsequent conventions leading to an evolution in the IHL. In 1906, the basic protections provided to soldiers in the field were extended to sailors on the high seas. In 1929, protections were codified for prisoners of war. By 1949, all the provisions were updated, and protections were extended to civilian non-combatants. Since 1949, two additional "protocols," which seek to further define protections in international and non-international armed conflicts, have been posited. These protocols have less widely held acceptance.

Taken together, the Conventions are part of what is considered "jus in bello" ("law in war") that sits outside of questions of whether there is ever justification of armed conflict. The Conventions seek basic assertions of human rights when the chaos of armed conflict reigns. They dictate rules of humane treatment that encompass concerns of those detained by military powers including the sick and wounded, prisoners of war, detainees, civilian internees, and refugees. The 634 articles of the four conventions, their annexes, and three additional protocols, provide detailed considerations concerning basic human needs and mechanisms of protection in armed conflict. The IHL specifies responsibilities and protections that include such diverse requirements as the provision of protections for detained persons, communication between separated family members,

marking protected persons and places, and mechanisms concerning the repatriation of prisoners of war.

At a minimum, a common "Article Three," sometimes referred to as the "Mini-Convention," is found in all four of the Conventions that captures the basic foundation of all of the IHL. Article Three holds that the articles of the Conventions apply in all cases of war or armed conflict; that all persons not taking part in hostilities or "Hors de combat," shall be treated humanely without discrimination or violence to life & person; that taking hostages and outrages on personal dignity is forbidden; and that a representative from a neutral "protecting power" country, or the ICRC, must have access to any person detained. The Conventions create mechanisms that seek to implement humanitarian concern in war. These mechanisms include the recognition of the Red Cross/ Red Crescent movement, the use of protective emblems, and the dissemination of international humanitarian law throughout the world.

The Red Cross/ Red Crescent Movement

Often recognized locally or nationally as the social service organization that provides disaster related emergency services, few recognize that the Red Cross, or its other recognition, the Red Crescent, is one of a group of specific organizations recognized with identified rights and responsibilities under international law. Perhaps one of the largest secular charitable efforts in the world, the structure and function of the Red Cross is often misunderstood (Forsythe,1977). The Red Cross is more accurately understood as a "movement" with at least three major organizational structures: The International Committee of the Red Cross (ICRC), The International Federation of Red Cross and Red Crescent Societies (IFRC), and the various national Red Cross/Red Crescent societies of all the countries that are party to the Geneva Conventions.

The ICRC

The International Committee of the Red Cross, headquartered in Geneva, Switzerland, is an international organization established in 1863 and legitimized in the Geneva Conventions to perform certain international responsibilities (Studer, 2001). The organization purports to be an impartial, neutral, and independent actor whose mission is solely humanitarian; engaged in the protection of lives and dignity of victims of war and armed conflict. Comprised of a private collegial assembly of usually twenty-five co-opted Swiss citizens, The ICRC employs thousands of "delegates"—usually university-trained young Swiss, whose work in the field implements the

committees' mandates under the Geneva Conventions. These mandates include visiting prisoners of war and other detainees, in privacy, to inspect their health and safety; giving such persons opportunities to send personal communications to and from their families; and creating and maintaining records of persons killed or dislocated by armed conflict. It is the recognized neutrality of the ICRC that supports its delegates' efforts at accessing and providing services to combatants on both sides of an armed conflict.

The ICRC directs and coordinates the international relief activities conducted by other movement partners in situations of armed conflict. It also endeavors to prevent human suffering by promoting and strengthening humanitarian law and universal humanitarian principles in international political arenas. It maintains an observer status with the United Nations, and frequently sends representatives to international diplomatic conferences to assert human needs. Diplomatically regarded as "the guardians of the Geneva Convention," the Committee maintains ongoing institutes for military and legal scholars to train in international humanitarian law. At the outbreak of hostilities, it makes active diplomatic efforts with combatant nations to establish relationships to support the requirements of the Conventions.

The IFRC

The International Federation of Red Cross and Red Crescent Societies (IFRC), also headquartered in Geneva, was founded in 1919 as an organization of national Red Cross societies who could pool their efforts to mitigate the human suffering provoked by natural disaster. Previously known as the "League of Red Cross & Red Crescent Societies," the organization had its roots in progressive era American Red Cross successes in disaster relief (Hutchinson, 1996). The impetus for this effort derived from a realization that preparing for disaster relief work was consistent with the mission given in the Geneva Conventions to national Red Cross societies to aid the humanitarian concerns of their respective countries' military. The IFRC is comprised of 181-member Red Cross and Red Crescent societies and maintains delegations in regions around the world. While the IFRC operates as an organization that coordinates and implements disaster relief and social development, its role in armed conflict is supportive to the mandated lead agency, the ICRC.

The National Societies

The Geneva Conventions require the creation of societies that are responsible for supporting humanitarian efforts within a nation. Every country that agrees to be bound by the IHL, provides for the creation of a single national Red Cross or Red Crescent society (The State of Israel is supported by the Magen David Adom, or "Red Shield of David" society). The activities of each of these national societies vary widely. Many are involved in domestic disaster relief, health and safety education, and social services. In some countries, the national Red Cross society takes a significant role as the major provider of emergency medical services, or collection of blood products. All of these domestic services support the possibility of the national society playing a role to support the ICRC in the case of armed conflict, or the IFRC in regional or national disaster relief.

Each nation that is party to the Geneva Conventions has a responsibility to disseminate information about the rules of IHL to their respective military and their citizens. In the United States, the training commands and Judge Advocate General's offices of the various uniformed services are responsible to inform personnel under their command (Department of the Army, 1956). The American Red Cross provides courses and information about the IHL to all interested persons.

Working under a framework of the Geneva Conventions and a set of universal principles, all members of the Red Cross/Red Crescent movement have at hand certain technologies that help to ameliorate human suffering in the midst of armed conflict. These include certain emblems, services, and responsibilities. The various partners cooperate to help locate persons dislocated by war, provide humanitarian relief supplies, and cooperate in sending and receiving personal family communications to prisoners of war and detainees throughout the world.

The Protected Emblems.

The Geneva Conventions create three universally recognized emblems of a red Greek cross, a red crescent, or a "red crystal" --a red square turned on a corner, on a white background as symbols of protected persons and places that carry out humanitarian functions in armed conflict, such as military hospitals, ambulances, and medical personnel (Bugnion, 1989). Military medical personnel, including military social workers, are not considered combatants or legitimate military targets and must provide care to sick and wounded persons impartially. In time of armed conflict,

military authorities may extend the use of the emblem to protect noncombatants such as civilian hospitals, refugee camps, and designate humanitarian relief efforts such as prisoner-of-war transports. Military commanders are responsible for respecting the protective nature of the emblem and may not use it for deceptive, perfidious, or direct military advantage. The emblems' use on military vehicles or equipment commits that equipment to use for humanitarian reasons only. Commanders are responsible not to fire upon the persons and places the emblem protects. To do so constitutes a universally recognized war crime. Both in times of peace and in armed conflict, small versions of the emblem may be used to indicate property or persons who are acting as members of a national or international Red Cross or Red Crescent society.

The protective emblems protect only in that they demarcate persons and places under humanitarian concern and serve no military objective. Their use in armed conflict is restricted to military personnel and the Red Cross and protected under most nations' laws. The misuse of the emblem threatens to dilute its importance in protecting lives in the chaos of combat. Social workers who become aware of the improper use of Red Cross symbols should use the opportunity to teach misusers about the importance of the protective emblem or consider contacting the local Red Cross society and appraising that agency of the situation.

International Tracing

In the fog of armed conflict, prisoners of war, detainees, and civilian internees are often separated from their families and loved ones and become lost in the confusion of war. The Geneva Conventions contain several legal provisions for the protection of these victims (Bugnion, 1995). Beginning with the Franco-Prussian conflict of 1870, the ICRC has maintained a Central Tracing Agency that seeks to reestablish contact between relatives separated as a result of war, internal conflict, or natural disaster. Establishing agencies to create and provide records of prisoners of war and detainees is a service mandated to combatant nations under the Geneva Conventions. Nations are also mandated under the conventions to help facilitate the efforts of dispersed family members seeking to find each other. Over the years, the ICRC has become recognized and established itself as the useful, and neutral, point of contact that seeks to keep the connections between families and prisoners and those detained by war's exigencies. The ICRC continues to maintain millions of records of detained, imprisoned, and killed persons in armed conflicts going back to WWII. The tracing service continues to explore new technologies and communication methods to support

efforts to allow for humanitarian communications disrupted by armed conflict. Capture cards of interviewed prisoners now coexist with satellite-phones and Internet-based efforts at reuniting families disrupted by war.

Red Cross Messages

When war or other disasters strike a country, people are often cut off from their families because normal communications have broken down. Relatives in the military may be taken prisoner-of-war or moved to refugee camps or shelters. In these circumstances, the Red Cross Message Service is often the only means for families to keep in touch. Messages are restricted to family or personal matters and must be written on a special Red Cross Message form. Red Cross messages are subject to censorship by authorities on either side of a battle line, but in accordance with the IHL, must pass to their intended recipients when their communications concern only personal and family matters. Social workers working with clients separated from relatives as a result of armed conflict may find resources to assist their clients at a chapter of a local Red Cross chapter. Specialists trained in assisting with Red Cross International Social Services are prepared to take information and provide assistance in preparing Red Cross Messages that can be forwarded via the international Red Cross/Red Crescent network postage free to separated loved ones.

Responsibilities under the IHL for social workers

Although not specifically mentioned in the GC, civilian social workers are concerned with helping vulnerable persons meet basic human needs and advocating for human dignity (NASW, 1996). In the practice of their professional roles, social workers at minimum should be mindful of the basic provisions of the IHL should they find themselves in situations of armed conflict. Such knowledge allows workers to be alert to situations that represent breeches of the Geneva Conventions, and give them the opportunity to advocate for vulnerable persons by asserting to authorities in command to respect the IHL. Social workers acting in civilian and humanitarian services are protected persons who deserve and should expect safe conduct should they find themselves providing services to combat's victims (Lancet, 1999). Social workers serving in the military are directly bound by the IHL.

Social workers domestically engaging clients whose difficulties are complicated by intra-national or international armed conflict should recognize the possible resources available as close as the local Red Cross or Red Crescent society. Assistance with international tracing, Red Cross

messages, social services with Armed Forces family members, or resources for refugees from armed conflict are a few of the services provided by the national society.

Family members separated in the chaotic environment of resettlement agonize about the whereabouts of loved ones. Domestic social workers need to be sensitive to the complex demands of armed conflict. Tracing and message services can take weeks or months to cross through hostile environments. Frequent liaison with Red Cross personnel can help workers support their clients who wait anxiously.

Tracing services coordinated with national societies and the ICRC may identify the separated family members who are dead. In such circumstances, the ICRC may be in a position to be able to provide documentation that details the circumstances of death or detainment. This information can be used in some situations for insurance and burial needs of a family. In some cases, such documentation may be part of a claim to war reparations. Clearly, workers engaged with clients separated by armed conflict need to be mindful of the traumatic needs of their clients and what closure difficulties or anxieties are provoked by war and loss.

As the Red Cross/Red Crescent societies staff their ranks from both paid and volunteer personnel, social workers with professional interests in international social services may find opportunities to provide professional and pro bono service. Social workers with fluency in other languages, or particular cultural competencies with refugee communities, can assist local Red Cross personnel in tracing investigation, and Red Cross Message delivery.

Military social workers attached to medical units in zones of armed conflict are specifically protected persons under the Geneva Conventions. In armed conflict, they have responsibilities to care for the sick and wounded impartially. Care must be provided to “friendly” and “enemy” forces without distinction. Should they be captured, military social workers are required to inform their captors of their medical corps attachment. Depending on military necessity, military social workers may be transferred to a neutral agent, such as the ICRC, for repatriation, or, placed in medical services for other prisoners of war held by their captor.

In the theater of operations, military social workers would be advised to understand the distinction between members of the Red Cross movement who may also be operating in the environment. Delegates of the ICRC will be responsible for visiting prisoners of war, and providing humanitarian relief to civilian populations. ICRC delegates will serve as monitors that

will report both to local commanders and the diplomatic corps concerning implementation of the IHL. Personnel from local national societies may also assist in providing civilian relief at the permission of the controlling military authority. Red Cross workers attached to a specific military, such as American Red Cross Armed Forces Emergency Services (AFES) are tasked to provide morale and social supports for their own troops specifically and will not be engaged in the specifically neutral and diplomatic efforts of the ICRC. Whatever their role, military social workers can be encouraged to understand that persons who wear the Red Cross are engaged in a common humanitarian and non-hostile action. Red Cross workers are not combatants, and like military social workers, are protected persons.

As advocates for human dignity, social workers are well positioned to lend witness during times of armed conflict. Social workers should advocate with responsible parties in their governments for respect for the IHL. Workers trapped in the context of armed conflict would do well to keep careful recollection of persons and events who commit war crimes to be able to provide depositions in the inevitable tribunals that occur in a conflict's aftermath.

Social workers have a responsibility to understand under what situations the Geneva Conventions apply and when they do not. The IHL is international law that applies to the conduct of the military of nation-states or recognized armed forces. Its application domestically is restricted to the conduct of providing humanitarian relief to those persons identified as protected. Efforts to use the Conventions as a defense for trespass in civil protests by social workers have been met scornfully from judges on the bench and cast some social workers' credibility in doubt. (Furst, 1997).

Dialogue on Internet social work listservs during the beginning of internment of detainees at Guantanamo Naval Base during the recent Afghan conflict depicted several instances of how the Geneva Conventions are misunderstood (SOCWORK, 2002). Misunderstanding was again apparent with the U.S. - Iraq conflict (SOCWORK, 2003). The NASW code of ethics enjoins social workers to practice competently. Social workers who are advocates for social justice should enter into public debates as informed professionals, and not disseminate misinformation. Instruction and information on the IHL can be obtained through local Red Cross chapters.

The ultimate power of the Geneva Conventions does not come from the paper they are written on, but in a shared reciprocal understanding of the importance of basic human rights in the

face of armed conflict. Violations of IHL draw appropriate public attention, as their consequences are tragic. The voluntary compliance by military combatants, while less overtly visible, remains the most important protection of the Geneva Conventions. The citizen-social worker can play a significant role in their society by affirming the importance of basic human protections in armed conflict. Clausewitz's (1976) doubtful assertions about the rule-less environment of war notwithstanding, military commanders understand full well that legitimate and effective use of military force only comes from the political will of the people whose state they represent (Chester, 2000). As the battlefield of modern war often includes the observing eye of the journalist's camera, the Geneva Conventions become the benchmark by which a military's conduct can be viewed as acceptable conduct, or not. The social work profession's commitment to human dignity and amelioration of suffering calls for the ability to be a credible witness and a humanitarian actor during armed conflict. Knowledge of the IHL arms the social worker.

Conclusion

Understanding the basic principles of the Geneva Conventions is important in the practice and values foundation of social workers increasingly involved in a global environment. The basic human rights protections outlined in the International Humanitarian Law require the ethics of witness and advocacy when armed conflict arises in the world. Clients who are refugees from war may require services that can be obtained under the structures and processes of the Red Cross movement, and social workers should become aware of the law and the services it provides.

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Book Reviews

Mizrahi, T., & Davis, L. E. (Eds.). (2008). *Encyclopedia of Social Work, 20th Edition*. Co-published: Washington, DC: NASW and NY: Oxford University Press. Reviewed by Stephen M. Marson, Ph.D., Senior Editor, and Paul Dovyak, Board Member, *Journal of Social Work Values & Ethics*.

While a graduate student at Ohio State University in 1974-1976, I purchased the edition of the *Encyclopedia of Social Work*. My professors had assigned such a large number of readings from this work that it was cost effective to purchase it rather than photocopy the sections that were required. In addition, I used the *Encyclopedia* as a springboard for composing, formulating, and organizing the large number of assigned term papers and other projects. I have purchased every edition of the *Encyclopedia of Social Work* since my MSW experience. Based on casual comments from other professors, my experience with the *Encyclopedia* fits the norm. With the advent of the 20th edition, we will see a change in the norm. Although the price varies a great deal from \$240.62 to \$495 (see Figure 1), even used copies are out of reach for the typical BSW/MSW student.

Figure 1



In a discussion with an Oxford University Press sales representative, I found that the electronic version is available to universities and addresses student access. I experimented with the library/electronic version. It is much more user-friendly (ease of following directions) and intuitive (ease of using without directions) than the CD version of the 19th edition [see: *Social Work*, 42(2), 210-211, 1997]. Because of this ease, I suspect that many students will never see the print version. The library/electronic version resolves the student access issue. However, practitioners will have a problem. The print version is too costly for practitioners, and academic

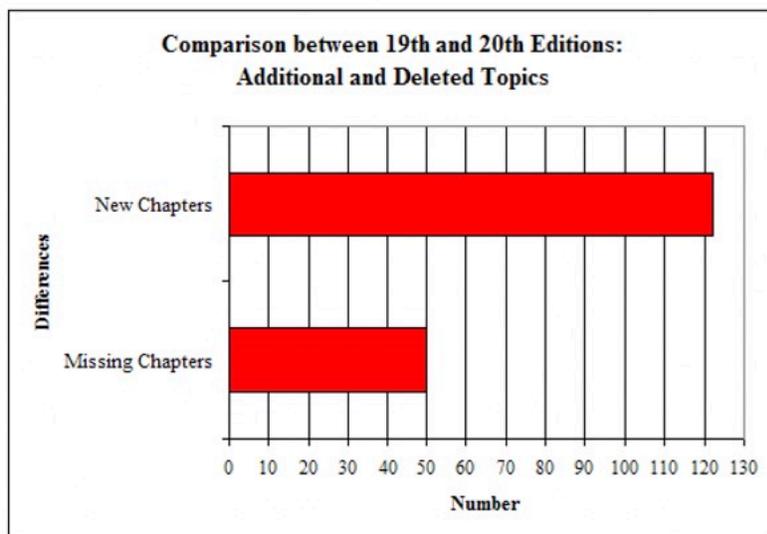
libraries are generally not accessible to them. I hope local chapters of NASW can make the electronic version available to their membership.

The 20th edition does preserve the continuity of organizing knowledge about the social work profession at a fixed point in time. The four-volume set, however, is a compromise of the dilemma of the information age. The content reasonably attempts to record the history of the social service response to persistent social problems (i.e., poverty, health care) AND project emerging practice trends in expanded fields (i.e., genetics, immigration). For the purposes of further study and evolution of information in the field, the electronic version will be preferred. Many entries have Web sites embedded in the narrative.

Nearly 400 entries by 437 authors provide a thumbnail summary of topical content that “infuses” history, contemporary and multicultural dimensions, theory and research findings, and emerging trends. The contributors reflect their contemporary topic expertise and are generally judicious in projecting developments for the future. The 20th edition expands from nine to thirty-nine the number of overview entries to explain more comprehensive content areas (i.e., “Lifespan” reviews eight stages). Beyond the list of entries noted in Volume 1, an index in Volume 4 provides reference to several hundred more detailed topics. Therefore, while “Compulsive Behaviors” is listed as a main topic area, “schizophrenia” is presented as embedded content in four citations.

In addition to topical content, a large portion of Volume 4 includes four indices, two of

Figure 2



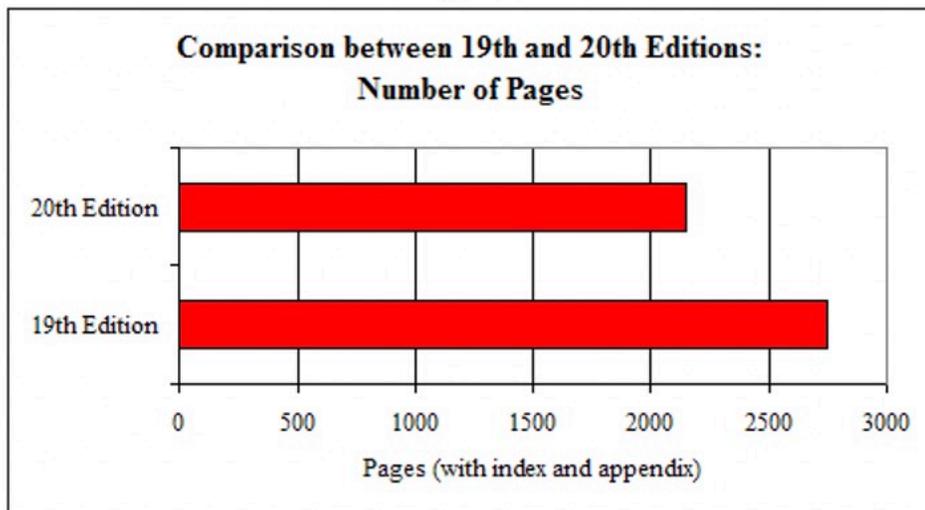
substantial length. The first presents a biographical sketch of nearly 200 persons who have contributed significantly to the profession. The third describes “*Distinctive Dates in Social Welfare History.*” These two indices provide an excellent context to guide the study of history in the profession. Two other issues of comparing the 19th

and 20th editions are relevant. First, the 20th edition includes significantly more topics (see Figure

2). pproximately 50 topics have been deleted. Many of these topics had to be deleted. For example, there is no need for the 20th edition to include a chapter on Aid to Families with Dependent Children (AFDC). Other deleted chapters were absorbed into broader topics. For example, “Brief Task-Centered Practice” from the 19th edition is included in “Brief Therapies” in the 20th edition. Although I have a personal attachment to Task Centered Casework, from an editorial perspective, it seems best to make this change in the 20th edition.

Second, the outward appearance of the *Encyclopedia* has changed. The 19th edition was three volumes, while the 20th edition is four. Initially I thought that the increase of 72 topics was the cause of the additional volume. However, the 20th edition actually has fewer pages than the 19th edition (see Figure 3).

Figure 3



The explanation for fewer pages with a greater number of chapters is explained by the change in the font size. In the 19th edition, the font is 10 pt condensed .3. The 20th edition is 8.5 pt condensed by .5. The significant reduction in the font size enabled the authors and editors to pack more information into each page. However, with fewer pages in the 20th edition, one might expect it possible to pack the *Encyclopedia* into three volumes rather than four. Having four volumes rather than three might have an impact on the cost.

One minor substantive change is the movement from the use of the term Hispanic (19th edition) to Latino (20th edition). Although Latino is very close in meaning to Hispanic, Latino is more of a generic term. For example, *Latino* would include persons from Brazil, whereas the term *Hispanic* would not. Thus, Latino includes peoples whose countries are predominated by the Romance languages. From an editor’s perspective, it would be best to employ the most generic term.

Rather than being a primary source, the purpose of the Encyclopedia is to offer direction for research. As a complement to extensive electronic and Web-based search activities, the 20th edition is a good starting platform. For the student of social work, it represents an excellent bridge for blending history and progress in the field.

Pack-Brown, S. P. & Williams, C. B. (2003). *Ethics in a multicultural context*. Thousand Oaks: Sage Publications. Reviewed by Wayne C. Evens, Ph.D.

Sherlon P. Pack-Brown, Ph.D., (L)PCC, is an associate professor of counselor education at Bowling Green State University. She has practiced in private practice and in a university setting. Most of her work has focused on diversity competent counseling, with a focus on African American females. She has been active in the American Counseling Association. She has 14 publications.

Carmen Braun Williams, Ph.D., is an associate professor in counseling psychology and counselor education at the University of Colorado in Denver. Her focus has been on multicultural therapy with a focus on women's issues and racial/cultural issues with adolescents and adults. She has published more than 20 articles.

In the Preface, the authors state three goals for the book: to point out culturally troublesome issues and aspects of current ethical codes for the American Counseling Association (ACA), the American Psychological Association (APA), and the National Association of Social Workers (NASW); to promote culturally appropriate interpretations of existing ethical codes for mental health professionals; and to promote ethical behavior, within a multicultural context, among professionals and within the profession (p. xiii).

Certainly, it is important to examine the role of professional ethics and how they should be understood in a multicultural context. In an era of globalization, we are all having to deal with the issues of diversity and multiculturalism in teaching, practice and in wider spheres. This book makes an attempt to address these issues in mental health practice. The authors raise some basic issues in this area. Many of the exercises provided could be useful to both students and practitioners in developing understanding of ethics in a multicultural context. The thrust of the exercises and the book is that practitioners are embedded in cultural contexts that may have negative effects on their work with clients from other cultural backgrounds. The exercises are designed to help the practitioner explore these issues. The book further asserts that codes of ethics reflect primarily a euro-centric world view. Some of the exercises encourage exploring the biases in the codes.

The thrust of the book, as summarized on the last page, is to encourage practitioners to address: 1) their commitment to increasing their professional competence with a range of culturally different clients; 2) strategies for furthering their cultural competence; 3) whether their education

and training provide sufficient foundation for ethical multicultural practice; 4) being thoughtful about how they will know whether their education, training, and worldviews about cultural differences provide them with the competence to treat a client from a dissimilar culture or whether their ethical obligation is to refer (p. 221).

The book assumes the reader has a very low level of knowledge and awareness of multicultural issues. It walks the reader through a series of thoughts and exercises. It begins by exploring codes of ethics, moves to exploring personal understanding, then to doing ethical thinking in a multicultural context. For a novice (i.e., an entry level BSW student), this could be very helpful.

Overall, I do not find this book useful or very relevant to social work. Professional codes of ethics are instantiated in practice and, at least in social work, they are understood in the context of values prevalent in the field. The authors show no awareness of any of the discussions of diversity in the social work literature. Their citations are primarily from the counseling literature. In fact, they cite no social work literature. As an example, on page 28, after citing the NASW standard relating to client self determination, the authors state, “A core value is individualism as represented in *self-determination*. An assumption is that all clients value self-determination rather than a more collectivist approach to life, such as the self as a member of the group, which may then mean *group determination*” (italics in original). Reamer (1995) in his discussion of the self-determination ethic makes clear that this ethic limits the action of the social worker, not the client. In fact, the interpretation given by these authors would violate this ethic. The ethic would prohibit the social worker from promoting an individualistic approach if the client preferred a group approach.

On page 111, the authors state, “To date, the American Counseling Association (ACA), the American Psychological Association (APA), and the National Association of Social Workers (NASW) have not developed or accepted standards that would define competent ethical and decision making within a multicultural context.” The authors either are unaware that NASW (2001) issued *Standards for Cultural Competence in Social Work Practice* in 2001, or they choose to ignore the statement. This statement clearly provides standards to guide cross-cultural practice and clearly links these to the *Code of Ethics* in a way that guides ethical thinking in the area. I do not argue that social work has resolved all of the issues in multicultural work, nor that individual

social workers would not benefit from thinking more seriously about these issues, but NASW has addressed and continues to address the issues.

In addition to the standards, NASW (2006) addresses “cultural and linguistic competence.” This is a comprehensive statement on competence in the area. Further, CSWE (2004) has required programs to teach diversity and cultural issues for some time. Social workers are prepared by their education to understand the ethics in a multicultural context.

The examples could be expanded. The entire book, to some extent, misreads the NASW *Code of Ethics*. I found the lack of understanding of social work and the context in which social work ethics are understood particularly disturbing in a book that encourages awareness of other cultures and understanding. Social work has, perhaps more than most professions, struggled with these issues and sought to develop competent and ethical cross-cultural practice.

From its inception, social work has sought to address multiculturalism. Mary Richmond (1922) certainly suggested that those doing diagnosis and case work needed to be aware of each person’s context. Jane Addams (1912) showed a deep awareness of cultural issues. Cannon (1928/1939) stated, “Other professions have social concepts and social objectives, but I think only social work never has a purely individual objective” (p. 17). Hamilton (1941) emphasized person in situation, and Perlman (1957) stressed the person in environment. Germain and Gitterman (1980) developed the person in environment as a single unit of analysis. In this context, Solomon (1978) discussed social work in Black communities; Norton (1978) discussed the inclusion of minority content in social work education; and many other social work publications have addressed the issues of multiculturalism. In choosing to ignore this literature and the social work context, the authors produced a book that simply does not fit social work and its approach.

If you are looking for material to help students or to improve your understanding of ethical decision making in a multi cultural context, consider Hogan-Garcia (1999).

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Csikai, E. L., & Chaitin, E. (2006). *Ethics in End-of-Life Decisions in Social Work Practice*. Chicago: Lyceum Books. Reviewed by David S. Dran, Ph.D.

Helping clients and their families with end-of-life decisions is one of the most complex areas of practice for social work. Social workers are called upon to incorporate culture, religion, family and individual histories, and knowledge of ethical principles into an assessment and intervention. To make matters more complicated, this is done in a context of medical technology that is constantly reshaping the moral landscape. Preparing for the end of life is daunting for the variety of factors involved. It is also an area for which social work is ideally suited by virtue of a practice approach that takes into account diverse cultural and social factors.

To their credit, the authors of this work have fashioned a thorough guide to help social workers navigate the complexity of end-of-life decisions. This book should be a valuable resource for social workers in hospitals, hospice, home health, nursing homes or any setting in which clients and their families deal with preparations for the end of life. This guide is especially welcome at this point in time, given the aging of Baby Boomers who will soon swell the ranks of retirees. As more Boomers face health issues in their maturity, the pressure for attention to and redefinition of end-of-life issues will likely increase.

The authors are eminently qualified to provide a lucid guide through end-of-life issues. Ellen Csikai is associate professor in the School of Social Work at the University of Alabama. Elizabeth Chaitin is the director of Medical Ethics and Palliative Care Services Department of University of Pittsburgh Medical Center--Shadyside Hospital. Both have extensive experience in the area of bioethics and have provided significant contributions to social work practice in this area.

The authors begin by offering a clear exposition of ethical reasoning, including ethical principles and approaches that support them. The principles discussed in the first chapter are referred to often in the remainder of the work as specific end-of-life issues are discussed. The authors do well to point out the similarity that exists between these ethical principles and the core values of the social work profession. This is especially true for the values of client autonomy and dignity.

Two strengths of the book are immediately apparent. The authors provide a description of cases that have established legal precedent, such as those regarding Karen Ann Quinlan and

Elizabeth Bouvia. These and other cases of legal precedent will be referred to often in the examination of end-of-life issues throughout the work. The authors also provide practice examples that demonstrate how complex issues can unfold in a particular case. Both legal precedents and practice examples help immeasurably to illuminate the process of helping clients and families prepare for the often-difficult decisions faced at the end of life.

The second chapter is one of the most interesting and provocative in the book. Here the authors tour the breadth of issues that provide the end of life with its complexity. Many of the issues could easily fill chapters, if not books, in themselves. The discussion of religious and cultural views is especially effective at demonstrating the diversity encountered in end-of-life issues. The topics of withholding or withdrawing intervention, euthanasia, and physician-assisted suicide prepare for the issues that unfold in subsequent chapters.

The authors provide a primer in advance directives in chapter three. Again, the authors bring to life the place of advance directives by practical case examples. The authors make clear that there is no substitute for dialogue among all parties involved for successful advance care planning. To participate in this dialogue, social workers should be prepared to exercise considerable communication and advocacy skills, as well as know the many options available in planning advance directives.

The life-values history offered by the authors is an interesting method of uncovering what the client's preferences for end-of-life care may be. The social worker's role in this process includes appreciating the social and cultural context surrounding the client and family. Here the authors outline the variety of issues that may be uncovered in such an investigation.

Noteworthy is the authors' suggestion that social workers should become involved in proactive community education for advance care planning. Hopefully, such an effort would result in earlier preparation for deciding upon options in the later stages of care.

In the fourth chapter, the authors outline the history and importance of hospice and palliative care. The authors describe the values at the core of hospice as embracing a holistic view of care compatible with the approach in social work practice. The issues that arise for both families and social workers are well described. One of the issues is that of pain management, which remains a serious concern of care at the end of life.

The fifth chapter of this work is one of the most important. The chapter first presents the types of consent and the necessary conditions for consent to be voluntary. Decisions in end-of-life care are immeasurably complicated when the client is unable to express his or her preferences. At such a time, who will assume the role of a surrogate and how that person will make decisions on the client's behalf becomes a paramount concern. Surrogate decision making is one of the most difficult issues that a social worker will face in helping clients and families with the end of life. The authors make good use of cases establishing legal precedent and provide an excellent discussion of the different standards that can be used for surrogate decision making. Sound ethical reasoning and assessment are required. While there is no easy method of determining competency of the client, the authors identify the factors that must be considered so that the client's autonomy and dignity have the best chance of preservation.

The authors point out that to date there is no universal standard of client competency. In the appendix, the authors offer the Chaitin Informed Consent Capacity Tool. Although at the time of printing, the reliability of this instrument had not been established, it should be very useful as a guide to judge the ability of clients to make informed decisions.

In the sixth chapter, the authors present issues related to organ donation and the determination of death. This topic clearly demonstrates how advances in technology force the consideration of issues that were unthought-of in the recent past. The pressure to revisit topics in this area is likely to increase as the vast numbers of the Boomer generation mature.

The seventh chapter describes two important resources in ethical decision making--ethics committees and ethics consultants. The authors provide a history of ethics committees and a description of what they can do in resolving ethical issues. Not all settings will have access to ethics committees or to the ethics consultants described here. However, the authors provide the social worker with several models of ethical decision making. Each model has merit. All models share similarities. It will be up to the social worker to inspect the models and come away with a guide to the process of analyzing and resolving ethical issues that may arise for a particular case. The authors demonstrate that finding a way through such issues is a complicated affair requiring far more than formulaic application of ethical principles. Thorough assessment and considerable judgment are required.

The book ends with a chapter about confidentiality and disclosing the truth framed in terms of honesty between client and social worker. The authors do well to stress that these considerations are necessary ingredients for helping clients to navigate choices at the end of life.

Altogether, the authors have successfully crafted an essential collection of principles, examples, and precedents required to deal with the complex issues of end-of-life decision making. More important, they have provided a guide to the process of ethical reasoning in planning for the difficult issues that can arise. No guide can keep abreast of changes in interpretation of law or the latest possibilities opened by technological advances. However, with this guide the social worker will be well positioned to meet the changes that will come.

Strom-Gottfried, K. (2008). *The ethics of practice with minors: High stakes, hard choices*. Chicago, IL: Lyceum Books. Reviewed by Suzanne Y. Bushfield, Ph.D., MSW, LCSW

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This new text is intended to “make ethics accessible to students and experienced practitioners by providing an easy-to-use framework to resolve complex ethical dilemmas with children and adolescents” (p. xi). Dr. Strom-Gottfried’s approach to ethical decision making recognizes the often confusing and conflicting imperatives from legal, ethical, clinical, organizational, and developmental perspectives, and offers a straightforward decision-making model designed to encourage critical thinking about ethical dilemmas. Dr. Strom-Gottfried has not only synthesized a variety of decision-making frameworks into a memorable process, but she has also led the reader through the decision-making when applied to perplexing dilemmas with children and adolescents. The numerous common examples of dilemmas that occur in practice with children and adolescents that are included are a welcome addition to the literature, since the rights and choices of children are often constrained by their age, maturity, and parental prerogatives. Most ethical texts stress the principles of autonomy, beneficence, nonmaleficence, justice, and the *NASW Code of Ethics* (1999). As the author points out, “Codes are not typically written with minor clients in mind” (p. 14). This text attempts to provide some clarity when translating values and principles into action with respect to children and adolescents.

Dr. Strom-Gottfried has provided a careful and balanced discussion of some of the more difficult dilemmas that arise when working with minor clients. Her decision-making process is deceptively simple: “A-Assess options; B-Be mindful of process; C-Consult; D-Document; and E-Evaluate” (p. 17). However, this five-part “ABC” process, when applied, is by no means simplistic. When all steps are taken, the student or the practitioner gains valuable practice in the high-stakes field of ethical decision-making—an important improvement to the often “reflexive” or “liability-averse” approaches that many reports using.

The author walks us through a variety of types of dilemmas, organized around Kidder’s (1995) polarities: justice versus mercy, short term versus long term, individual versus community, and truth versus loyalty. She offers insight into each step of her process, when applied to realistic dilemmas. The first step, “Assess options,” can be further addressed by using the mnemonic rubric offered by the

author: “ELVIS” (p. 18). Readers will recognize the key elements that influence our options and assist us in thinking critically about the situation. These elements include: “E-Ethical theories and principles, L-Laws and politics, V-Values and ethics, I-Information, and S-Standards” (p. 18). Strom-Gottfried effectively elaborates the key perspectives from each of these elements. Both students and skilled practitioners will appreciate the tensions embedded in Kidder’s polarities, as well as the author’s straightforward and balanced discussion of options. The thorough discussion of alternatives and their implications assists the reader in critical thinking, rather than expecting an instant solution to the dilemma. The author recognizes that some dilemmas require compromise between competing values, principles, and standards, but that ethical dilemmas require choices that are well grounded, even when the solution is not wholly satisfactory. Dr. Strom-Gottfried elaborates on the implications of these choices, encouraging the reader to participate.

A particular contribution of this text is in regard to clarifying developmental issues and their role in the proxy decision making for dependent and vulnerable children. The author states, “In work with minors, a full appreciation of the principle of client autonomy is strongly connected with an accurate understanding of a child’s abilities, particularly the status of his or her evolving capacities” (p. 61). A strong developmental focus may assist social workers in this process.

The author’s conclusions that “solutions are imperfect; systems are imperfect; resources are imperfect; and parents are imperfect” (p. 190-193) may be disquieting. Nevertheless, while recognizing that many things are outside of our control, Dr. Strom-Gottfried provides support for key strategies that may improve our ethical practice. These include self awareness, to counteract our own prejudices that may undermine balanced decision making; forging alliances with trusted colleagues with whom we may consult and collaborate; vigilant attention to opportunities for exercising our skills in practiced ethics; and a willingness to take action (p. 195). The moral courage that is required in pursuit of ethical practice may be bolstered by regularly engaging in the process of ethical decision- making. Dr. Strom-Gottfried’s text is a useful tool in this pursuit.

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Strom-Gottfried, K.J. (2007). *Straight talk about professional ethics*. Chicago, IL: Lyceum Books, Inc. Reviewed by Georgianna Mack, MSW, PLCSW of Social Work, University of North Carolina at Pembroke.

Kimberly Strom-Gottfried, PhD., LISW, is the Smith P. Theimann Jr. Distinguished Professor of Ethics and Professional Practice at the University of North Carolina at Chapel Hill School of Social Work. Professor Strom-Gottfried teaches in the areas of direct practice, communities, and organizations, and human resource management. Her practice experience in the nonprofit and public sectors focuses on suicide prevention, intervention, and bereavement. Her scholarly interests involve ethics, moral courage, and social work education, and she is active in training, consultation, and research on ethics and social work practice. She has written numerous articles, monographs, and chapters on the ethics of practice.

The author's statement "the lack of clear imperatives in professional ethics does not mean that anything goes, that every decision is relative" defines an important issue most of us have when dealing with ethical dilemmas. Her use of an ethical decision-making model is creative and provides a model format that can be used in every instant. The ranking of the questions as who, what, when, where, why, and how, are both familiar and simplistic. Social workers are faced with issues daily, and it requires "critical thinking" to determine the best course of action in a given situation. This book offers a sound perspective to experienced practitioners, as well as students.

I particularly liked Part II of the text, which addressed applying standards for ethical practice (Determination, Informed Consent, Conflicts of Interest, Professional Boundaries, Confidentiality, Competence, Professionalism, and Nondiscrimination and Cultural Competence). Each chapter addresses one of the standards and gives an example of "upholding the standard", and "violating the standard." This is followed by a case scenario of each standard using the decision-making model. The text provides a number of alternatives but allows the reader to use critical thinking to make a best practice decision.

The author completes the text by challenging the reader to sustain ethical habits. She addresses impediments and avenues to ethical habits. She challenges the reader to reassess our individual moral values on a daily basis