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# Editorial: President Donald J. Trump\*

Stephen M. Marson, Ph.D., Editor

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\*I have been petitioned to write a political editorial addressing our current president. In the social work community, some have stated that supporting President Trump is a violation of the NASW Code of Ethics. In response, I completed an editorial of 24 single-spaced pages; after reading it,

I decided that the best and most effective manner to address our president is acknowledging his name. Readers should write their own editorial. As with all editorials, I invite you to respond to my editorial by emailing [smarson@nc.rr.com](mailto:smarson@nc.rr.com). Your comments may be published in our next issue.

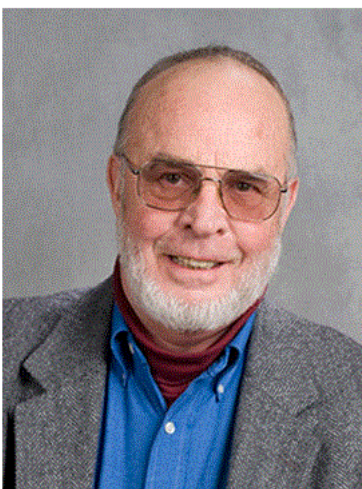
# Editorial: A Dedication to Wayne Evens

Stephen M. Marson, Ph.D., Editor

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I first met Wayne Carl Evens at a BPD conference in 1990. We became immediate friends and working colleagues. Most of our conversations addressed teaching, research methods (particularly autocorrelation for single-system designs) and, of course, social work ethics. Actually, our first conversation involved the ethics of failing to test for autocorrelation in single-system designs. Among academic social workers, it was a hot topic during that timeframe.



In 1982, Bloom and Fischer published a paradigm-shifting book titled *Evaluating practice: Guidelines for the accountable professional*. This book had a profound influence on Wayne Evens and me. The problem Wayne and I discussed was that this landmark book was “one-dimensional.” The book exclusively addressed single-system designs for the evaluation of practice. In 1988, the Council on Social Work Education formalized the concept of the “generalist model” and required this vision to become the centerpiece of BSW education. Wayne and I (and many others) immediately recognized that the one-dimensional nature of single-system designs could be only one small part of the BSW (generalist model) toolbox.

In 1990, Catherine Alter and Wayne authored a book titled *Evaluating your practice: A guide to*

*self-assessment*. “Toolbox” was the key concept behind the book. Alter and Evens linked practice evaluation protocols to practice. They realized that practitioners were frustrated because single-system designs do not fit most forms of social work practice. They introduced six practice evaluation tools. Wayne told me that they envisioned their book as a supplement for social work practice courses and gave me a hardy laugh after he learned that their book was being adopted for research courses. The book was a best seller for Springer Publications. The authors and this publisher did not expect the book to be adopted for research classes.

Wayne was my dear friend and colleague. He was an enthusiastic member of our editorial board. He was diagnosed with stage 4 lung cancer in late fall of 2016 and has been fighting it since then. He passed away peacefully Sunday, April 16, 2017, surrounded by his loving and supportive family.

Wayne asked, before his death, that we all take time to reflect on our relationships with him and remember him at his best. This editorial is my effort to reflect and remember him. He will live on in us all, and we can honor him by choosing kindness over anger, respect over judgment, and love over fear.

His signature footwear was cowboy boots. To bestow honor upon him, the graduating social work majors decided to attend commencement by wearing cowboy boots. They posted a picture to document the event. (*next page*)

I sent out an electronic call and invited subscribers to submit testimonials to honor Dr. Evens. You can find them on the following pages.



---

From: Allison Sherr  
Sent: Wednesday, April 19, 2017 6:08 PM  
To: smarson@nc.rr.com  
Subject: Wayne Even Tribute

To whom this concerns:

I was lucky enough to study with Professor Evens for four years. He was and always will be a social worker to aspire to. I learned how to be compassionate, hardworking and kind from him. You could always count on Wayne to help in any way that he could. Even after graduation, we kept in touch and he continued to teach me how to be a better social worker. I hope to make him proud and become the social worker he knew I could be. I wouldn't have had the courage to apply for and attend graduate school without his help and guidance. Wayne will be sorely missed.

Thank you!  
Allison Sherr  
Bradley University, BS/Social Work, 2014  
Loyola University Chicago, MSW,

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From: Gregory Adler  
Sent: Thursday, April 20, 2017 2:13 PM  
To: smarson@nc.rr.com  
Subject: My tribute to Wayne

At Bradley University Wayne was my professor and academic advisor. During my time at Bradley I had him for multiple social work classes. A large amount of what I know about social work I learned from him. He challenged me to think critically and to think about social work from many different perspectives. He made his classes fun, always made sure that every student got their questions answered, and always made sure that students understood the material. Whenever I needed help with something, Wayne would go the extra mile to help me and do everything he could. When I would register for classes, Wayne made sure I was taking what I needed to and told me what combination of classes would be best to take. Wayne genuinely cared about my success and getting my degree. Wayne was a phenomenal professor and a great man. He was kind, caring, and truly had his students' best interests in mind. Wayne was an inspiration and role model to me. Wayne was one of a kind and he will be deeply missed.

Sincerely,  
Gregory Adler

---

Wayne Evens was first my student at the University of Iowa School of Social Work and, I must say, one of the finest students I ever had the pleasure of working with. He was always way ahead of the class and ahead of me if truth be told. It was the middle 1980s, a time when academicians were pushing practitioners to adopt research-based practices or, if they weren't available, to do research on their own practice. We encountered much push back from the field, and I realized early on there had to be a way to not only make research methods accessible but doable to our hard working colleagues in the field. It was then that Wayne became my colleague. Wayne's thoughts paralleled my own and *Evaluating Your Practice* was born. Wayne's contributions to this book were creative, imaginative and extremely helpful. We enjoyed our work together and stayed in touch for many years. Our profession has lost a good and talented member.

Stephen, thank you so much for doing this.  
Catherine Alter

---

From: Steven Dolins  
Date: Fri, Jul 14, 2017 at 2:22 PM  
Subject: Wayne Evens tribute  
To: Portia Adams <padams@fsmail.bradley.edu>

Wayne was a caring, empathetic colleague. In 2010, Wayne facilitated a retreat for the Department of Computer Science and Information Systems, which I chair, where we developed a strategic plan. Dr. Claire Etaugh, the Dean of the College of Liberal Arts and Sciences at that time, asked him to do this work for service to the university and without compensation. He ably led the process which was challenging and sometimes contentious, and we frequently laughed about the various machinations that took place. The department is still utilizing that same Strategic Plan today. As a small gesture, I gave him a Chicago blues piano compact disc I produced; afterwards, he would always ask about the pianist and "like" my various Facebook posts on music. Wayne was always cheerful and willing to listen. It was a pleasure and comfort to see Wayne in the hallways and outside of Bradley Hall. He is sorely missed by me and many other Bradley University faculty members.

Steven Dolins, Chair and Professor  
Department of Computer Science and Information  
Systems  
Bradley University

# A Relational Approach to Practice: An Ethical Alternative to Working With Parents in Out-of-Home Care Processes

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## Abstract

This qualitative study explored a relational practice approach with parents whose children have been removed into out-of-home care. Where these parents commonly experience practitioners as intimidating and unsupportive, the case studies of two families provides an alternative, arguably more care-centred, approach to working with parents. The paper discusses this alternative in light of ethical social work concepts. Findings suggest positive outcomes for parents and children alike when parents and workers engage using a relational approach where care is the central feature.

*Keywords:* out-of-home care, working relationship, ethical practice, child neglect, relational practice

## Introduction

Removing children into out-of-home care is long established as a way to respond to children being maltreated within the family. In Australia, it has been common practice since the earliest days of the British colony for collaborations between governments, philanthropic individuals and charitable organizations to develop a variety of ways to house poor and maltreated children outside the family home (Gandevia, 1978; Picton & Boss, 1981). Moreover, it remains a common response today, where current

figures from 2014, put more than 43,000 children living in formalised out-of-home care arrangements throughout Australia (Australian Institute of Health and Welfare [AIHW], 2015). This is not counting informal arrangements of this nature.

A relational approach with clients is of central importance to many fields of practice in the human services, including psychotherapy (Lambert, 1992), social work (Howe, 1998; Ruch, Turney, & Ward, 2010) and child welfare (de Boer & Coady, 2007; Kroll, 2010). However, limited empirical exploration of relational approaches sensitive to the kinds of extenuating conditions that are present in child protection practice has occurred (de Boer & Coady, 2003; Drake, 1994; Ribner & Knei-Paz, 2002). This includes where clients may be attending interventions involuntarily, or where threat of child removal exists. In addition, little is known of the perceptions of clients regarding what is occurring during such an approach (Doel, 2010; Friedlander, Escudero, & Heatherington, 2006). This is particularly the case regarding how parents who have had their children removed from their care and professionals work together, where few published studies exist exploring these parents' experiences of out-of-home care systems (Dumbrill, 2006; Healy, Darlington, & Feeney, 2011; Thorpe & Ramsden, 2014). This is concerning given that parents who

have had their children removed are an important stakeholder group involved in out-of-home care processes. In addition, many social work professionals are employed in out-of-home care work, making this an important area of practice.

This paper argues that a relational approach is a style of working where workers can work ethically to create an environment to meet childrens' safety and wellbeing requirements, while still ensuring parents' need to be treated as human beings are met during out-of-home care processes.

### **Literature Overview**

While research with parents who have had their children removed is limited (Harries, 2008), the available evidence shows that parents experience child protection and out-of-home care process as adversarial, intimidating, impatient, unsupportive and, at worst, even dishonest and deceitful (Dumbrill, 2006, Thomson & Thorpe, 2003; Featherstone & Fraser, 2012; Gallagher, Smith, Wosu, Stewart, Hunter, Cree, & Wilkinson, 2011; Harries, 2008; Healy, et al., 2011, Thorpe, 2008). Moreover, there is growing evidence that many workers have little understanding of parents' experience, needs or perspectives, and even that they do not seem to care (Harries, 2008; McArthur, Braithwaite, Winkworth, Wilson, Conroy, Thomson, Reinhart, 2011; Thorpe, 2008; Thorpe & Ramsden, 2014).

Parents whose children have been removed experience a profound sense of loss, grief, powerlessness, helplessness, anger, guilt, depression, stigma, voicelessness, being judged and not being treated with respect and trust (Harries, 2008; Healy et al., 2011; Thomson & Thorpe, 2003). In addition, it is well reported that a power imbalance operates between parents and workers, especially workers with statutory powers (Dumbrill, 2006; Harries, Lonne, & Thomson, 2007; Healy, 1998; Healy et al., 2011). However, workers seem to have limited appreciation of parents' life experiences of deprivation and abuse, limitations to rights, and powerlessness (Healy, 1998; Healy et al., 2011). Furthermore, some research has found that professionals seem reluctant to genuinely engage, and build trusting and

respectful working relationships, with parents once children have been removed (Healy et al., 2011; Thomson & Thorpe, 2004; Thorpe, 2008). This is despite research on parent participation in child protection processes which has found that providing support for parents improves their confidence and sense of power, participation and satisfaction (Darlington et al., 2010; Featherstone & Fraser, 2012; Thorpe & Ramsden, 2014). It has also been found that parents' participation improves outcomes for many children in out-of-home care (Darlington et al., 2010; Thomson & Thorpe, 2003; Thorpe, 2008). Clearly this way of treating parents is problematic, especially given it is contrary to conceptualisation of social work as underpinned by an ethic of care (Gray & Webb, 2008; Harries et al., 2007).

Fortunately some research with parents who have had their children removed has found that practice exists that supports parents to bring about the change required to work towards family reunification (Dumbrill, 2006; Featherstone & Fraser, 2012; Gerring, Kemp, & Marcenko, 2008; Thorpe & Ramsden, 2014). This approach to parents involves workers being respectful, non-judgmental, honest, hopeful, and engaging in active communication, including sharing information of the process (Gerring et al., 2008; Harries, 2008; Thorpe & Ramsden, 2014). There are also elements of practice which include providing support and assistance, as well as flexibility and patience on the workers' behalf (Dumbrill, 2006; Gerring et al., 2008; Thorpe & Ramsden, 2014). Such practice has been found to involve developing collaborative and friend-like relationships with parents (Dumbrill, 2006; Thorpe & Ramsden, 2014), where workers provide a confidant type of relationship, power is acknowledged and shared, knowledge is shared, advocacy provided and decisions are made together (Dumbrill, 2006; Gerring et al., 2008 Thorpe & Ramsden, 2014; Harries, 2008). Furthermore, it is important that workers have some genuine care and empathy for parents, including that they acknowledge and validate what may have led parents to be in this situation, along with the deep negative emotions parents may be feeling about losing their

children, and that they treat parents as human beings (Dumbrill, 2006; Gerring et al., 2008; Thorpe & Ramsden, 2014; Harries, 2008). This is to take place under circumstances that acknowledges the child protection issues involved, and where parents are challenged to learn and practice behaviour that supports children's wellbeing (Gerring et al., 2008; Thorpe & Ramsden, 2014).

These are characteristics consistent with a relational approach to working in social work. A relational approach to practice involves social workers adopting a trusting, empathic, respectful, non-judgmental, hopeful, positive and open approach when working with clients (Altman, 2008; de Boer & Coady, 2003; Drake, 1994; Reimer, 2013; Ribner & Knei-Paz, 2002; Trotter, 2006; Turney, 2012; Zeira, 2007). Moreover, in a relational approach, participants develop willingness, patience, flexibility and a broad focus to work in genuine partnership to meet clients' needs (de Boer & Coady, 2003; Reimer, 2013). Workers engage active listening and open communication techniques to act as a confidant and advocate for clients (de Boer & Coady, 2003; Doel, 2010; Reimer, 2014b).

A relational approach is characterized by an emotionally close and informal style of professional relationship, compared to an emotionally distant one (de Boer & Coady, 2003; Doel, 2010; Reimer, 2014b; Turney, 2012). It has been considered as having friendship-like qualities, such as, recognising a shared humanity that exists between the worker and clients, and egalitarian qualities, including shared power and mutuality (de Boer & Coady, 2003; Doel, 2010; Drake, 1994; Reimer, 2014b; Ribner & Knei-Paz, 2002; Turney, 2012). Such working relationships are similar to friendships in the sense that they involve participants relating in a highly personal manner, even developing affection for each other, yet they are different in the sense that they are bounded and supported by a professional context (Reimer, 2014b).

While professional purpose remains crucial (de Boer & Coady, 2003; Reimer, 2013; Zeira, 2007), a relational approach is centred around professionals demonstrating a genuine sense of care

and authenticity in dealings with clients (de Boer & Coady, 2003; Doel, 2010; Drake, 1994; Maluccio, 1979; Reimer, 2014b; Ribner & Knei-Paz, 2002). In this way, a relational approach to practice is central to ethical social work practice, as noted by Turney (2012) it "essentially recognizes the moral claim of the service user—whether voluntary or involuntary—to be treated as an individual in his or her own right; to be seen as an 'end in themselves' rather than simply as a means to the end of protecting their children from harm" (p. 150).

While such an approach is possible in statutory and non-statutory child protection contexts (Doel, 2010; Trotter, 2006; Turney, 2012), little guidance is given to workers regarding how to work with families in such a way. This paper aims to further develop understanding of a relational approach to practice in out-of-home care processes, in order to guide practice. It will examine two professional relationships that were established between family workers and parents whose children had been removed into out-of-home care in light of ethical considerations relevant to social work. To do this it utilises data from a qualitative study of parents', workers' and supervisors' perceptions of parent-family worker relationships working in New South Wales (NSW), Australia. Pseudonyms have replaced actual names of study participants and family members, and direct quotes from participants have been de-identified and will be used throughout.

## **Method**

The study explored perspectives of parent-family worker relationships in a sample of regional family support services in New South Wales, Australia. The eight families participating had completed a period of intervention with a family support service after some level of child neglect-related issues had been identified. The study provided multiple perspectives on the eight relationship dyads by including the perceptions of the parent and worker involved in the relationship, as well as each worker's supervisor.

The study made use of qualitative methods to conduct an in-depth holistic analysis of the



dimensions of eight parent-worker relationship dyads (Ruckdeschel, Earnshaw, & Firrek, 1994). This included case study methods (Yin & Campbell, 2003) to organise the data, and thematic analysis (Braun & Clarke, 2006) to rigorously analyse the findings and present them without identifying the participants. Consistent with case study methods (Yin & Campbell, 2003), each working relationship dyad was discussed from the perspective of the parent and family worker directly working together, and worker's supervisor who was supporting the worker throughout the working relationship. The worker's supervisor, who was also the worker's direct line manager in all cases, was included because of their influence on worker practice. Supervisors have been found to influence practice via their expectations and actions to provide a buffer from outside pressures, for example, related to workload and output expectations of funding agencies, and ethical practice as articulated by the social work profession. Including supervisors' perspective enhanced the richness of the information attained about the parent/worker relationship dyad (Stark & Torrance, 2004).

The study was conducted towards completion of a PhD, where the author conducted all interviews, and data transcription and analysis. Participant recruitment and data collection interviews took place between April 2007 and 2008, after ethics approval was secured from the University of South Australia Human Research Ethics Committee. This process took longer than anticipated because none of the workers who subscribed to the study were close to completing eligible working relationships at the time they subscribed. Using in depth interviews (Minichiello, Aroni, Timewell, & Alexander, 1995), and drawing on literature about the notion of phases in relationships, participants were asked to provide a chronological account of the relationship. With the exception of three of the supervisors, each participant was interviewed once only. The duration of interviews was between 45 and 90 minutes, and all participants gave consent to record them. Analysis involved using analytic induction techniques (Denzin, 1978), to examine over 400 pages of de-identified transcribed data

for key words that described parent, worker, and supervisor "actions" and "attributes". These key words described the experiences of the participants, which is what the research questions related to, and became subthemes. A list of other key words was also developed, which recorded who was speaking, who was being spoken about, the phase of relationship, where the relationship took place, other contextual issues, and the purpose, value, and meaning of the working relationship. A senior researcher independently conducted a similar analysis on the same transcripts. This trustworthiness check helped avoid possible "cherry-picking" of concepts similar to the author's preconceptions (Scott, 2002, p. 92). These methods, which have been described in depth elsewhere (Reimer, 2010), facilitated the author to analyse and describe patterns between participants' lived experiences both of mutually experienced working relationships, but also the perspective of a relative outsider to the relationship.

The study participants were part of the tradition of family work in Australia dating back to the late 1970s (Wolcott, 1989). The services provide multiple programs such as home visiting, information and referral, playgroups, parenting groups, centre based support, and counselling services (NSW Family Services Inc., 2009). Family work practice in these services continues to be underpinned by long held principles, such as voluntarism, a strengths-based approach, community embeddedness, and empowerment practice that includes building connections to the broader community through universal support mechanisms such as playgroups (NSW Family Services Inc., 2009). However, while operating as voluntary services, they still operate within a statutory child protection context; where many parents have been referred due to their involvement with the statutory child protection system. Although not statutory agencies, parents often perceive, at least initially, that involvement with the service has an implied risk of child removal.

Eligibility to participate depended on the parent having been referred to the service for child neglect-related concerns, and the working relationship having ceased within the last three months. At

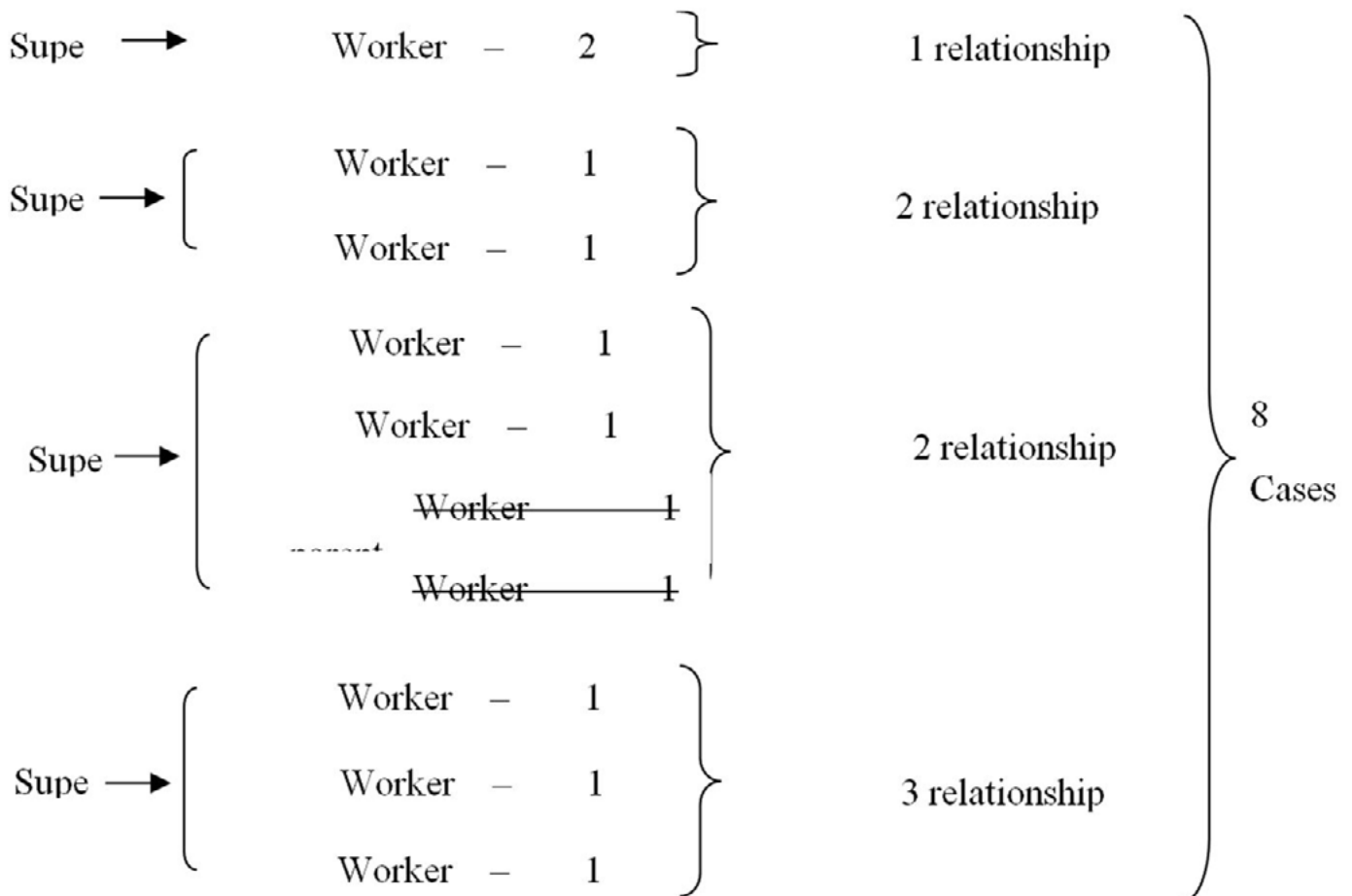
the time of the study, neglect was defined in NSW legislation as “the continued failure by a parent or caregiver to provide a child with the basic things needed for his or her proper growth and development, such as food, clothing, shelter, medical and dental care, and adequate supervision” (NSW Department of Community Services, 2006 , p. 6).

As Figure 1 notes, 25 people were initially recruited to the study; that is, 10 parent/worker relationship cases. Two cases were excluded after it became apparent that either child neglect was not a concern, or the worker resigned prior to the study interviews being conducted. The eight remaining cases involved eight family workers, nine former clients (parents) of the family workers involved in the study, and four supervisors of the workers. One case involved two parents wishing to be interviewed together. One

supervisor managed three worker participants, two managed two each, and one supervisor managed one worker participant.

The working relationships had varied in duration, from over 1 year in all cases, to over 5 years in two cases. All but one parent and two workers involved in the study were female. Two fathers were involved in the family work, but only one of these men was available to be interviewed at the time of the study. Six of the parents, all of the workers, and three supervisors identified as being from Anglo Celtic background. One parent had emigrated from Ireland within the past 10 years, while one parent and one supervisor identified as being from a New Zealand Maori background. One parent identified as being from an Aboriginal background. The ninth parent did not specify her cultural background.

**Figure 1**  
Configuration of the relationship dyads/cases, including exclusion of two



Consequently, there may be cultural and gender limitations, where most participants were female, and of Anglo Celtic origin.

The eight workers had from 2 to over 30 years family work experience and all were tertiary educated. Five held bachelor degrees in areas such as social science, social work, and community work. The other three held vocational diplomas in community welfare. The supervisors were all tertiary trained. One had completed a Master's degree, two others held Bachelor degrees, and one had received vocational education in community work. They had from 3 to 12 years family work experience.

### **Findings**

This paper will present the findings pertaining to important aspects of a relational approach described by the participants of two of the eight working relationship cases, involving two parents, two workers and two supervisors. This is because, while all the cases demonstrated the same relational approach, only two involved removal of children into out-of-home care during the time of the working relationship under discussion. In both instances the children were removed prior to the development of the working relationship, while in the case of Georgina only, the children were returned to her care while the working relationship was underway. In the case of Mary and Peter, only Mary's perspective on the working relationship was attained as Peter was unavailable for interview at the time of the study.

#### **Mary and Peter**

'Mary' and 'Peter' were parents to three children; 'Debra', aged 6 months, 'Caroline', aged 5 years and 'Brett', aged 8 years. Mary also had an 18 year old daughter named 'Alison' from a previous relationship. Mary had a diagnosed intellectual disability and Peter was a trained motor mechanic who struggled to find employment. Their family worker is known as 'Fiona, and Fiona's supervisor is named 'Vera'. 'Faith' is the name given to a disability support worker who was employed at a government disability support service (called 'DADHC').

The statutory child protection agency (called 'DoCS') referred Mary and Peter to the

family service. The referral was initially vaguely defined, but essentially related to supporting the family to resolve child safety and risk concerns regarding ensuring and maintaining the safety, cleanliness and tidiness of the home and surrounding yard. According to Vera, the statutory child protection agency had equated poor housing and habitability with child neglect. Once involved with the family, Fiona identified other concerns related to Mary and Peter's skills when it came to providing a nutritionally sound diet, positive and child-focused parenting, and literacy and numeracy, and began working with the family to resolve these. Another social work service involved with the family at this time was the government disability support agency (DADHC). This worker was to be supportive, although it transpired that she adopted more a statutory child protection role regarding the family. This compounded the injustice as it left the family supported by the family service alone when it came to helping the family meet the statutory requirements that were required for them to prevent child removal, as explained by Vera,

When we got the referral, we said, well, what do you want us to do? It was really vague. No one really knew. And then, it sort of spiralled out of control at the end by DADHC and DoCS. And suddenly they were coming in heavy on this family, and they were saying, you have to do this, this and this. With still no case plan about, "and here are your supports in terms of where you going to get these support services from"...and the DADHC disability worker...who really was being a DoCS worker...knowing that these kids were going to be removed from this family. Which isn't the role of that worker...[She should have been doing] a whole lot of stuff around the speech stuff. And supporting, and setting up appointments with speech therapists and demonstrating and supporting around this.

Debra became subject to Care and Protection proceedings very soon after the family worker became involved with the family. Caroline and Brett were also taken into out-of-home care within 18 months of Debra being removed. According to Fiona and Vera, removal was progressed by deception and despite Mary and Peter completing all of the care and protection requirements stipulated by DoCS workers, as noted by Vera,

The kids were removed... well the baby was removed first and that was just by absolute trickery. Yeah, the baby was removed when they were, when DADHC and DoCS were involved and they did a whole lot of things, a lot of pressure on the family to get the yard cleaned up and to get the house, sort of, you know, that sort of shit. So, the baby went into respite for the weekend and never came back.

According to Mary, key factors influencing her decision to build a working relationship included the way in which Fiona asked about, listened to, and advocated for her with respect to things that were important to Mary, but which Mary could not access herself. Mary also noted that it was important that Fiona explained and informed Mary about the child protection system in a way Mary could understand. Mary appreciated Fiona for being trustworthy, helpful, "not bossy", actively supportive, using humour, and for teaching Mary things that helped meet Mary's needs.

Mary: Well, we did have another lady come round, Faith. I didn't like her. Coz she was bossy. Which Fiona's not...because Faith kept at us to do things which Fiona didn't. She just asked us what we wanted to do...But this Faith. She just kept at ya. [Fiona] was the opposite...Fiona's more funnier and talks about different things... You could talk to Fiona. You can't talk to Faith. She don't listen...You can trust [Fiona and Vera]...because

they helped me through with the kids and our problems...DoCS work different...just the way they speak and everything...cos they're more, they don't seem like they're happy...yes, they look like they're grumpy all the time...[Because Fiona's] funny, and she is a lot happier and she's actually a lot better...just the look on her face...but DoCS just seem like they're serious...DoCS wouldn't tell us half of the story...They thought that we know what was going to happen with the kids.

Mary reported experiencing this working relationship like a friend-relationship, where she noted she could talk to Fiona in the same way she does with her friend, and Fiona helped and was available in the same way as her friends. However, she understood the purpose of working relationship was for her to receive support to have her needs met and change. Part of the friend-like nature of the working relationship included Mary experiencing Fiona as like her in some way. From Mary's perspective, Fiona was someone who cared about her and talked with her across a broad range of issues (not only about parenting/child protection issues). According to Mary, Fiona also motivated Mary to make the difficult changes required, and challenged her to do so. These characteristics and actions were particularly important for being able to engage in the child removal process.

Turning now to the worker, Fiona reported an initial anxiety about working with the family. These were centred on certain assumptions she had developed that manifested as concern the parents might not be compliant or capable of working towards change.

Fiona: Mary was well known around town. You'd see her wandering around. Never wore shoes anywhere. So you build up a stereotype picture of... She's not going to be compliant. She is going to be really hard. I just had that stereotype kind of image of a pretty

tough person who, who wouldn't want to have a lot to do with me.

However, Fiona's views considerably changed after trust was established. Once established, she perceived the parents as compliant ("they did everything expected of them"), naïve, open, genuine/real, trying to learn and change, and treating her as they treat their friends. Actually, Fiona considered trust central to the success of her working relationship.

Fiona: I used to do things. And the other one that was supposed to be their [disability support] worker, and supposed to be, they felt very very, what's the word, cheated, manipulated. They didn't trust her at all, and they still don't to this day. They saw her, they don't trust her. Um, so that was just the difference between [us], they didn't trust her.

In addition, Fiona reported being present with Mary and Peter, focused on them and their needs, listening intently and providing resources and solutions as required. She explained to the parents what was happening regarding all aspects of the casework, and was a collaborator with the family in the sense of involving them in activities. She also informed them when she was on her way to visit prior to arriving, which Mary reported as respectful. She also reported that it is important to be humorous, positive, happy and hopeful, and to approach the parents as similar to herself in some way, as noted,

Fiona: You had to go in there and you had to be at their level. And you had to sit in amongst, on the old car seats, you know, and they'd be smoking and puffing away. So you'd have a cigarette with them. So that you were one of them. So that you didn't sit there like, go in there in your nice, kind of dressed up, better than you kind of attitude. You had to go in there, and you had to talk their

language. You had to be them to, to be comfortable.

Fiona came to care deeply for the family. However, while torn at times about relational boundary matters, because of the genuine empathy and response at a human level that developed as a result of the working relationship, Fiona was clear that the working relationship was a professional relationship with goals to facilitate parent change.

Finally, Fiona experienced the working relationship as a very active champion for the family against what she perceived to be an unjust child protection system wielding its power against the family. An example of this emerged as she discussed the day the children were removed from Mary and Peter's care, as follows,

Fiona: We came out of court, quarter past three. [The DoCS worker] said, "We'll be round to get the kids at 4". And Peter said, "They don't get home from school till a quarter to four. Can we have a little time to say good-bye?" So they gave them until 430. And that's, yeah, you can still hear the frustration there, the anger with it.

### **Georgina**

Georgina was a single mother in her late 20s with four children, aged 1 year to 11 years of age. The three oldest children had been removed from Georgina's care. The children were not named throughout the interviews. Georgina's family worker is known as 'Vince, and his supervisor is named 'Rachel'.

Georgina identified as an Aboriginal woman with a long history in the region, and extensive family connections living nearby. However, apart from her father and one aunt, Georgina found few of these relationships trustworthy and supportive. Georgina's motivation to building a working relationship with Vince was brought about by years of being separated from all but her youngest child. Georgina referred herself to the service because of her primary motivation to be a mother for her children via family reunification.

Both Georgina and the worker reported her sense of anger, desperation and being forced into this position by the way she had been treated by statutory agency workers. They both noted that Georgina's profound level of anger hindered the developing working relationship. Georgina noted, it was important for her to have,

...just somebody who I could confide in and I know it wouldn't get repeated anywhere else. Um, because I was, sort of wary, because, sort of, with the Department of Community Services and, just how much anger I had inside with the Department and how things were then. Where with Vince, I could just sit down and talk and I'd just come in and I just cried because it was just so hard because not having contact with the kids at all.

Georgina said that she found it hard to trust Vince initially. However she reported responding to Vince's friendly, happy and relaxed approach to her. She also reported that when she did trust and feel some sense of familiarity and comfort with Vince, she opened up about personal issues at the heart of her parenting difficulties; where previously she had kept the conversation to the issues related to what she had to do to have her children returned to her care. According to Georgina, it also helped that Vince was attentive and responsive to her needs, and showed that he genuinely cared about her, and her situation. Georgina noted that Vince did this by highlighting his social justice concerns regarding breaches of legislation by statutory agency workers, and his genuine willingness to collaborate with Georgina to help her achieve her outcomes.

Georgina reported that she relied on Vince as a confidant, "mate", "good friend" and someone she could trust. She recognised that she could not trust many other people, including her family, and appreciated his personal, friendly, respectful, non-judgmental, relaxed and humorous approach, and how supportive, collaborative, informative and empowering he was.

Georgina: Every time I'd come here I'd ring and he was always, sort of, it was just that happy tone on the phone...And then we would just sit down and talk about things and um, he wasn't a person who, who would judge you...I guess it was just his personality, yeah...um, well he'd just, he'd let me sit there and talk about my issues and um, he wouldn't get angry.

While Georgina perceived the working relationship with Vince like a friendship, she understood that it was a "client and counsellor" relationship. As Georgina grew in confidence she learned to deal with some of her issues differently. Vince reported seeing Georgina become more positive, confident and proud in herself and her issues as she was "getting headway" and "having little degrees of success" with respect to her agenda. This included challenging, persevering and becoming more assertive with respect to child welfare sector decisions, and acknowledging positive growth and achievements. The key value of the working relationship was that through working with Vince, Georgina was able to learn how to navigate the child welfare systems that had kept her children separated from her for so long.

Turning now to the worker, Vince reported a perception that Georgina had some preliminary trust regarding him, due to having known someone who had previously worked with him, but that she profoundly distrusted statutory workers involved in the child welfare system. He also reported that although Georgina willingly participated in building the working relationship, she was apprehensive, untrusting and under some pressure to engage with him. According to Vince, Georgina had come to a point of desperation and distrust, having been worn down by having to engage alone with uncaring, unethical and unsupportive workers while attempting to have her children returned to her care, as noted,

Vince: Georgina self-referred. And it was in relation to her circumstances of her children being taken off her several years prior and had

no contact... She had all of this stuff that she'd obviously tried to address with, you know, the protocols and systems, bureaucrats and DoCS being (pause)...So it had an element of (pause) deep emotion. Distrust of the system. But also um, to me there was a sense of corrupt, (pause) protocols weren't addressed that were in the Child Protection Act. And so I said you need a lawyer...I also, I just clearly saw that because it was a breach of the Child Protection Act, especially in regards to Aboriginals, not to mention that any parent whose children are taken off them should have some understanding or knowledge of where they are, how they're going. Even if they're not allowed to access them or see them. And she'd been denied that.

Vince approached Georgina with a strong sense of rights and justice with respect to the racist attitudes he believed Georgina was being subjected to, and lack of justice at the hands of those dealing with child welfare matters pertinent to her. An example of this was the empathy Vince displayed for Georgina regarding his awareness of the racist social context she lived in, and complex child welfare context he knew she had been trying to negotiate. Vince began to educate Georgina about her rights with respect to the child welfare system early in the life of the relationship. This included knowing the limits of his expertise and referring Georgina to someone who could meet some of her needs better than he could. Rachel, Vince's supervisor, also linked this with his collaborative approach, which she considered crucial to the working relationship, as noted,

Rachel: I think just the systems that have been in place that they've had to battle through. I think that has probably made their working relationship better in some ways because they've been a bit of a team against the world.

According to Vince, the working relationship was like a "dance" between "mates", where they were aware of, and responded to, each other, and where Vince could be a confidant. Vince approached building a working relationship by accommodating Georgina and being attentive and responsive to what she said her needs were. This included letting Georgina talk a lot, being emotionally available to Georgina, being patient, non-judgmental, respectful, trustworthy, positive and hopeful. It also helped that Vince identified with Georgina in certain areas, and genuinely liked her. The way Vince reported his approach to Georgina demonstrated a realness, that is, that he was natural and genuine in his dealings with, and care for, Georgina. He reported a perception that, while a contentious idea, professional boundaries which restrict being natural and relaxed can be a hindrance to building a working relationship, for example,

Vince: You create this rapport that, see if you don't, I don't know, that's, this is very, this is a secret. (laugh) If you don't feel like you like them, or you don't feel like their narrative is hitting a chord with you, where my values and core beliefs are, it's not healthy.

Interestingly, Vince found that Georgina responded differently to him when she became increasingly comfortable and open with him. This included her challenging him, and teasing him, but also being aware of, and caring about, his discomfort when she asked him to do a home visit when no one else was home.

## **Discussion**

These two case studies provide a small insight into what literature on parents whose children are in out-of-home care have said about their experiences of the child protection system. The reported experiences of these parents and workers supports previous research which has found evidence that parents experience out-of-home care processes as intimidating, adversarial, unsupportive, and that it involves limits to participation, information and rights (Dumbrill, 2006; Featherstone & Fraser,

2012; Gallagher et al., 2011; Harries, 2008; Healy et al., 2011; Thomson & Thorpe, 2003; Thorpe, 2008). The reported experiences of the parents in these cases also supports other research which has identified a perceived lack of care and appreciation by workers in the child protection system for parents' pain and suffering, both prior to parenting, and during the out-of-home care process (Harries, 2008; Healy, 1998; McArthur et al., 2011; Thorpe & Ramsden, 2014).

In addition, the findings have provided insight into how a relational practice approach provides an alternate experience for parents. As seen in the working relationships described, these relationships were characterized by a respectful and non-judgmental attitude, open communication, shared power, participation and collaboration, advocacy and, above all, friendship-like care for the parents by the workers. This was the core meaning all participants derived from these relationships; that is, that it is possible to separate the client and professional from the human beings in the relationship, and to deeply care for each other without crossing professional boundaries (Reimer, 2014b). In particular, these two working relationships have demonstrated the point raised by Turney (2012), about how a relational approach acknowledges underlying ethical considerations that child protection practice is as much about valuing parents as human beings as it is about protecting children.

Building on this, it is useful to turn to ethics to develop deeper understanding of the relational approach described, and what was it about this that may have inspired such a different approach to that described of other workers in the cases. The following discussion will draw on conceptions of ethics as expressed by the philosophers Bauman (2000), Løgstrup (1997), Noddings (1999), and the social worker Gray (1995), to analyse aspects of the relational approach described.

Both Gray and Bauman talk about the ethical implications of social work, whereby building a connection at a human level makes us mindful of the parents' value as a human being. Further to this Løgstrup (1997) discusses trust as being an important factor in

what it means to be human, as follows, "Through the trust which a person either shows or asks of another person he or she surrenders something of his or her life to that person. Therefore, our existence demands of us that we protect the life of the person who has placed his or her trust in us" (p. 17).

Løgstrup (1997) argues that by asking for another person to trust us, and in trusting another, we lay ourselves open to the Other. Thus, we become dependent on each other. Furthermore, as Bauman (2000) notes, the other person's wellbeing depends on what we do or do not do or, as Løgstrup (1997) argues, the other person is in our power, and we are in theirs. Thus, we are being challenged to care for the other. However, Løgstrup (1997), further argues that being moral is not simply about doing what people want in the situation, but involves meeting the challenge to recognise the shared basic humanity and care equally for all those involved (children, parents, other family professionals). This involves responding to peoples' human needs and interests, and to challenge injustice (Bauman, 2000; Gray, 1995; Noddings, 1999). For people like Løgstrup, Bauman, Noddings and Gray this notion of care is at the heart of ethical practice.

If we turn our attention to parents involved in the statutory child protection system, this argument follows that failing to respond to parents this way means that we fail to see these parents like us at a fundamentally human level. In failing to take this approach to parents, we dehumanise them. Thus, they become the Other, and we no longer need to care about them. Also according to Bauman (2000), when we treat them as the Other we relegate them to a position where we no longer need to respect their voice. In doing so, we completely disempower them.

There is much evidence that shows that the child protection system in Australia treats parents as the Other or, as Harries et al. (2007) argue, negated as human beings. This is particularly in the extent to which it discriminates over parents through disallowing them genuine opportunities to engage in child protection processes at multiple points along the care and protection continuum. As noted, these exist through limits to socially funded knowledge,



resources and support for parenting to prevent child maltreatment, and later through processes described by parents as demonstrating a position of “power over” them; that is, through processes that are adversarial, intimidating, dishonest and deceitful (Featherstone & Fraser, 2012; Gallagher et al., 2011; Harries, 2008; Thorpe, 2008). Furthermore, there is much evidence to show that Australian child protection processes treat parents in the most brutal of ways, and that these are actually not in the best interests of the children who have been removed from their families (Bruskas & Tessin, 2013; Jackson, O'Brien, & Pecora, 2011; Swain & Musgrove, 2010; Thorpe, 2008). It seems clear that while traditional approaches to child protection might have the best intentions, they do not always have the best outcomes for the parents and children involved, in what appears to be experienced as dehumanising processes.

This begs questions about possible alternatives, as the current moral undertones of “bad” and “deviant” parents coupled with the explicit power imbalances and limits to care inherent in the system, are clearly unethical. As argued, an alternative response to parents and children alike comes through the development of humane parent-worker relationships which are characterised by genuine care for the parents and children involved. The kind of relational approach described opens up opportunities for workers to genuinely care for the parents, whom researchers have found to be experiencing loss, grief, powerlessness, helplessness and other similarly profound feelings. Through putting genuine care for the human being in front of them at the heart of the working relationship, workers are acknowledging that the parent is not the Other. While this will not necessarily mean doing everything the parents want in relation to removing or not removing their children from their care, it will mean ethically being able to balance the needs and interests of parents, children and workers.

This paper has sought to argue that professionals working in statutory child protection settings have an ethical imperative to care about the rights of the parents subject to risk and harm allegations and substantiations. For workers involved in the

statutory child protection system, this means that where a genuinely caring and humane working relationship exists between parents and workers, and where the work is underpinned by empowerment and social justice principles, the ethical conditions arise for the worker to advocate for parents in matters of child protection. The challenge for workers involved in child protection systems relates to how to enable such relationships in the context of an increasingly dominant neo-liberal ideology that privileges the rights of children over those of their parents, despite evidence that suggests that this is not always in the best interests of children or parents.

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# Stuck in the Middle With You: A Case Study of the Ethical Implications of Conflicting State and Federal Marijuana Laws in Liver Transplant Social Work

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## Abstract

The legalization of marijuana for recreational use in some states leads to conflicting laws and ethical dilemmas for social workers. In this case, a patient in need of a liver transplant may not secure housing due to marijuana use. The case is analyzed utilizing the National Association of Social Workers (NASW) Code of Ethics.

*Keywords:* professional ethics; marijuana laws; liver transplant; social work; NASW Code of Ethics

## Introduction

Public attitudes toward marijuana are changing. In some areas, this has taken the form of local laws that allow for either medical or recreational marijuana use, or both. However, in the United States, the federal government does not share in this state- and local-level acceptance of marijuana use, creating conflicting laws and regulations. Social workers are stuck in the middle of this issue, in the unenviable position of both securing necessary services for clients, and in complying with federal laws that may prohibit clients from accessing services if they use marijuana. As the quasi-legality of recreational marijuana is a new development, there have been no published cases in the social work

literature detailing how this conflict presents itself in social work practice, or analyzing the ethical issues of such a case. Social attitudes regarding marijuana will continue to evolve and the situation of conflicting laws will continue, thus increasing the need for an ethical analysis and approach to the issue from a social work perspective.

This article presents a case where a client's use of marijuana in a locally permissive context conflicts with the rules and regulations of a federal housing program, and in the situation of a life-or-death need for stable housing. The case is presented in some detail; However, to protect the client, the social worker, the medical team, and the medical system, details of the client have been removed, and details of the case have been altered to ensure anonymity. Changes to the case presentation do not compromise core facts or the essential ethical issues that the case illustrates. Ethical conflicts that arise from this case and from the medical setting and interdisciplinary staff are noted, with the presentation of a detailed ethical analysis from a social work perspective utilizing the National Association of Social Workers (NASW) Code of Ethics (NASW, 2008). The terms "client" and "patient" are both used as appropriate to the context of this article.

## **The Current Legal and Social Context of Marijuana Use**

There is little legal and ethical literature about recreational marijuana use, as much of the previous literature concerns the use of medical marijuana (Beerel, 2007; Bulger, 2007; Isaacs & Kilham, 2015; Potthast, 2007; Rubens, 2014). The two situations of marijuana use, medical and recreational, are legally different in minor and often unclear ways. Federal law still classifies marijuana as a controlled substance, making the manufacturing, sale, purchase, possession, and use of marijuana illegal in the United States, regardless of whether for medical or recreational use (Rubens, 2014; Scheuer, 2015; Vitale, 2014). Medical use attempts to treat marijuana as a controlled substance by requiring a physician “recommendation” and is framed under conditions of “compassionate use” for patients with serious illnesses (Rubens, 2014; Vitale, 2014). Recreational use, where allowable under state law, is merely restricted to adults over the age of 21 (Guttmanova, et al., 2016; Mason, Hanson, Fleming, Ringle, & Haggerty, 2015; Ratzan, 2014; Vitale, 2014). The move toward medical marijuana use has been criticized by some as ultimately intending to result in the legalization of recreational use (Rubens, 2014), which appears to be happening. In states such as Colorado, Washington, and Oregon, recreational marijuana use and possession is now permitted, under specific regulatory conditions, legal, or at least not a criminal act under state statute.

The state laws do not necessarily establish legality; it is more so that the state has declared that possession, production, use, and sale is not illegal per se, and/or will not be prosecuted at the state level. What is legal and illegal is not clear to many, even in states where recreational use is permitted (e.g., Mason, et al., 2015). Although a legal grey area, the situation is possible given Constitutional principles that allow overlapping Federal and state regulations on the same issues (see Vitale, 2014). In addition, “prosecutorial discretion” is allowable based on two facts (Vitale, 2014). First, law enforcement agencies must allocate resources and determine enforcement priorities, such as pursuing more

serious and violent crimes. Second, these agencies are under no legal obligation to prosecute all violations of the law. Prosecutorial discretion seems to have been endorsed by the Federal government at this time in relation to state actions on marijuana (Vitale, 2014). However, even in those states where recreational use is permissible, federal law enforcement agencies may still pursue legal actions against citizens and a business operating within the laws of the state, as has already occurred in the medical marijuana industry (Scheuer, 2015; Vitale, 2014).

Regardless of the legalities, in the United States personal and public opinions are shifting on the issue of marijuana use (Millhorn, et al., 2009; Ratzan, 2014; Roffman, 2013; Rubens, 2014; Sarrabia, 2015; Vitale, 2014), as is reflected in the ongoing state-level actions toward the decriminalization of recreational marijuana use. However, not all of the United States, nor even the residents of states where recreational use is permitted, agree on the legal or moral permissibility of either medicinal or recreational marijuana use (Roffman, 2013; Rubens, 2014). The effect of the state legalization laws on social issues such as crime and personal health impacts remain unknown, although research is pending (Guttmanova, et al., 2016; Hawken, Caulkins, Kilmer, & Kleiman, 2013; Roffman, 2013).

Although law enforcement agencies may choose not to pursue criminal or legal actions against individuals who use marijuana, social workers must still comply with both state and Federal eligibility rules for social services and assistance programs (Millhorn, et al., 2009). Many social assistance programs and services are federally funded or administered, and these ties to funding streams determine eligibility rules, up to and including mandatory drug testing. The contradiction between state and federal laws leaves social workers stuck in the middle alongside their clients, and in the untenable position of deciding which rules to break. Social workers need to consider the positive and negative connotations and consequences of client behaviors such as marijuana use (Millhorn, et al., 2009). Social workers also need to consider the implications and consequences of their own course of action or

inaction as informed by the NASW Code of Ethics (NASW, 2008).

To illustrate and carefully examine the ethical issues associated with the conflicting legal situation regarding recreational marijuana use, the following case study is presented for analysis. The case is situated in a permissive context, in a state where by citizen initiative and popular vote recreational marijuana has recently been approved for those ages 21 and over. Even prior to the change of law, the state was known for social and moral attitudes accepting of the use of marijuana. The state is in the top five in the United States in both the rates of adolescent marijuana use, and in low perceptions of harm from smoking marijuana (Hughes, Lipari, & Williams, 2015).

### **The Case**

A social worker in a medical setting is tasked with helping a patient in need of a liver transplant to secure stable housing. Without stable housing, the patient will not be listed for a liver transplant. The patient must secure housing within the next year or will likely die from liver failure. The best and only housing option attainable within that period is a federally funded program that requires three sequential negative drug-screening tests within the twelve months prior to applying for housing. Once housing is secured, no further drug screenings are required. The liver transplant program routinely tests patients for drug and alcohol use, as the use of substances harmful to the liver is not permitted. Patients testing positive for substances harmful to the liver can be excluded from receiving a transplant. In the case of this transplant service, marijuana use is not exclusionary for transplant (although it is not permitted post-transplant due to other medical issues). The patient was aware of the transplant service rules on marijuana and other drugs, but was not aware of the possible effect on housing prior to the identification of the federally funded program as the only viable housing option. The patient had four drug screening tests within the past year. The first two were negative, the third one was positive for marijuana, and the fourth was negative.

The social worker is in the position of choosing to send the referral to the housing program either with or without the positive marijuana drug test. The social worker could have made this decision independently without consulting a supervisor or member of the medical team, or more appropriately, the social worker could seek consultation and supervision. The social worker should be aware of the consequences of omitting the positive test, including damage to relationships with referral agencies and the future possibility of not having referrals accepted. There may be legal consequences for knowingly falsifying a federal housing application, should it be discovered. The consequences for including the positive test are clear: the referral will not be accepted, the patient will be denied housing, and the patient will almost certainly die from liver failure before alternative housing is secured. There is not enough time to schedule and conduct further testing to obtain the three sequential negative tests required, nor is there any guarantee that subsequent tests would be negative.

A detailed patient history is excluded, both to preserve anonymity, and because social worth criteria, such as income, work history, social history, etc., are not included in organ transplant decisions (by policy and as interpreted from federal law; see 42 CFR part 121). The local transplant committee did screen, assess, and determine that this patient was a good candidate for transplant, if stable housing is secured. For analysis and argument, the patient could be given any number of histories ending with homelessness and the need for a liver transplant. For example, perhaps the patient was a university professor who was in a car accident, severely injured and experiencing the death of family members, and liver failure resulted from both injuries sustained in the accident and the use of pain control medications. Perhaps homelessness is the result of the physical and psychological trauma of that experience. Perhaps the patient is in liver failure due to chronic hepatitis acquired via sexual activity decades ago. Perhaps the patient is homeless due to a series of events stemming from the inability to work due to the health issues concomitant with liver failure.

## **Ethical Issues and Disagreements**

In this case, some social workers may want to exclude the positive result, citing the primacy of the patient's interests, the critical need for housing, and the locally permissive context regarding marijuana. Yet others may feel that it is appropriate to include the positive screen from the perspective of maintaining personal and professional honesty and integrity, and out of concern for the consequences to professional reputation for what could be viewed as a misleading or dishonest referral. Others' concerns may arise from circumventing socially sanctioned federal program rules to access and allocate scarce housing resources to one person over another. Some could argue that the patient's choice and engagement in questionable behaviors assumes the consequences of associated harms, including the loss of housing options. Some social workers and medical staff may want to consider the patient's history of why their liver is failing, and how they became homeless as relevant to ethical decision making in this case. Others may want to consider the patient's history and background for experiences of disadvantage or oppression that could enter into consideration and support reparative actions in the present. To help resolve these ethical issues, both the social worker and the medical staff should apply ethical models or principles to facilitate an analysis.

## **Bioethics Models**

The social worker in this case is operating within a medical setting and medical models of ethics dominate. Different medical and social work ethical models can yield conflicting conclusions and courses of action. The dominant bioethics framework in the United States is "principlism" (McCarthy, 2003) as exemplified by Beauchamp and Childress (2009) and the application of the principles of Autonomy, Beneficence, Nonmaleficence, and Justice to ethical issues and dilemmas. Under principlism, each principle is applied to the case, with none taking precedence over the others. Beauchamp and Childress argue that all four principles have *prima facie* standing in that they should not be overridden without serious and compelling

reasons. However, in clinical reality, autonomy always takes a central and overriding role (Callahan, 2003; Walker, 2009).

Under principlism, it is clear that the patient's capacity for action and autonomous choices, free from influence, would support the referral to housing. A denial of housing the patient wants would result in a loss of transplant eligibility and the eventual death of the patient. Although it could be argued that the patient made an autonomous choice to use illegal drugs, and that choice assumes future consequences such as loss of housing eligibility. Beauchamp and Childress (2009) argue that respect for autonomy does not require a provider to lie, rather it requires truth telling to the patient; however, the application of autonomy is to the patient and their free choices, not to the provider's choices to omit or not the positive drug test from the housing referral. Beneficence, a positive duty to do good and prevent harm, would support the housing referral, as it benefits the patient substantially and prevents serious harms. Nonmaleficence, to not harm, also supports aiding the patient in securing housing and avoiding death.

The application of Justice in principlism is a complex undertaking. It requires a look at the fair distribution of goods and resources, according to socially and legally sanctioned determinations of what is morally relevant between individuals and among all members of society (Beauchamp & Childress, 2009). It is the most difficult principle to apply, and the most often subjugated to the other principles, as Beauchamp and Childress note that under conditions of scarcity, principles of justice may be sacrificed (2009). In this case, it appears that it is just to deny the patient housing, as this would be fair and equal treatment in applying the federal housing rules to all citizens of the country. In addition, the locally permissive context may represent an unfair advantage of this patient over other patients in more federally compliant states. Justice may also consider the clear need of the patient and support the housing, but it may also consider merit and social utility, taking into consideration the social history and choices of the patient.

An apparent weakness of principlism is that it does not directly address issues of professional honesty and integrity. The framing in Beauchamp and Childress (2009) is from the perspective of conflicts with the patient, rather than conflicts with external, non-medical systems, such as supported housing programs. Under the principle of beneficence, there is consideration for cost-benefit analyses, which seems to support withholding the positive drug test from the housing referral, but again, focused on patient-level medical benefits. Within beneficence, there is support for honesty by providers. There is a strong caution within beneficence about soft-paternalism and making decisions on behalf of patients, which could apply to the provider choosing to disclose or not disclose the drug testing results without the patient's knowledge or consent.

In the case presented here, the medical staff and social workers are trained in and utilize the Jonsen model (Jonsen, Siegler, & Winslade, 2006) rather than principlism. Jonsen's approach emphasizes an analysis based on the four areas of medical indications, patient preferences, quality of life, and contextual features. These focal areas are meant to be a more practical approach with which to arrive at more direct actions than in principlism, while at the same time, the four areas are representative of the principles of principlism. In this case, the Jonsen model does seem to be more direct and actionable. The success of patient housing is directly related to the medically indicated transplant, and clearly, the patient's preference is to continue living, which would also enhance quality of life.

In contextual features, however, the issues of financial and economic factors do affect the situation (preventing housing and thus transplant), as do concerns about the allocation of scarce resources. On a programmatic level, the transplant service already believes this patient to be a good transplant candidate. Yet, concerns may exist about the use of federal tax dollars to subsidize housing and health care for a patient engaged in federally illegal behavior. Others' concerns may include the ethics of a patient engaging in behavior that although not impermissible in one sense, may still jeopardize

health and housing, and the fact that by their own behavior, the patient is now technically not eligible for the housing program. The patient's history, and how they came to be in a temporary homeless shelter setting and in need of both housing and a liver transplant is not necessarily considered in the deliberations, other than that all transplant program criteria for compliance, caregivers, housing, etc., must be and are met.

Like principlism, the Jonsen approach falls short on issues professional honesty and integrity. Jonsen et al. (2006) do address paternalism within patient preferences, making a case for an informed consent process that supports communication, shared-decision making, and mutual respect and participation. This supports the patient as knowing of the housing referral issues, but does not seem to provide direction on the potential omission of the positive drug test in this case. Under quality of life, Jonsen et al. (2006) discuss "proportionate care (p. 140)" in terms of the omission of medical information, but again, with a focus on patient-level information exchange, rather than with larger systems. They do argue that there is an obligation to preserve life that could be interpreted to support the omission of the positive drug test.

Under the Jonsen model it is clear that there are medical indications for transplant, and the transplant committee evaluation and recommendation seems to integrate the locally permissive context of the case. However, the most interesting applications to this case are found in contextual features. Jonsen et al (2006) note that some interpret a fiduciary duty wherein providers owe, "an undivided loyalty to clients and must work for their benefit (p. 163)." Additionally, Jonsen et al. discuss an "unrestricted advocacy" view that suggests a providers' "only allegiance is to individual patients; societal or institutional costs are not relevant to clinical decisions (p. 178)." However, Jonsen et al. disagree with this position, arguing for a restricted advocacy that allows for consideration of costs and benefits balanced against patient preferences. Like Beauchamp and Childress (2009), the framing and examples cited here speak primarily to patient-level concerns, rather than systemic issues.



## **A Social Work Ethical Analysis**

The medical ethical models utilized by medical staff in discussing a case such as this can be used to interpret the ethical dilemmas, as noted above, but do not necessarily lead to definitive conclusions with which all would agree. In the interdisciplinary team setting, other methods of ethical analysis can enrich the deliberative process. Applying the NASW Code of Ethics (NASW, 2008) may enlighten this discussion further, and if possible, support a course of action. As ethical deliberation is more about a good and thorough process, multiple different courses of action can be ethically supported. In the end, a well-documented and engaging process that considers multiple perspectives and opinions is desired. The objective is to arrive at considered judgments, about which there is a high degree of confidence, and in which there is minimal bias (Beauchamp & Childress, 2009). The focus of this analysis section is on the NASW Code of Ethics and those standards that apply to this case and that will be used in order to reach considered judgements.

The NASW Code of Ethics (the Code) situates social work ethics within the primary obligation of social workers to enhance the wellbeing of both individuals and society, with particular attention to the vulnerable and oppressed (NASW, 2008). Social workers are challenged to promote social justice and social change on behalf of clients. The Code is used as a guide that can help identify and analyze issues. The Code does not specify which values, principles, and standards contained therein are the most important or which might outweigh others. Content of the Code must be balanced against other content, as well as the complexities and context of each situation and the people involved. The Code stresses the professional values of service, social justice, the dignity and worth of all people, and the integrity of the profession. Social workers are expected to help people in need, to strive for equality of opportunity and meaningful participation in life, to advocate for both clients and the broader society, and to behave in an honest and trustworthy manner (NASW, 2008). These values and principles are

operationalized in the ethical responsibilities stated in the Standards of the Code.

The first Standard in the Code, reflecting the value and principle of the Dignity and Worth of the Person, is Standard 1.01, Commitment to Clients. This Standard clearly states that the “social workers' primary responsibility is to promote the well-being of clients” but also notes that there is a responsibility to the larger society, which “may on limited occasions supersede the loyalty owed to clients.” Standard 1.02 on Self Determination furthers the interest of clients by specifying the social workers obligation to “respect and promote the right of clients to self-determination.” In both of these Standards, it seems that the social worker would be ethically supported in omitting the positive drug test. This action will promote the well-being of the client to a great extent (preventing death), and would certainly be the client’s self-determined choice of action. The responsibility to society clause could be interpreted to support the social worker including the positive drug test, given that this is the determined and sanctioned rule of the larger society, although the conflicting state and federal laws on marijuana weaken this argument substantially. This and the term, “limited occasions” suggest that, in this case, the ethical responsibilities to the client are primary, and the positive drug test should be omitted from the housing referral.

Given that the housing referral itself is a disclosure of confidential information protected by both professional ethics and the law, Standard 1.07 of the Code on Privacy and Confidentiality must also be considered. The social worker must have appropriate and valid consent (section (b)) from the client to make the referral, and in this process, section 1.07(c) states that, “in all instances, social workers should disclose the least amount of confidential information necessary to achieve the desired purpose; only information that is directly relevant to the purpose for which the disclosure is made should be revealed.” This section of the Standard suggests a contradiction in this case; that the “least amount necessary to achieve the desired purpose” could be interpreted to support the omission of the positive

drug test, as the desired purpose of the referral is access to stable housing. And yet this same information, by the housing program rules, is “directly relevant to the purpose for which the disclosure is made.” However, the conflicting state and federal perspectives on marijuana call into question the relevance of the positive drug screen, and again this supports the omission of the positive drug test in this case.

Thus far in this analysis the role of the client and their knowledge of the ethical dilemmas related to the housing referral have not been noted. Standard 1.07(d) of the Code on Privacy and Confidentiality notes that, “Social workers should inform clients, to the extent possible, about the disclosure of confidential information **and the potential consequences**, when feasible before the disclosure is made [emphasis added].” Standard 1.07(e) extends the obligation of the social worker to inform clients of disclosures and consequences “as needed throughout the course of the relationship.” The privacy and confidentiality Standard clearly indicates that the client in this case must be informed of the disclosure, and its potential consequences, which places the social worker in the uncomfortable position of having to either disclose the lie of omission, or lie about it, or having to disclose their intent to include the positive drug test in the referral, the consequences of this disclosure, and deal with the patient’s reaction. Standard 1.07(d) and (e) do not contribute to the resolution of the issues in this case, but do add contextual considerations that would influence the social worker’s decision making process. Thus far, this analysis and the primacy of the client’s interests do seem to support the omission of the positive drug test in this case.

Further contextual or process-oriented guidance from the Code is noted given the fact that the social worker in this case is functioning as a member of an interdisciplinary liver transplant team, and has ethical responsibilities to colleagues. Standard 2.03(a) of the Code on Interdisciplinary Collaboration states, “social workers who are members of an interdisciplinary team should participate in and contribute to decisions that affect the well-being

of clients,” and in particular should contribute the unique perspectives of the social work profession. Standard 2.05(a) on Consultation adds, “Social workers should seek the advice and counsel of colleagues whenever such consultation is in the best interests of clients.” Both of these Standards strongly support the social worker involving the team in the decision about the housing referral and the positive drug test. The social worker in this case should not be making this decision alone, without collaboration, consultation, and supervision.

Returning to the Code for guidance on the opposing courses of action of disclosing or omitting the positive drug test, the social worker’s ethical responsibilities as a professional and to the social work profession must be considered. A core value and principle of the Code and the profession is that of Integrity, with the ethical principle stated as, “social workers should behave in a trustworthy manner.” The Code clearly states, “social workers act honestly.” This principle is reflected throughout the Code, most prominently in Standard 4.04 which states “Social workers should not participate, condone, or be associated with dishonestly, fraud, or deception.” Standard 5.01(a) on the Integrity of the Profession further states, “Social workers should work toward the maintenance and promotion of high standards of practice.” These are the strongest elements of the Code that support the honesty of the social worker and the potential consequences to their own reputation and that of the profession should they omit the positive drug test. These sections and the central values of honesty and integrity strongly support the inclusion of the positive drug test in this case. However, given that this conflicts with the other courses of action supported by the Code thus far, it could be argued that on whole or on balance, the Code and this analysis are more supportive of the omission of the positive drug test in this case.

In the final sections of the Code for consideration, the social worker’s ethical responsibilities to the broader society need to be considered in terms of advocacy opportunities in this case, as is consistent with the core value and principle of

Social Justice. Standard 6.01 of the Code on Social Welfare states in part, “social workers should advocate for living conditions conducive to the fulfillment of basic human needs and should promote social, economic, political, and cultural values and institutions that are compatible with the realization of social justice.” This Standard supports the social worker advocating for the living conditions that will allow the client to fulfill their basic human need for housing, and for continuing to live. This Standard and Standard 6.04(a) and (b) on Social and Political Action also support the social worker promoting social change, advocating for equal access to resources, and acting to expand choice and opportunity for all people.

Given the conflicting state and federal perspectives on marijuana, at a minimum social workers should be advocating for clarity and consistency on this issue. As applied to this case, these Standards, particularly 6.01 on “living conditions conducive to the fulfillment of basic human needs” suggest that the social worker should be advocating for the client’s right to access housing despite the positive drug test. This is a difficult position to take though, as it draws the client into a political situation, and this approach would most likely not lead to stable housing. Advocacy in the face of a federal program rule backed by federal law will not benefit this client at this time. The social worker would be better advised to seek changes or exemptions from the housing program rules separately from this individual case. The tone and spirit of the advocacy and social justice content of these sections of the Code do seem to support the omission of the positive drug test in this case and/or are overridden by the primacy of the client’s interests and other sections of the Code.

### **Conclusion and Implications**

The social work ethical analysis based on the Code suggests that in this case and the situation as it now stands the social worker is stuck in the middle of unresolved conflicting laws and varied social beliefs about marijuana. The client also occupies this conflicted space, where the social worker stands beside

them in the helping role. Notably, nowhere in the ethical analysis from the social work and Code perspective did the history of the client enter into consideration, nor did client demographics that might influence social justice concerns in terms of advocating for the vulnerable and oppressed. It is notable that the Code speaks to social worker’s challenging social conditions on a macro and advocacy level that does not suggest or imply such actions in an immediate or emerging clinical situation. The conception of social justice within the Code is lacking in terms of specific guidelines on distributive justice and the allocation of scarce resources (Furman, 2003). Although the Code emphasizes justice as a core value (Galambos, 1999), it is highly focused on advocacy for the disadvantaged and oppressed (NASW, 2008; Reamer, 2006), and weak in terms of concerns for the equitable distribution of social goods.

The moral permissibility of the client’s quasi-illegal drug use did not enter into the ethical deliberations either. Interestingly, the locally permissive context and conflicting laws did contribute to the analysis and arguments in some areas, where these facts seemed to weaken support noted within the Code for disclosure of the positive drug test. In the end, the primacy of the client’s interests and overwhelming need for continuing to live support the omission of the positive drug test.

The central values and principles of Social Justice, and the Dignity and Worth of the Person seem to come into conflict with the value of Integrity, which is a classic form for an ethical dilemma (Beauchamp & Childress, 2009). Actions in support of one principle would violate the other and vice versa. Looking at the case analysis in its entirety, the most supported conclusion and course of action is to omit the positive drug test from the housing referral. Though this is the considered judgment in this case, reasonable people may disagree (Reamer, 2006) and this conclusion is not fully supported. The social worker, the interdisciplinary team, and the client will determine the outcome in this case, and every case should be decided individually and contextually. Simply moving this case to another jurisdiction that does not permit or allow marijuana

use could easily tip the balance in favor of including the positive drug screen. This raises further issues of consistency and fairness (and social justice) across jurisdictions.

In terms of social work practice, in addition to individual and contextual case analyses, this case indicates the need for social workers and social work agencies to consider practice guidelines and policies that could help resolve this and similar ethical dilemmas. Social work as a profession and individual practitioners need to determine a policy stance regarding the issue of recreational marijuana use, beyond considerations of whether or not marijuana use promotes the wellbeing of the individual client (Milhorn, et al., 2009), although this remains a concern. At a minimum, advocacy for changes in legislation and clarity between state and federal law is needed. Further social work research on the social impact and implications of marijuana use and changing social attitudes would also help to clarify the issue and inform future cases.

Social work education programs should consider how and what to teach on the issue of marijuana use, especially as it arises in ethical dilemmas such as this case. Social work education needs to stress the complexity of ethical cases and dilemmas, and to teach a process of ethical analysis and decision-making. The unique contributions of the social work ethical perspective are a great addition to the medical ethical models, as this case analysis demonstrates. As states and localities continue to evolve and change on the issue of marijuana, these dilemmas will only become more prevalent and potentially problematic. Social workers need to be prepared for these types of cases, and the uncomfortable position of being stuck in the middle alongside clients.

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# An Explication and Application of Max Weber's Theoretical Construct of *Verstehen*

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## Abstract

At the turn of the twentieth century, sociologists debated epistemologies especially as they related to people, whether groups or individuals. Today's social workers can benefit from a deeper understanding of "*Verstehen*," or "interpretive understanding," as it both combats scientific positivism and values cultural competence.

*Keywords:* Weber, *verstehen*, cultural competence, theory, epistemology

## Introduction

Participants in the social science disciplines—anthropology, psychology, social work, sociology, and others—rely on theoretical constructs to better inform their continued work, whether in research or practice. Among those of us who operate in the field of social work, we tend to favor certain theoretical constructs, and their subsequent therapeutic models, over others. This is especially so for those theoretical constructs that operate best in the realm of direct, micro practice: Piaget's cognitive development theory, Freud's psychodynamic theory, Kohlberg's stages of moral development.

Other theoretical constructs offer social workers a broader framework, one that can bridge the micro-macro divide. These so-called alternative constructs may not be used as often in daily practice, but their appropriate use may guide social workers to new solutions, and new conclusions. In this article, the author will explore the nature and practical applications of Max Weber's interpretive

understanding, known best by its original German name *Verstehen*.

## Life and Work of Max Weber, in Brief

Born in 1864, Karl Emil Maximilian Weber was a prominent German academic, operating in the fields of philosophy, sociology, and economics. Considering the time and place of his birth, Weber came one generation after Karl Marx, and he was a contemporary to Emile Durkheim and Sigmund Freud. He died in Germany in 1920, meaning he witnessed the Great War (World War I) in its entirety. He also witnessed the peak of the industrial revolution.

Because Weber was interested in philosophy as it applied to society, he familiarized himself with the work of Immanuel Kant, and would later identify himself as, at least partially, a Neo-Kantian (Kim, 2012). Throughout the course of his many writings, Weber would try to find a place for the rational positivists—those who believed that all things can be known and fully quantified. Ultimately, he was unable to do so, and his resonance with Kant's nominalism led him to develop the concept of *Verstehen*.

Throughout Weber's life, he was active in collaborative—or some might say, competitive—scholarship with his peers. He was a well-known public figure, and at the end of the Great War, post-war Germany looked to Weber for answers. Unfortunately, as Kim notes, Weber's "stark political realism" led him to state that he had no answers

for the people (2012). The *Gemeinde*, or community, would have to find their own way in a new, open political marketplace. Had Weber lived longer, he would have seen the result of the struggle: The Third Reich.

### **Verstehen**

The literal translation of the word *Verstehen* is “understanding” in its noun form, or “(to) understand” in verb form. By itself, *verstehen* is an extremely common word in German, as much as “understanding” is in English. However, when Max Weber began using the word, he had in mind a particular meaning with its own parameters. The first step to *Verstehen* is, thus to understand what he who coined the term meant when he called on others to understand (*verstehen*) the word *Verstehen*.

One way to approach *Verstehen* is to consider the levels of knowledge implicit in the German language. The English verb “(to) know” can be translated by two separate verbs in German: *wissen* and *kennen*. The former can only be used to describe one’s knowledge of facts, concepts, and ideas. The latter is reserved for when one knows a person, when one knows their way around a city, or generally to express familiarity. The former is great for positivist forms of knowledge: memorized facts, mathematical formulae, etc. It would be incorrect to say “Ich weiss dich” (I [factually know] you), just as it would be incorrect to say “Ich kenne Regen” (I [familiarily know] rain)—though the latter might be used for poetic effect. The latter begins to lead us to what drew Weber to coin his own usage of *Verstehen*.

The very language Weber spoke, then, suggested that human individuals cannot be quantified. They cannot be known in the same way one knows the periodic table of the elements. And, though some futurists hope to someday quantify the data in the human brain, and scientists have already mapped the human genome, Weber’s analysis remains true for the present. If positivism cannot apply to the individual, then, how much less so would it apply to collections of humanity: communities, cities, nation-states? Weber struggled to give the positivist

philosophy as much ground as possible, but in the end, he had to join with anti-positivist thought to acknowledge the complex creature that is the human. In one of his later (posthumous) works, *Economy and Society*, Weber (1978) writes:

*All interpretation of meaning, like all scientific observations, strives for clarity and verifiable accuracy of insight and comprehension. The basis for certainty in understanding can be either rational, [...] or it can be of an emotionally empathic or artistically appreciative quality. [...] Empathic or appreciative accuracy is attained when, through sympathetic participation, we can adequately grasp the emotional context in which the action took place. [...] On the other hand, many ultimate ends or values toward which experience shows that human action may be oriented, often cannot be understood completely, though sometimes we are able to grasp them intellectually. The more radically they differ from our own ultimate values, however, the more difficult it is for us to understand them empathically. Depending upon the circumstances of the particular case we must be content either with a purely intellectual understanding of such values or when even that fails, sometimes we must simply accept them as given data. (pp. 5-6, emphasis added)*

Here Weber makes plain that a paradox lies in the nature of *Verstehen*: To understand one another, we must acknowledge that we will never fully understand one another. For twenty-first century social workers, Weber’s statement above resonates with ideas around cultural competence, compassion, and empathy. True empathy can never be fully attained, because we can never fully adopt the perspective of another person or group of people.

The goal in learning to understand that which we do not understand is surrendering the notion that there is an end in sight, and to practice what Weber's translators would later call *Verstehen*: interpretive understanding. Whether considering the concept of "participant observation" in cultural anthropology, "Human Action" in sociology, or "cultural competence" as noted above, all streams lead back to the anti-positivist source of *Verstehen*. It is worth noting that, in terms of vocabulary alone, Weber would likely not recognize the many branches *Verstehen* has gone since he planted the seed and allowed it to take root. But, given some time to contemplate, we can imagine that he would, as our academic disciplines have, be able to see and build the connections.

### **Analysis and Applications in Modern Social Work**

How does *Verstehen* help shape and inform practice in social work today? The obvious answers have already been stated: *Verstehen* acknowledges our inability fully to understand one another, and at the same time demands we follow certain practices to know best, in the *kennen* sense, other people. First, let us consider what this looks like in direct practice. The following example utilizes a "host" environment for social workers, a nursing home, but its universal application is made plain.

#### **The clinical lens**

Any direct practice, micro-level social worker can apply the theoretical construct of *Verstehen* by utilizing models such as cultural competence. Cultural competence has no single definition, but we can see its use in practice. Quickfall describes its use in a Scottish nursing home as part of her ethnographic study that she describes as an interpretative theory of culture, to determine where and to what extent cultural competency is practiced in this clinical setting. Her own theoretical view of cultural competence is broken into three parts: cultural awareness, cultural sensitivity, and cultural knowledge (Quickfall, 2014). Consider the following: in this scenario, many of the nurse practitioners

and social workers in the nursing home are from not just the same region, but the same city (Glasgow) as the residents. Nonetheless, Quickfall acknowledges that if they do not use cultural competence as a starting point to address weaknesses, unlearn biases (such as ageism), and treat every individual as someone new and different, not based on a simple mold or pattern, better care can be achieved.

#### **The macro lens**

When *Verstehen* jumps from micro to macro, the language changes in modern English from "interpretive understanding" to "interpretive sociology." In 1967, Alfred Schutz developed new applications for Weber's work with his publication "The Phenomenology of the Social World" (Robbins, Chatterjee, & Canda, 2012). Schutz argued that too many sociologists were using *Verstehen* in an introspective way, applying it to the individual level only. In his own model, which Robbins et al. describe as "extremely complex," Schutz speaks of the world in terms of objects and inanimate structures ("umwelt") and the social world, the world of person-to-person interaction ("mitwelt") (p. 326). The purpose of differentiating these two worlds was to allow us to consider not just the interactions within the *mitwelt*, but also the interactions between *mitwelt* and *umwelt*, and how the *mitwelt*-only interactions affect *umwelt*. In the realm of social work, it would not be too great a leap to think of *mitwelt* as the Social Environment, and *umwelt* as the Physical/Ecological Environment.

In macro-level social work practice, we can analyze large-scale human behavior, from consumerism to time management to protests and rioting, within the context of Schutz's expanded *Verstehen*. We can observe how group interactions bring positive or negative results, as well as how groups of people affect the non-human (ecological) world and whether any negative counter-effects result, and then use this information to inform data. In all cases, Weber's anti-positivist caveat remains: The structures of politics, government, economics, class struggles, and racial oppression are all worth taking the time to understand via models of cultural



competence; we will fail, however, if we do not remove our assumptions first, and we will also fail if we set the standard of success at exhaustive, perfect knowledge.

### **Critical analysis, in six questions**

Just like physical scientists who have tried in vain to find a “Grand Unified Theory” to describe all of physics, no single theoretical construct in the social sciences will give a unified picture of human behavior in the social environment. An apropos meta-application of *Verstehen*, however, is that if we cannot fully know human behavior, so likewise, no one theory would satisfy us in full. To think otherwise, as economist F. A. von Hayek (1975) would say, is “the pretence of knowledge.”

*What specific aspects of human development and human relations does the theory address and emphasize?* Weber’s *Verstehen*, like modern offshoots of the concept, simultaneously emphasizes the human desire fully to know one another and the frustrating acknowledgement that the best we can expect is secondhand understanding, glimpses and attempts at experiencing what the other person(s) experience(s).

*What is the theory’s relevance and application to individuals, families, groups, organizations, institutions, and communities?* As demonstrated above, *Verstehen* can be scaled from micro to macro and back again without trouble. Cultural anthropologists use it at mezzo and macro levels when they attempt participant observation. Clinical social workers apply it implicitly via cultural competence.

*How consistent is the theory with social work values and ethics?* In brief, *Verstehen* is wholly consistent, but it is not wholly encompassing. Practical models based on *Verstehen*, including the two noted in the previous subheading, are rooted in observation. This observation comes with an expectation of a best-attempt *tabula rasa* on the part of the observer, and with an expectation of cultural sensitivity and humility at every juncture. However, *Verstehen* is primarily, and perhaps only, a tool for observation. The role of the social worker

as a helper, and being part of the helping profession, requires some kind of action. *Verstehen*, having its roots in sociology, does not lead to action on its own.

*What are the theory’s philosophical underpinnings?* As stated above, Neo-Kantian nominalism and anti-positivism are *Verstehen*’s philosophical underpinnings. With *Verstehen*, we assume that knowledge of any one human, and any collection of humans, can never be fully captured via observation, and that observation is best done not as “data collection” but through relational and social norms.

*What are the methodological issues and evidence of empirical support?* Because *Verstehen* focuses on explaining, rather than predicting, human behavior, the evidence for its empirical support is self-evident. Practicing cultural competence, compassion, and empathy in direct social work practice prove out the value of Weber’s contribution.

*On what grounds does the theory base its appeal for acceptance?* *Verstehen*, better translated here as “interpretive understanding,” bases its appeal for acceptance – at least in part—on its rejection of positivism. Comte placed sociology aside physics and chemistry as fully knowable, fully submissive to the scientific method; the ephemeral fields of knowledge, including philosophy and theology, were full of unanswerable questions (Robbins et al., 2012). *Verstehen* forces sociology to, at the very least, straddle the dichotomous fence of fully knowable and unknowable, if not fall entirely to the “unknowable” side.

### **Conclusion**

Interpretive understanding, interpretive sociology, and other modern forms of *Verstehen* have allowed all of the social sciences to move away from positivist, determinist endeavors—all of which have fallen flat in social and behavioral science—and toward a more nuanced, humanized form of study. Weber’s successors found ways to practice interpretive understanding and sociology without sacrificing scientific rigor; nonetheless, interpretive understanding is not beholden to strict

scientific method. It instead provides a way to allow us to change lenses and try and make them align with the lens of another person: to see and learn their worldview, so that all knowledge can be interpreted through that “other” lens.

Max Weber’s body of work is enormous, and while his *Verstehen* has had crossover appeal in various academic disciplines, he offers up other concepts in his many works that may too be of value to the social work discipline. Social work students interested in *Verstehen* may find further benefit by exploring some of Weber’s other concepts in his other works.

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# Integral Ethics for Social Workers

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## Abstract

Based on Wilber’s integral paradigm, this meta-ethical model helps practitioners and educators see more and filter out less so that they can more authentically engage differing perspectives and experiences without compromising their own ethical orientations. Pope Francis is presented as an example of integral ethics in action.

*Keywords:* integral ethics, social work, Pope Francis

## Introduction

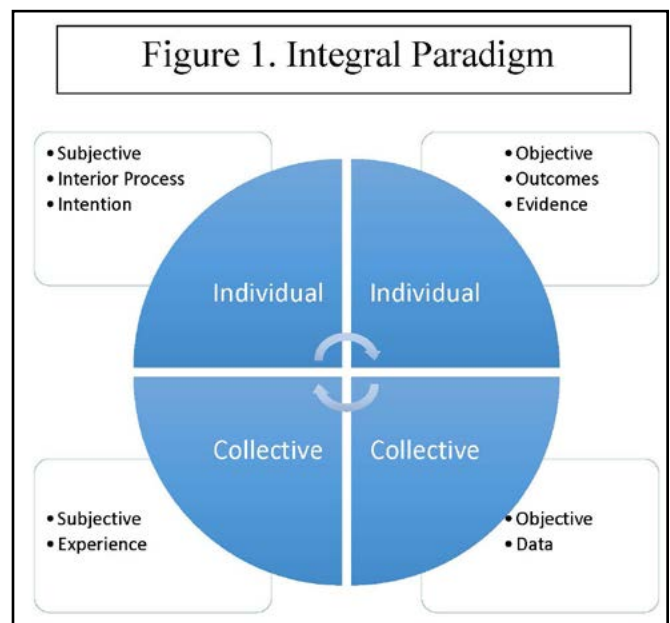
Social workers are certainly aware that as humans we each have individual experiences (both internal and external) as the unique individuals that we are, and that we also have experiences as members of many different groups—families, religious groups, social groups, political groups, and work groups, to name a few. Social workers are aware that individuals and groups also have both interior and exterior dimensions—their own internal processes that aren’t necessarily open to the external world as well as outcomes that are observable to the external world.

Nevertheless, social workers and educators still get embroiled in some of the nastiest arguments about who is right, most ethical or unethical, when it comes to gay marriage, abortion, Republicans in social work—fill in the blank! This article presents a meta-ethical framework that allows practitioners, educators and students to *see* the multiple, simultaneous and interrelated dimensions of these dilemmas. Pope Francis is presented as a concrete touch-point for applying this framework.

## Integral Paradigm Applied to Ethical Reasoning

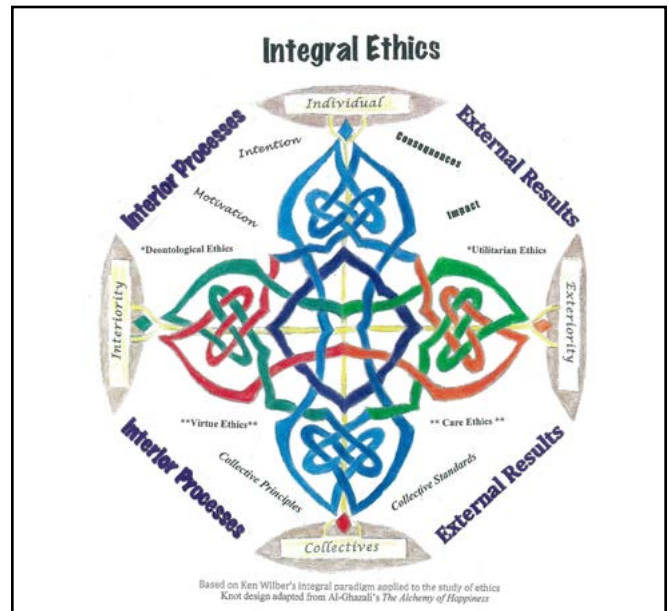
Wilber’s integral paradigm (Wilber, 2006, 2001, 2000, 1997) used widely across disciplines and translated into more than 25 languages, articulates four simultaneous, inseparable and irreducible dimensions of reality. He uses a graph containing four quadrants, key words and arrows pointed in four directions to illustrate the interrelatedness, depth and complexity of each dimension. Simply put, human beings simultaneously have interior (subjective) and exterior (objective) perspectives and experiences as both individuals and as members of various groups; each of these dimensions is also multi-layered and integrally connected to the other three.

Applied specifically to ethical theory and ethical decision-making, this meta-paradigm expands the way ethics can be understood and taught,



offering social work educators an opportunity to teach ethics in a richer, more authentically inclusive way. Building on principle-based (deontological) and consequentialist (teleological) schools of reasoning usually presented as individually-oriented approaches to ethical decision making in social work (Strom-Gottfried, 2008; Reamer, 2006; Robison & Reeser, 1999; Mattison, 2000), Augustine (2010) suggests that two collectively-oriented schools of reasoning, virtue ethics and care ethics, could complete Wilber's four quadrant schema. These two approaches to ethical reasoning have particular relevance to social workers and social work educators. Care ethics with its emphasis on power imbalances in relationship and evidence-based standards of care, and virtue ethics with its focus on becoming the right kind of *person* (not just knowing the rules and following them), are both oriented to groups (or collectives) and are as timely now as they were when these schools of ethics were first introduced. Interestingly, these two ethical approaches have also received more attention from social workers in recent years (Pullen-Sansfacon, 2010; Adams, 2009; Meagher & Parton, 2004; McBeath & Webb, 2002). In an integral frame, all four of these systems of ethical reasoning are inseparable, irreducible and interconnected; they are not understood in mutually-exclusive terms. Rather, they represent four concurrent dimensions of human experience. We are simultaneously individuals that have principles, emotions and interior lives, aware of the consequences of our individual behaviors and the behaviors of others (interior and exterior *individual* experiences), **and** we have internalized values and developed enduring qualities (virtues) based on groups that contribute to the development of character based on certain "facts" considered objectively true by these groups (subjective and objective dimensions of group identity).

Using this framework, one could "walk around" the four quadrants using an issue like marriage to illustrate four different ways of concluding that gay marriage is ethical or unethical. The former Iowa Supreme Court Justice made an individual decision to support gay marriage (and



subsequently lost her seat) not because she was a gay right's advocate. Ironically, she was a Catholic who happened to also have a deeply held conviction (deontological ethics) about due process and couldn't convince herself that it should be denied to LGBTQ persons. A more utilitarian position favoring gay marriage might be based on the unacceptable consequences to family members when same sex partners cannot make end of life decisions for their partners. Using a more data-driven, collective logic (care ethics quadrant), one might present a statistic estimating the numbers of partners denied health care coverage (routinely allowed heterosexual spouses) because they could not be married. And, using a collective (virtue ethics) line of reasoning, one could argue that the virtues of human dignity and standing in solidarity with marginalized populations requires that social workers (as a group) support gay marriage. In a similar way, one could "walk around" the quadrant identifying deontological, consequentialist, care ethics and virtue ethics reasoning *against* gay marriage. Once social workers recognize that we all have *some* experience (however limited) in *each* of the four quadrants, i.e., use all four kinds of logic in different contexts, we create more space for ourselves to respond to the complexities of any ethical dilemma with more authenticity and less fear of the other. We don't feel pressured to agree with every point of view, nor do

we feel the need to defend one particular position exclusively because we can actually *see* a more complicated, interconnected (integral) reality.

### **Implications for Social Work Practice and Education**

Social work practitioners and educators are already aware of how important it is to pay attention to both *individual* and *collective* experiences, as well as *interior* processes and *external* results. So, the integral paradigm is hardly new information for us. What is new and potentially transformative is the way this paradigm puts these perspectives together and how this complex, integrative framework can be used to help practitioners, educators and students deconstruct seemingly intractable disagreements. We can use it to see what quadrant *we* are operating from in a given context, and how others may be operating from other quadrant perspectives. Simply seeing this often brings an initial relief, perhaps an “ah-ha” moment. We see that in *any* ethical dilemma there are individually-oriented outcomes as well as individual principles and/or motivations at stake. At the same time, we see that there are also collectively-oriented outcomes and collectively-oriented virtues at stake because social workers are simultaneously members of multiple groups that have varying external standards of care and collectively understood character traits that we value.

Religious social work educators and students, for example, often experience conflicting loyalties as members of their families, churches, political organizations and other social groups, not to mention professional organizations like NASW or CSWE. As *individuals*, we forge identities *within* each of these groups, while simultaneously moving *between* these groups, each of which provide a sense of identity and/or a sense of community. Although the groups and identities vary (from conservative to liberal, and from secular to religious), we all forge our professional identities similarly amidst all this complexity. In every context social workers find themselves, they receive internal as well as external validation for adhering to certain principles and behaviors and for disavowing others. Simply

“identifying with” social work values and ethics doesn’t reduce the complexity of navigating these “troubled waters.” Somehow, practitioners have to figure out how to “hold” all this complexity, and the integral frame can help us do this.

Once *seen* in this more complicated and nuanced way, ethical reasoning and decision-making become more dynamic (less mechanical) processes that require continuous movement from quadrant to quadrant. As we consider perspectives and experiences from each quadrant (with regard to others as well as ourselves), practitioners and educators can more readily see how and where *we* get stuck. We are then free to more actively engage clients and/or students in seeing their “go to” quadrant, or “dominant hand.”

Most people are not ambidextrous. Even though we have two hands and use them both, most of us have a preferred hand, one we use more often and with more ease. Once we realize that we also have preferred ways of thinking and orienting ourselves to the world, we can see how our preference (or “dominant hand”) impacts our perceptions, experiences, judgments and choices. What’s more, we can see that others are similarly impacted by the “dominant hand” that they use in certain contexts. Even more transformative is the awareness that we can also use our “other hand” to authentically engage differing points of view without compromising our own. We can actually understand points of view radically different than our own because we recognize how we use that “other hand” in our lives at times. We begin to see how we tend to get stuck when we define an issue or dilemma in terms of one particular quadrant. It’s like suddenly remembering that we have two hands and two feet that we can use to consider other perspectives. Exploring experiences and perspectives from other quadrants allows us to make legitimate connections with these “other” perspectives even though they are not ours. We recognize the reality that we need not change our positions or agree with others in order to *see* their realities and invest them with some credibility.

Some assume incorrectly that an integral view suggests a kind of undisciplined or

irresponsible relativism. It might appear to undermine commitments and convictions, when in fact, this more complex view can actually support and deepen convictions. Without suggesting that everything is relative or that “anything goes,” this framework doesn’t privilege one worldview while marginalizing others-- it holds all the parts together, and values it *all*. Rather than suggesting that nothing really matters, this both/and rather than either/or framework shows us that it *all matters*.

Clearly, social workers will not always agree or come to a consensus on many issues facing us today, but learning to see in this more nuanced way frees us to authentically engage in difficult conversations without needing to hide any dimension of who we each are. This perspective allows us to engage with ethical dilemmas and come up with responses that none of us as individuals could have come up with alone.

Some social work educators remain concerned that behaviorally-focused, competency-based education *without* the concurrent development of moral character and virtues leaves social workers ill-prepared for the complexities of modern life (Chamiec-Case, 2013; Costello, 2013; McBeath & Webb, 2002). Holly (1996) makes the interesting point that including a virtue ethics perspective has a number of advantages for those interested in developing a global ethic: flexibility, cross cultural adaptability, “motivational force,” and attainment of higher aims (p. 9). Because an integral lens can expand the way practitioners and educators think about ethics, how they make decisions and judgments about what is ethical and unethical, it offers them an opportunity to attend to the character development of students and clients in addition to their behaviors. Already applied to clinical practice and psychotherapy (Forman, 2010), the integral paradigm can help social work educators become more conscious of the subjective dimensions of student experiences like intersectionality, as important aspects of professional identity formation. This can help educators see how developing cultural humility as a virtue (subjective quadrant) is as important as developing skills and competencies (objective

quadrant). Although difficult to discuss let alone measure in many outcome-dominated learning environments, these conversations are critical in social work.

Now, let’s consider how this framework might be used to analyze the behaviors and teachings of a particularly noteworthy individual: Pope Francis. As a non-Catholic who has taught in a Catholic University for over twenty years, I have found him to be an interesting study in leadership, as well as a fascinating case for applying this integral ethics framework.

### **Pope Francis: An Interesting Case in Point**

Well before his momentous visit to the United States, Pope Francis’s “rock star appeal” captured the imagination of the popular press as well as religious journals around the world (AllAfrica.com, 2013; Allen, 2013; Booth, 2013; Jackson, 2013; Reese, 2013; Rusthoven, 2013; Weigel, 2013; Murphy-Gill, 2014; Willian, 2014). And, of course, the American imagination has also been recently stirred: John Boehner’s tearful public response and subsequent resignation; dogs and babies wearing miters, a tailgating party hosted by nuns at Catholic U, a rainbow (on an otherwise dry day) before his tour of Central Park, and even being called “cool” by a feminist columnist who considers him a “perilous Pope” (Dowd, 2015).

From an integral perspective, he has endeared *and* aggravated *both* liberals and conservatives based on his vision (Jackson, 2013), his revolutionary ideas and efficient managerial style (Fea, 2013; Weigel, 2013), and his scathing critique of unfettered capitalism (Willan, 2014; Pope Francis, 2013, paragraphs 52-60).

His wide and somewhat perplexing appeal suggests that he is an integral thinker and quite possibly one of the most timely, public and accessible exemplars of integral ethics. Ivereigh (2014) provides personal insights into the development of Pope Francis’s thinking including riveting Argentinian cultural and historical backdrops, as well as the “hitherto untold story of how and why he was

elected pope” (pp. 349-367). The commemorative edition of *Us* (2015) provides a collage of quotes and pictures, giving readers a glimpse of the Pope’s penchant for the tango, basketball, soccer, and Lord of the Rings as well as his theology focusing on common people, healing wounds, and mercy above all else (Steel, 2015) —all this suggesting even more evidence of his “integral” approach.

As a priest, Jose Bergoglio began articulating four principles as early as 1974 in response to the need for reform in Argentina. He considered them “the axis around which reconciliation can revolve” (Ivereigh, 2014, p.143), and these four principles began showing up regularly in his writings and speeches, eventually shared with the world in his first encyclical as Pope, *Evangelii Gaudium*. Francis used these four principles as he developed relationships and public dialogues between Catholics, Muslims, Jews, and even evangelical communities in Argentina. Now he uses them to work with major divides between liberals and conservatives in the Catholic hierarchy, most recently during the Synod on the Family where divisive issues around divorce, remarriage, and who should be able to receive the sacraments were debated.

In *Joy of the Gospel*, Francis identifies and elaborates on each of the principles: 1) time is greater than space, 2) unity prevails over conflict, 3) realities are more important than ideas, and 4) the whole is greater than the part, noting that they reflect “constant tensions present in every social reality.” Note the inseparable, integral nature of his language. Throughout the encyclical he gives attention to the interior life of individuals and to external structures and consequences that can either hamper or be helpful. He is critical of too much emphasis on individualism and not enough emphasis on collective values and communities. He repeatedly argues for a kind of principled flexibility that asks us to “go forth from our own comfort zone” in order to experience the “unpredictable” nature of God’s word that will “surpass our calculations” and efforts to be exclusively outcome-focused.

Not surprisingly, his position on abortion is deontologically pro-life based on the conviction that “a human being is always sacred and inviolable, in

any situation and at every stage of development,” (paragraph 213) but he simultaneously acknowledges the consequences to women when the Church fails to support them in difficult situations, especially when pregnancies are the result of rape or occur in the context of extreme poverty. In this same paragraph, Francis poses a compelling, integrally oriented question, “Who can remain unmoved before such painful situations?” Or, recall the memorable request before he made after addressing Congress: “... I ask you all please to pray for me. And if there are among you any who do not believe or cannot pray, I ask you to please send good wishes my way” (McClam, 2015, n.p.)

In these ways, he demonstrates an integrated sensitivity and complex system of ethical reasoning, embodying the four principles he first articulated more than 40 years ago.

### **Time is greater than space**

In these few paragraphs (222-225), Pope Francis makes some surprising philosophical statements about time and space. For starters, he suggests that time is greater than space because he equates time with fullness and an “expression of the horizon which is constantly opening before us,” whereas space is identified as a wall, a limitation or “enclosure.” He notes that people live and are “poised” between these two inseparable and concurrent realities, between the subjective and the more concrete dimensions of human experience, as he critiques the modern obsession with immediate results (looking exclusively at objective realities). He argues that maintaining a more balanced (integral) perspective allows us to work “slowly but surely” in a way that helps us endure adverse situations while making the inevitable changes in our plans that this view requires. It’s why he says that giving priority to time means giving priority to “initiating processes rather than possessing spaces,” expanding his argument to engage individuals and groups to “develop the actions which generate new processes” so that they “bear fruit in significant historical events.” While Francis is tenacious in his commitment to principles and virtues, he also recognizes the consequences of both individual and

collective action.

### **Unity prevails over conflict**

Next, Pope Francis takes up the constant tension between conflict and unity, again suggesting an integral relationship between the two. He begins by noting the importance of facing conflict rather than ignoring, minimizing or concealing it, but also acknowledges how we can get lost in conflict:

When conflict arises, some people simply look at it and go their way as if nothing happened; they wash their hands of it and get on with their lives. Others embrace it in such a way that they become its prisoners; they lose their bearings, project onto institutions their own confusion and dissatisfaction and thus make unity impossible. But there is also a third way, and it is the best way to deal with conflict. It is the willingness to face conflict head on, to resolve it, and to make it a link in the chain of a new process. "Blessed are the peacemakers!" (Mt5:9).

In this way it becomes possible to build communion amid disagreement, but this can only be achieved by those great persons who are willing to go beyond the surface of the conflict and to see others in their deepest dignity (paragraphs 227-228).

Francis talks about solidarity as a way of "making history in a life setting where conflicts, tensions, and oppositions can achieve a diversified and life-giving unity," making the point that this isn't absorbing one view into another, but rather a "resolution that takes place on a higher plane" and that actually "preserves what is valid and useful on both sides" (paragraphs 227-228).

### **Realities are more important than ideas**

These few paragraphs are perhaps the most

surprising given what many would expect of a religious leader. In this section he indicts not only politicians and educators, but also religious institutions for separating ideas from realities:

Ideas disconnected from realities give rise to ineffectual forms of idealism and nominalism, capable at most of classifying and defining, but certainly not calling to action. What calls us to action are realities illuminated by reason (paragraph 232).

He warns of getting stuck in the realm of pure ideas and of reducing our work to mere rhetoric and modeling a rationality that is disconnected from the lived experiences of most people. That is why he concludes that *realities are greater than ideas*. Here, realities and ideas correspond with the objective and subjective (exterior and interior) dimensions of the integral paradigm. When he says that exterior realities (behaviors, consequences and outcomes) are more important than ideas (interior values, beliefs), he is making a radical statement as a religious leader, and he does so because he maintains that realities call us to action more than conceptual abstractions.

### **The whole is greater than the part**

Pope Francis ends this integral discourse by offering a holistic, systems view of the world and human experience. Beginning by discussing the tension between globalization and localization, he notes that this tension prevents us from falling into either of two extremes: getting caught up in an abstract globalized universe or turning to "a museum of local folklore," neither of which evoke the "totality or integrity" of the gospel. Once again, Francis suggests a both/and approach, noting that the best visual model is a polyhedron (rather than a circle) because it "reflects the convergence of all its parts, each of which preserves its distinctiveness" (paragraph 236). He notes that political and pastoral activity both seek to "gather in this polyhedron the best of each," making the surprising observation that even those of questionable character or merit



have something to offer “which must not be overlooked” (paragraph 236). What an important affirmation for social work practitioners and educators as well!

### Summary

Regardless of their religious orientation or the lack thereof, social workers can find inspiration in Pope Francis’s more complex orientation to ethics. His nuanced approach emphasizes constant inseparable tensions that undergird human experience. When social workers can first *see* and then acknowledge these tensions, they are *free* to be less defensive and have more genuinely inclusive, less judgmental responses to ethical dilemmas **without** compromising their values or beliefs. Liberals want Francis to modernize church doctrine while conservatives want him to defend their positions; he has done neither. Instead, he prefers to stress what he suggests has been hidden from view: loving kindness and forgiving mercy. Francis is reported to have said:

If the Church is alive, it must always surprise... A Church that doesn’t have the capacity to surprise is a weak, sickened and dying Church. It should be taken to the recovery room at once (Ivereigh, 2014, p. 396).

Need it be said that the same holds true for social work and social work education? More than ever, social work needs practitioners and educators who can be as nimble, yet principled and authentic in responding to the complex ethical issues facing our profession today.

With a little practice using this integral framework, social workers and educators can develop facility in moving from quadrant to quadrant on most any issue or challenge. As we develop this facility, and continue to work through our own (interior and exterior) conflicts as individuals and as members of various groups that sustain our identities, this integral lens provides us with a nonjudgmental reference point for maintaining

consciousness of our own development. Not only that, we become less cynical or hard-hearted towards others who are reasoning differently based on where they are in *theirs*.

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# Social Work Student Perceptions of Group Work and the Presence of Value Themes That Correspond to Group Work Success

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## Abstract

Often group work is used as a teaching tool to enhance a students' experience in group socialization and academic achievement (Kolb, 1984; Humphrey, 2014). During the 2001-2002 and 2002-2003 academic years, Baylor College of Medicine administered the Value Teams Survey to a cohort of students during their psychiatry clerkship. The psychiatric medical science study results showed that team learning is perfect for problem-solving, communication, and class engagement, as well as providing clinical information (Levine et al., 2004). This research study explores what students report or perceive is valuable from group work participation. During the spring semester, April of 2015, an amended Value Team Survey (VTS) was administered to twenty graduate level social work students. Evaluating the respondents' results supports the emergence of two value themes, "peer value" and "group work value." This new association of values creates the emerging values model (EV). "Peer value" themes reflect relationships, behaviors that are directly affected by peers, and outcomes related to peer influences and their level of importance. "Group work value"

themes reflect the worthiness, success, or failure in the active engagement process of teamwork. Overall, the small group process is *productive, rewarding, and enhances the student's decision-making and problem-solving abilities*. Students self-reported that working in a group improved their achievement and that working with their peers was an important skill. Knowing that students recognize the value and importance of group work proves to be an advantage for instruction in higher education. The student-acknowledged value themes can be incorporated into course learning goals in order to successfully meet the Council on Social Work Education (CSWE) guidelines.

*Keywords:* Group work, student values, peer collaboration, student success, and group decisions

## Introduction

Social work practice and ethical decision-making are guided by the National Association of Social Workers (NASW) Code of Ethics. The guiding core values for the code of ethics include: service, social justice, dignity and worth of the person, importance of human relationships, integrity, and

competence (Code of Ethics, 2015). The Council on Social Work Education (CSWE) accreditation standards expect that social work students will obtain the appropriate practice skills during their education. It is critical that educators provide an education that matches the accreditation criteria for social work education (CSWE, 2008).

Various course group assignments and experiences contribute to the education of social work students. Valuable group work student learning experiences include the use of case examples (Knight, 2014), virtual groups (Davis & Goodman, 2014), and experiential learning (Clements & Minnick, 2012; Kolb, 1984). Additionally, developing group guidelines and policies to govern online interactions and services to clients is a critical online ethical consideration (Voshel & Wesala, 2015).

Assignments requiring group work are often given to students in social work. There are conflicting results about the effectiveness of participation in groups. Goodman, Knight, & Khudododov (2014) found students felt unprepared to practice the group work modality due to a lack of group work course preparation. When group work content is delivered effectively some students have been able to make a connection between group work course learning and application to field work (Knight, 2014). Group work is also noted to enhance group socialization experiences and academic achievement (Kolb, 1984; Humphrey, 2014). According to Peterson & Miller (2004), challenges encountered during the group work process include a lack of exchange of respectful behaviors and a lack of equal contributions amongst all group members. Sweifach & Heft-LaPorte (2008) report that less than twenty percent of Schools of Social Work require a group work course. In contrast, every social work professional will participate in and facilitate a group during their career (Sweifach & Heft-LaPorte, 2008).

### **The Value of Group Work**

Challenges and benefits continue to emerge in research related to group work in the classroom. The benefits from group work participation range from reported research gains in middle school

student group work challenges (Frykedal & Chiriac, 2011) to equal participation from group members for assignment completion (Peterson & Miller, 2004). Often group work is used as a teaching tool to enhance students' experience in group socialization and academic achievement (Kolb, 1984; Humphrey, 2014). Research has examined the reason graduate social work students decide to take advanced group work classes and the findings reveal three prominent themes. According to Sweifach and Heft-LaPorte (2008) students reported the following positive influences: 1-student self-efficacy in their ability related to group work, 2-help in achieving personal goals (employment opportunities) and 3-a previously positive experience with groups or group work faculty.

According to Naslund (2013), participation and demonstration of respectful behaviors towards all group members are common themes related to group member satisfaction (as cited in Chiriac, 2014). Peterson and Miller (2004) found there is a problem in groups where members (students) do not complete their fair share of the work. Learning is a task that requires risk-taking because of the need to be open to new things (Pleasanton Unified School District, n.d.). This risk-taking necessitates appropriate levels of stress that can be complicated in instances where uneven contributions from group members can create additional group tension (University of Waterloo, n.d.). For students, stress can heighten senses, so some stress is helpful as it has been found to promote student success (Pleasanton Unified School District, n.d.).

Conner (2004) discusses the importance of the "teacher as group facilitator" when offering students the opportunity to practice problem-solving and decision-making skills while exploring scenarios that determine ethical dilemma value analysis. With this teaching style students have the option to work in small groups and are encouraged to examine their own areas of interest within the group. Not surprisingly, some students found the independent mode of learning desirable while others felt the teacher should be more directive (Conner, 2004, p. 74). Active group participation while exploring

ethical issues encouraged group members to examine and develop their own values (Conner, 2004).

### **Ethical Decision-making**

Examining and developing values is noted to occur as group work participants explore ethical issues (Connor, 2004). Some researchers have found college students working in groups scored higher on exams than working alone; however students also demonstrated an increase in confidence for groups' wrong answers on the exam (Puncochar & Fox 2004). In the aforementioned study, individual and group accuracy and confidence in responses were examined using several quizzes throughout one semester. The results suggest that group work can "produce the undesirable by product of being highly confident when wrong" (p. 590). Often people become overly confident and groupthink can contribute to student's feelings of accuracy since many other group members provide positive encouragement (Janis, 1982).

Edwards and Addae (2015) suggest using ethical dilemmas from students' field placements to practice ethical decision-making. Furthermore, they propose that this relevant ethical decision-making about client systems and environments assists students in seeing the real life effects of these decisions. According to Walker (2011), ethics classes can encourage students to accept others' perspectives and strengthen existing belief systems and values.

Research has demonstrated that working in small groups to address value dilemmas within the classroom is beneficial for decision-making (Brandler, 2008). Within the small group setting withdrawn students participate and group members actively engage in discussion, sharing and confronting as part of the normal group process (Corey, Corey, & Corey, 2014). Brandler (2008) suggests "the process of tackling the difficult value dilemmas is learned by doing" (p. 94). In other words, social work students' active participation in solving ethical dilemmas develops a better understanding of social work values and improved skills related to social work values.

### **Group Dynamics**

Baldwin (2000) found that different types of student-labeled groups (happy, difficult) impact the type of self-assessment students gain as a learning tool in small groups. For example, students participating in a "difficult" group reported and self-assessed with de-skilling remarks (noting what they did not know), whereas "happy" group participants acknowledged what they had learned (reading, writing skills). The impact of the group dynamics was apparent from members' self-assessment (Baldwin, 2000); interactions impact students' self-assessment skills.

### **Baylor College of Medicine Value Teams Survey**

During the 2001-2002 and 2002-2003 academic years, Baylor College of Medicine administered the Value Teams Survey to a cohort of students during their psychiatry clerkship, both before and after engaging in a team learning experience (Levine et al., 2004). The scores from each cohort were compared to one another. The concept was to examine students' perceptions of the value of team learning in the education process. This instructional strategy known as team learning encourages small group education. Teams were disseminated problematic cases with attached manufactured problem-solving solutions (Levine et al., 2004). The findings demonstrated a selection and a defense of the solution; creating a small group learning environment of interactions that strengthened team-based decision-making and stimulated high levels of student cohesiveness. In addition, for large classes, the student-professor ratio learning benefits were not reduced (Levine et al., 2004).

The authors of "Transforming a Clinical Clerkship with Team Learning" note that team learning is worthy of more research and studying in disciplines other than psychiatry (Levine et al., 2004). In the Baylor College of Medicine study, team learning was highly appreciated as an instructional method (Levine et al., 2004). The psychiatric medical science study results showed that team learning is perfect for problem-solving,

communication, and class engagement, as well as providing clinical information (Levine et al., 2004). Social work is an ethical social science that combines researched interventions with clinical experiences (Social Work Policy Institute, 2010). As disciplines that engage and examine population concerns, and communicate their needs through the development of responsive legislative policies (Social Work Policy Institute, 2010), the social work and psychiatry curriculums have like domains with clinical behavioral assessments, communication competence, and integrity proficiencies.

In group exercises, many educators use the terms “small groups” and “team learning” interchangeably due to their very close and assimilated roles. It should also be apparent that the similarities of the two processes are often obvious in classroom assignments.

### **Methodology**

The literature discusses the examination and existence of group members’ values exposed as a result of the exploration of ethical group participation issues. Social work students are educated with the core values and ethics of the social work profession as a part of the learning curriculum. Appropriately, social work students are also engaged in group work which is researched to deliver positive outcomes (Sweifach & Heft-LaPorte, 2008) and aid students in developing their own values (Conner, 2004). This research seeks to explore what students report or perceive is valuable from group work participation. This study examines the emerging value themes students perceive with group work participation.

During the spring semester, April 2015, an amended Value Team Survey (VTS) was administered to twenty graduate level social work students on the last day of semester instruction during a social work policy course. All students in the course volunteered to participate and were informed there would no consequences for not participating. Each student participated in two different small group assignments during the course. The use of the term small group is intentionally favored

over team learning as a direct correlation to the absence of manufactured solutions accompanying the assignments.

The amended social work VTS has 13 Likert scale questions and one descriptive statement, as compared to the Baylor School of Medicine original VTS, which had nine Likert scale questions. The additional Likert items were included to examine: 1) the strongly referenced small group researched area of stress; 2) the contributions of work by group members (equal vs. unequal); 3) the importance of leadership determined through volunteerism, confidence, and decision-making; and 4) the reported influence of group work on future individual performance. Additionally, the descriptive statement addressed the communication that the Baylor VTS results showed, and this element permitted students to report using their own words to describe their group experience.

Research by Naslund (2013) indicates that student group member satisfaction is related to the respectful exchange of behaviors between group members (as cited in Chiriac, 2014). Furthermore, Peterson and Miller (2004) found sharing equivalent work among group members is preferred and appreciated, and without it adversity results. These findings generated the need to address group member contributions/work distribution and the impact of stress to group members using the amended VTS.

Research by Janis (1982) and Brandler (2008) reveals that group work leads to feelings of confidence, and addressing value dilemmas in this type of setting is positive for decision-making. Confidence and decision-making are variables of leadership (Dao, 2008) which are not covered in the Baylor VTS, therefore these issues were presented in the amended VTS as respondents considered the value in volunteering to lead groups.

In a group setting, it has been found that students gain practical skills, knowledge, and behavioral coping techniques (Adams & Riggs, 2008; Humphrey, 2014). Since these areas were not included in the Baylor VTS, they were incorporated in the amended VTS by asking respondents if the process encouraged them to improve: 1-behavioral

coping—"The group process is distressing," 2-practice skills—"It is important to volunteer to lead groups," 3-knowledge of practical practice—"Other group members usually put in more effort than I do," and 4-promotion of the opportunity to excel—"Group participation encourages me to excel."

While Levine et al, (2004) are clear that other disciplines outside of psychiatry should engage in additional research, their results indicated small group learning was good for communication. The Baylor VTS (see Table 1) did not permit open-ended comments by students, possibly because the value of this communication was not realized prior to the completion of the study. The opportunity to provide original thought was incorporated in the

amended VTS by asking respondents to provide comments that described their group experience.

### Results and Analysis

The original questions on the amended Value Team Survey demonstrate high levels of agreement and many common themes amongst the social work respondents. When students were asked about their *ability to collaborate with their peers as a necessary component to student success*, all students responded with affirmation and agreement. This question was the only item that elicited complete agreement from respondents. Most students (13 respondents) *strongly agreed* and the remaining seven *agreed*. Essentially students reported they were aware that their individual success was reliant upon their ability to work with other students.

The largest number of students with parallel answers included eight who *disagreed* that *working in groups was a waste of time*-while four *strongly disagreed*; only four felt that it was a waste of time, but notably there were also four that did not agree or disagree. When analyzing this response reflectively in conjunction with the preceding response above; *essentially students reported they were aware that their individual success was reliant upon their ability to work with other students*, students may be equating their individual success with a letter grade achievement for the course. Although professors grade content mastery from assignments and exams, they may also consider the ability of students to demonstrate the integration of content into the group setting as a part of the measure. It is also possible that professors may evaluate the levels of student individual growth and surmise those levels of improvement to equate student success.

Some results demonstrate students' acknowledgement of the benefits of group participation. A total of 18 student respondents support the benefit of problem solving in groups. Ten students *strongly agree* that

Table 1

Please circle the number under the phrase that best describes the extent to which you agree with the following statements	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1. The ability to collaborate with my peers will be necessary if I am to be successful as a student.	1	2	3	4	5
2. It is a waste of my time to work in groups.	1	2	3	4	5
3. The ability to work with my peers is a valuable skill.	1	2	3	4	5
4. Collaborating with my peers will help me be a better student.	1	2	3	4	5
5. Solving problems in a group is an effective practice that I have learned.	1	2	3	4	5
6. Solving problems in a group is an effective way to learn.	1	2	3	4	5
7. Working in teams in class is productive and efficient.	1	2	3	4	5
8. Group decisions are often better than individual decisions.	1	2	3	4	5
9. Solving problems in groups leads to better decisions than solving problems alone.	1	2	3	4	5
10. It is important to volunteer to lead groups.	1	2	3	4	5
11. The group process is distressing.	1	2	3	4	5
12. Group participation encourages me to excel.	1	2	3	4	5
13. Other group members usually put in more effort than I do.	1	2	3	4	5
14. Words to describe my group experiences are:					

\*Amended Values Teams Survey

they have *learned to effectively solve problems in a group* while eight students *agree* they learned effective problem-solving. Similarly, nine respondents *agree* and seven respondents *strongly agree* that *solving those problems in a group is an effective way to learn*. Levine et al. (2004) remark that problem-solving is an area of development and growth in small groups similar to areas of team learning.

Ten respondents *agree* that *working in teams in class is productive and efficient*, while nine *agree* that *solving problems in groups leads to better decisions than solving problems alone*. It is also important to note that ten of the students neither agree nor disagree that *group decisions are often better than individual decisions*. In other words half the student respondents reported group decisions may or may not be better than those decisions made individually but those group decisions may not necessarily be problematic; when the decision becomes an issue of problem-solving then this decision is best made in a group versus alone.

There were five supplemental questions, four with Likert scales and one question providing descriptive narrative data. From the Likert responses, a majority of students responded neutrally, neither agreeing nor disagreeing, when asked whether *the group process was distressing* and whether *they were encouraged to excel as a result of group participation*. The remaining two Likert questions have majority responses at opposing spectrums. When students considered whether volunteering to lead groups is important five respondents *agree* and six respondents *strongly agree*. As students reflected on whether *other group members put in more effort than themselves*, the results showed that nine *disagree* and seven *strongly disagree*. This demonstrates that the respondents believe that they themselves are working hard.

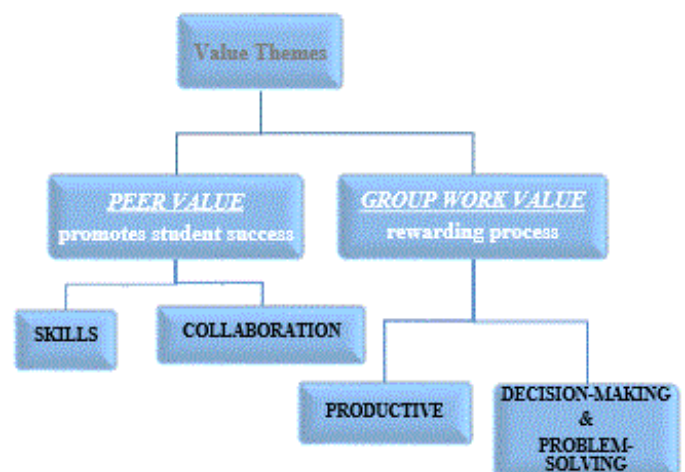
When asked to *provide a descriptive response regarding the small group experience* a variety of themes emerged. This qualitative research question asked the students to provide words that describe the group experience for them. Respondents utilized both isolated words as well as complete sentence descriptors, and five of 20 respondents did

not provide a response. It is important to note that the single most utilized term was *stressful*, with five respondents using this descriptor. However, nine individual responses included terminology categorizing an emerging theme of positive/rewarding in their inclusion of words/descriptions such as *valuable* and *productive*. This supports the literature findings that “Positive changes in individual behavior, particularly in confidence, attitude, and the willingness to speak and express themselves in front of others, were witnessed in the majority of students” (Crites & McKenna, n.d.). This is the largest numerical agreement amongst the respondents for the descriptive question. Therefore, the majority of respondents recognized their participation in the group project as rewarding and positive.

Other positive descriptions from the respondents about the group experience include; “it is a growing experience,” “it uses the experience of others to improve content understanding,” “it requires hard work,” “it uses teamwork,” “communication is needed,” “it is time restrictive,” “individuals host different work ethics,” “there is some discomfort with grades dependent upon the contribution of others,” and “group work requires like-minds and each person to contribute.”

Evaluating the respondents’ results supports the emergence of two value themes, “*peer value*” and “*group work value*,” appropriately referred to as the Emerging Values Model (EV) (see Figure I). “*Peer value*” themes reflect relationships,

Figure I. Emerging Peer and Group Work Value Themes





behaviors that are directly affected by peers, and outcomes related to peer influences and their level of importance. “*Group work value*” themes reflect the worthiness, success, or failure of the active engagement process of teamwork.

### **Emerging Values Model (EV)**

In the “*peer value*” theme of student success two categories emerged to support the theme. Students overwhelmingly confirm category *1-Collaboration* is valuable because it is necessary for student success, as revealed in results from the Likert scale research questions 1, 4 and 13; and that category *2-Skills* is important to help students initiate self-control for individual success as revealed in question numbers 3 and 10.

In the “*peer value*” theme, category *1-Collaboration* reflects questions 1, 4 and 13. Question number 1, reflects how the individual student is impacted. Students were asked about their *ability to collaborate with peers as a necessity to be a successful student*. All students responded in agreement; thirteen *strongly agreed* and seven *agreed*. In question number 4, 80% of students recognized the necessity to *collaborate with peers*; nine students *agree* that *collaboration with their peers will aid them in becoming a better student* and an additional seven students selected *strongly agree*, while no students disagreed. Question 13 reflects a similar percentage with nine students *disagreeing* and seven students *strongly disagreeing* whether *other group members put in more effort than themselves*. This demonstrates that the respondents believe that they themselves are working hard.

Also supporting the “*peer value*” theme is category *2-Skills*; questions 3 and 10 create this category. Question 3 responses show that 95% of the respondents acknowledged that their *ability to work with peers is a valuable skill*; ten *strongly agreed* while an additional nine respondents *agreed* with the statement. Category *2-Skills* is an area where individual initiative is required, and on question 10 students confirm that *it is important to volunteer for group leadership*; five selected *agree* and six *strongly agree*.

In the “*group work value*” theme (see Figure 1) of rewarding processes, two categories emerged, category *3-Productive* and category *4-Decision-making and Problem-solving*. In category *3-Productive*, for question 2, *it is a waste of time to work in groups*, students were clear in their responses with eight *disagreeing* and four *strongly disagreeing*. According to the responses for question 7, *working in teams in class is productive and efficient*, 50% of students agree.

In category *4-Problem-solving and Decision-making*, the responses to question 5, *solving problems in a group is an effective practice that the student has learned*, overwhelmingly support the statement with ten students *strongly agreeing* and eight *agreeing*. Similar support and agreement is demonstrated in the responses to question 6, *solving problems in a group is an effective way to learn*, where nine students *agree* and seven students *strongly agree*. On question 9, *solving problems in groups leads to better decisions than solving problems alone*, 50% of the students are in agreement.

### **Limitations**

Although student respondents seem to have an overall consensus about their values surrounding the small group process, there is also the possibility that other factors influenced students’ responses. The survey was administered on the last course day and at the conclusion of an exhaustive and major group presentation that was a significant part of the course grade. Although these students had recent experiences working in groups, the circumstances may have resulted in some students wanting to complete the survey as hurriedly as possible.

The students in this study were at different levels in their graduate program and those who were approaching graduation in one week may have had a different outlook than those who anticipated returning to the classroom the next semester. Graduating and continuing students may have had different experiences entering the graduate program. Some of the students majored in social work as undergraduates and other students were from different disciplines, resulting in a degree of exposure that

was different. The same is true for their current program status, as some students were at the conclusion of their practicum placement and others were just beginning this hands-on experience.

The group work hands-on exposure differences extend into what type of placement students had worked, some of the field placements being more clinical than others. Some working students as well as those with internship placements might have actually facilitated client group work. At this level some students may have participated in small group work with a sense of expectancy based on their expertise.

With the completion of the survey and the analysis of the results, it was concluded that some of the responses were directly related to the students' own interpretation as a result of their outside experiences. During the verbal instructions, prior to the completion of the survey, students were not instructed to limit their answers to their current graduate class group work experiences. Therefore, students may have drawn their conclusions from any group work, including those that were not in the collegiate environment. It is important to acknowledge, in the group work value themes, the questions do not specify if the individual has been transformed as a result of the group work process experience in the class.

## **Discussion**

"Peer value" and "group work value" themes contain categories that can be dissected and analyzed from varying entry points and re-categorized into adjoining areas. This simply means that there is a high probability that there is an interdependence amongst the values of group work. The data is clear on the benefits of student group work. It promotes student success and is a rewarding process. The student responses from this value group assessment indicate that students agree that group work promotes student success and is a rewarding process, as evidenced by student statements such as "it is a growing experience."

The "group work value" theme connotes a rewarding experience as a result of participating in

the group work process. The "peer value" theme contributes to student success which is an individual accomplishment. The "peer value" theme responses show that students recognize what is required for successful group work in the classroom. Students' acknowledgments support the notion that exercising collaborative skills will aid the student as a professional with their ability to develop and maintain effective relationships (D'Agostino, 2013). Students overwhelmingly articulated value and aligned the importance of collaboration as a necessary skill for success. In the "group work value" theme, students strongly endorse the idea that group work is worthwhile. Students *disagreed* that it was a waste of time to work in groups. Furthermore, students acknowledged that working in teams in class was productive; that solving problems is an effective way to learn; and that solving problems in groups leads to better decisions.

Knowing that students recognize the value and importance of group work supports the concept that it is an advantage for instruction in higher education. This group work value study assures professors that students will reap benefits from group work that exceed the articulation of the assignment. Students report an improvement in student development.

The results of this group work value research will also provide assistance to student organizations within the campus environment. Students acknowledged in their responses that *decisions made in the group work process were better than individual decisions*. This further supports the value of participation in student organizations. The results of this study are also relevant to the many schools of social work scholastic academies. The Council on Social Work Education (CSWE) provides educational standards to accredit social work programs (CSWE, 2008). The CSWE educational competencies for curriculum include two policy areas that this study supports: Educational Policy 2.1.3—Apply critical thinking to inform and communicate professional judgments, and Educational Policy 2.1.10(a)–(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities (CSWE, 2008).

The application of critical thinking in Educational Policy 2.1.3 can be served through this study because the skills required for critical thinking necessitate problem-solving (“*group work*” value theme category 4-*Problem-solving and Decision-making*). Students indicate that they have learned problem-solving through the group process. The application of engagement in Educational Policy 2.1.10 (a) can also be served through this study since engagement requires the use of interpersonal skills, as addressed by “*peer value*” theme category 1-*Collaboration* and category 2-*Skills*. Students reported that working in a group improves their achievement and working with their peers is an important skill. The student-acknowledged value themes can be incorporated into course learning goals in order to successfully meet the CSWE guidelines.

### **Implications**

Social Work educators should prepare students for effective group work assignments by emphasizing the *values* reported as gains from group involvement. This parallels the recommendation provided by participants, to inform students about the benefits of group work to encourage their participation (Sweifach & Heft-LaPorte, 2008).

Although some students complain that group assignments are distressing, the overwhelming emerging values specifically related to peers and group work demonstrate the benefits of group assignments. The larger implications for gains in employment skills are also apparent. Decision-making and problem-solving skills are critical. The professional skills students gained from involvement (as measured by participants) can be used to promote active student participation, and collaboration (*peer value*) can be incorporated within the group assignment to enhance understanding and skill development.

The *peer value* and *group work value* themes that emerged from the assessment, have presented an entirely new vision to process the values inherent in academic group work. With this new categorization, shown in the EV model, instructors have

the opportunity to prepare students for their practicum field placements and their career placements in social work with a more strategic and encouraging understanding. The forethought and sharing of the process by students lends worth to how the actual work of the group will benefit the students’ self-growth.

The peer value themes demonstrate that students will not only fulfill the requirements of their course, but will also improve their ability to be successful and valuable group members through collaboration and peer leadership. Students should be intentionally informed about these benefits to gain their positive, proactive participation in the group process and group assignments.

The emerging values model (EV) corresponds with the curriculum and necessary skills for professional social workers. The themes in the EV suggests participants are making gains in *peer value* and *group work value* skills. As social networking increases and continues to influence generations, this *peer value* theme will contribute an essential element to the group assignment. Professional social workers are expected to be effective, competent group facilitators (CSWE, 2008) and the results of this study suggest that group assignments enhance these abilities as well as encourage better appreciation (*value*) in participating students.

The small group assignment process is *productive* and *rewarding* through an *effective learning environment* that *enhances student decision-making and problem-solving abilities*. These areas, along with the necessary *stress* for productivity, encompass the *group value theme*. Students need to be informed of the benefits beyond the course requirements, because their informed approach to the process may be welcoming and anticipatory of the extensive rewards received from the group work.

### **Future Research**

The experience of small group work was found to be both rewarding and stressful according to the respondents. The most utilized term reported for the exploratory research question regarding group experience was “stressful.” The exploratory

question was asked to gain a descriptive insight from students that was not provided in the original VTS. An interesting follow-up question for future research would investigate whether the respondents believed that in order for the experience to be valuable, it also needs to be stressful. With comparisons to life or academic rewards it is logical to surmise that certain amounts of stress are required for successful gains.

Another succeeding study could advance from graduate students to undergraduates; this small group research could measure the interdependency of the *peer value* theme, and its relationship to student success, with the *group work value* theme, and its relationship to rewarding progress.

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## Delegate Assembly Approves Revisions to the *NASW Code of Ethics*

On Friday, August 4, 2017, the Delegate Assembly of the National Association of Social Workers (NASW) approved the most substantive revision to the *NASW Code of Ethics* since 1996. After careful and charged deliberation, the Delegate Assembly voted to accept proposed revisions to the *Code* that focused largely on the use of technology and the implications for ethical practice.

The *NASW Code of Ethics* continues to be the most accepted standard for social work ethical practice worldwide. With emergent technological advances over the last two decades, the profession could not ignore the necessity for more clarity around the complex implications of new forms of communication and relationship building through technology. As such, in September 2015 an *NASW Code of Ethics* Review Task Force was appointed by the NASW president and approved by the NASW Board of Directors.

### **A SPECIAL THANK YOU TO TASK FORCE CHAIR:**

- » Allan Barsky, JD, MSW, PhD, National Ethics Committee (past chair)

### **Task Force Members:**

- » David Barry, PhD, National Ethics Committee (past chair)
- » Luis Machuca, MSW
- » Frederic Reamer, PhD
- » Kim Strom-Gottfried, PhD
- » Bo Walker, MSW, LCSW, National Ethics Committee
- » Dawn Hobdy, MSW, LICSW, director, NASW Office of Ethics and Professional Review

### **NASW Staff Contributors:**

- » Andrea Murray, MSW, LICSW, senior ethics associate
- » Anne B. Camper, JD, MBA, NASW general counsel
- » Carolyn Polowy, JD, former NASW general counsel

The Task Force was charged with examining the current *Code of Ethics* through the lens of specific ethical considerations when using various forms of technology. In September 2015, they embarked on a year-long process that involved studying emerging standards in other professions and examining relevant professional literature, such as the Association of Social Work Boards' (2015) *Model Regulatory Standards for Technology and Social Work Practice*. In addition, Task Force members considered the technology practice standards that were concurrently being developed by a national task force commissioned by NASW, Council on Social Work Education, Clinical Social Work Association, and Association of Social Work Boards. A year later the proposed amendments were presented to the NASW membership for review, and many member comments were incorporated prior to finalization.

The approved *Code of Ethics* revisions reflect a collaborative and inclusive effort that drew from a diverse cross-section of the profession. The August 4 approval by the Delegate Assembly marks significant progress in the profession's ability to respond to our ever-changing practice environment.

The new version of the *NASW Code of Ethics* comes into effect January 1, 2018. In the meantime, training and technical assistance opportunities will be made available through the Office of Ethics and Professional Review and the NASW website.

Our sincere appreciation again to the task force, NASW staff, and committed members across the globe who contributed to this momentous accomplishment.

# Book Review

Gambrill, E. & Gibbs, L. (2017). *Critical thinking for helping professionals: A skills-based workbook (4th ed.)*, NY: Oxford University Press.

Reviewed by Todd Palmer, MSW  
Brescia University

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Dr. Eileen Gambrill is a Professor at the Graduate School and Emerita Hutto-Patterson Professor of Child and Family Studies at the University of California at Berkeley and has published multiple articles and books during her career. Topics of her publications include evidence-based practice, critical thinking, and ethics.

Dr. Leonard Gibbs was a Professor Emeritus of Social Work at University of Wisconsin – Eau Claire until he passed away in 2008. During his career, he published multiple books and articles on evidenced-based practice.

*Critical Thinking for Helping Professionals* provides a thorough exploration of skills designed to develop critical thinking for professionals in the helping profession, such as physicians, nurses and social workers. Beginning with an exhaustive overview of topics exploring critical thinking, the authors discuss at length how critical thinking affects the decision-making processes related to belief systems, interventions, problem-solving and advocacy.

The authors encourage the reader to develop a mindset of questioning claims made by authors, corporations, advertising and research. While some claims made in these instances may be valid, the reader is reminded to be cautious about accepting them outright. A healthy level of skepticism will help professionals determine the authenticity of the information being promoted.

The use of critical thinking, paired with a skeptical approach to information being presented, allows professionals to improve their decision-making skills. The authors encourage the reader to critically think about and question the information being provided. Once the professional has thoroughly reviewed the information, decisions are more likely to be based on reliable and valid evidence rather than false or biased information.

The authors encourage the use of these skills when appraising research or reviewing their own practice. Use of critical thinking in the context of research and evaluation of practice will assist the professional in determining the authenticity of the research gathered or the efficacy of their practice. Consistent use of these skills minimizes the potential of using invalid research information and ineffective practice techniques.

Each section incorporates extensive knowledge on the subject. However, the author does not stop there. Multiple exercises are included in each area to help the reader develop and practice skills to improve critical thinking, questioning and decision-making. The exercises offered are thought provoking and will challenge the reader to address biases, improve research evaluation and increase practice efficacy.

Utilization of the exercises contained in the book will reinforce social work values, as well as ethical behavior. Not only will this affect social work professionals, other helping professionals will benefit from challenging their own beliefs and values.

Book review: *Critical thinking for helping professionals: A skills-based workbook (4th ed.)*

While the book is full of information and exercises to benefit the reader, some may be overwhelmed with the challenges to conventional thinking early in the book. In addition, the number of exercises may be too numerous for some to sift through. However, with some patience and perseverance any professional can benefit from the challenges and exercises presented.



# Book Review

Fogel, S. J., Barkdull, C., & Weber, B. A., Eds. (2016). *Environmental justice: An issue for social work education and practice*. New York: Taylor and Francis, Routledge

Reviewed by Charles Garvin, Ph.D., CSW  
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It is very appropriate to review this book now as, at this writing, we are in the midst of some of the most extreme examples of environmental disasters. These epitomize environmental injustice for the people suffering from the major hurricanes affecting Houston, Texas, Florida, and Puerto Rico. While everyone in these areas is suffering, it has most strongly affected poorer people in low lying areas with fragile housing and the lack of means to secure alternative housing and flood insurance.

This book is devoted to the propositions that environmental justice should be a major topic in social work practice and education and that all social work students should be educated about environmental justice. Students should learn how to recognize the presence of environmental injustice and how to take action with the relevant systems to combat such injustice.

This topic is relevant to social work ethics and values. Social workers, as strongly asserted in this book, should view professional actions that neglect environmental justice as unethical, and the social work profession should place a high value on sustainable social development and the provision of adequate food, housing, health care, income, education, and so forth to everyone.

The editors of this book are faculty at the University of South Florida (Fogel), and the University of North Dakota (Barkdull & Weber). As the editors state in their introduction, environmental justice involves confronting power and privilege. They

state, “The wealthiest populations are the greatest consumers of the products and activities damaging to the global environment, yet the impoverished are most likely to suffer the consequences” (p. xiii). As they also point out, the United States is the world’s top emitter of carbon dioxide, and the burden falls most heavily on those “least likely to either afford the costs or recover from the effects” (p. xiii). Thus, the issue of environmental justice has global implications.

This book is an edited volume with ten chapters that analyze many aspects of this issue. A person-in-environment perspective has too often referred to the social environment to the exclusion of all the other aspects of the environment. Chapter 1 helps the reader to expand a person-in-environment perspective to incorporate the physical environment. Chapters 2, 3, and 4 discuss how this perspective should be incorporated in social work curricula, and the latter chapter has case studies that illustrate this with respect to the Ogoni people of Nigeria, the Roma people of such countries as Romania and Hungary, and people living in a blighted community of Boston. Chapter 5 presents the essentials of a “green social work” curriculum. A useful teaching technique referred to as a “mind map” is described in this chapter. Chapter 6 deals specifically with the topic of “food justice.” Chapters 7 and 9 are especially instructive as they report on environmental justice as experienced in Kenya and in Australia. Chapter 8 recommends changes that should be made in social work curricula so that environmental justice is an essential part of social work education.

The final chapter (10) offers a further analysis of environmental justice as linked to an ecological perspective and economic growth. This chapter also discusses the concept of *reflexivity* as a combination of sensitivity, self-observation, and self-presentation of the social worker.

While this book contains many useful citations to other presentations of environmental justice, I found it an “eye opener” for me as the authors explore so many aspects of this topic. It convinced me well beyond where I was already of the extreme importance of this topic. I recommend this book as a basic text that should be read by all social workers, social work professors, and students.

A limitation I see in the chapters is that while it is clear how environmental justice can be easily seen as one of the most important topics in community organization, agency management, and the creation of social policy, it does not deal sufficiently with social workers serving individuals, families and groups and how they can understand the role of the physical environment in the problems on such individuals and entities. How this can and should be introduced in so-called direct practice is not sufficiently dealt with beyond the recipients of direct practice supported in their involvement in social action - although it is incumbent on the worker to become so involved. These service recipients may be helped, however, to understand the impact of their environments on themselves rather than engaging in dysfunctional self-blame.

The book will be appropriate for all levels of social work education as well as for practitioners and teachers.

## Book Review

Dion, M., Weisstub, D., & Richet, J. (Eds.). (2016). *Financial crimes: Psychological, technological, and ethical issues*. Switzerland: Springer International Publishing AG.

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This 68th volume in the International Library of Ethics, Law, and the New Medicine series is edited by three academics, two Canadian and one French, but their full credentials are not provided in the book. Like other books in this series, this one attempts to take an international and interdisciplinary focus on the subject—in this case the subject is white collar crime. The 31 contributors have provided 17 chapters grouped into four sections with brief introductory and concluding sections penned by the editors. As is common in edited books, the tone and approach vary substantially between chapters with little attention to providing a logical sequence or connection between chapters. Endnotes are provided for chapters indicating clearly the independent development of each contribution. Accordingly, the typical reader will not be approaching this book as a whole, but focusing narrowly on individual chapters that appear relevant at the time. This book is clearly intended for library collections and will be useful to criminologists and social scientists in a forensic field.

The first section of four chapters defines financial crimes from a broad perspective without any significant attention to white collar crime itself and suggests some policy implications to restrict this type of criminal activity. The first reports on the high corruption levels perceived by respondents in Greece and Cyprus in comparison with other European nations. Policy recommendations are suggested to improve the deficits in the rule of law, government accountability, and government

transparency in both nations. The second and third chapters are secondary data analyses predicting tax evasion (an example of a financial crime) using World Economic Forum data and cross-national information sharing to reduce tax evasion using data from Sweden. The fourth chapter promotes a return to the use of letters of marque in international trade to provide a control mechanism to reduce money laundering and terrorist financing through financial institutions.

The four chapters comprising the second section of the book are more strongly focused on white collar crime and may be of greater interest to some social workers as it contains a degree of psychological inquiry into those who commit financial crimes (Chapter Five), those who are susceptible to financial crime victimization (Chapters Six and Seven). This section concludes with a good summary of the various theories proposed to explain white collar crime (Chapter Eight). As literature reviews, these chapters do have value, but the empirical evidence underlying the psychological processes proposed is weak, the predictive capability of forensic psychiatry lacking, and the assertion that susceptibility increases with financial desperation and cognitive deficiencies is hardly surprising.

The third section takes a sociological turn as the focus is on organizational contexts for financial crimes. The ninth chapter summarizes the internal and external forces that contribute to an environment conducive to financial crimes with special attention to incentives, manipulation through communication

distortion, misuse of authority, and normative peer pressure. This chapter would be a good primer for young adults entering the workforce as it provides a useful framework for understanding some of the more subtle influences at work in every workplace. Chapter Ten is another secondary data analysis predicting the muting of bribery practices in several developing countries when corporations install independent boards of directors. The relevance of this chapter to developed countries is questionable. The eleventh chapter takes a decidedly theological turn as it defines institutional corruption as structural sin and makes a strong appeal for individual integrity when facing environmental forces of corruption. The focus is on bribery, and this chapter, along with the next, argue that there can be no compromising with structural sin (Chapter Eleven) or condoning of any mythological grey areas that may endorse bribes (Chapter Twelve). Combined, these two chapters make what is essentially a Christian argument and an ethical argument (ala Aristotle and Kant) against any form of bribery.

The final section purports to be about the technological influence on financial crimes, but begins with an interesting attempt to persuade the reader that evidence-based profiling in forensic psychology is the future means of addressing fraud. This is the most heavily researched chapter in the book based on the length of the reference list, but it does seem to contradict the conclusions of Chapter Five that is best understood as suggesting that psychological profiles are simply not possible. The remaining chapters do focus on the challenges of controlling transnational financial crimes due to globalization and technology (Chapter Fourteen), how technology is enabling the illicit drug trade (Chapter Fifteen) and how hopeless it is to try and sustain drug prohibition, and two chapters (Chapters Sixteen and Seventeen) on the virtually impossible task of monitoring money laundering because of technology, primarily due to the conflictual responsibilities of financial institutions tasked with protecting client privacy while reporting suspicious activity. Perversely, financial institutions over-report and law enforcement is overwhelmed

with trivia, which alone hampers meaningful data mining.

I simply cannot imagine a reader who would choose to read this book from cover-to-cover because of the wide variability in subject matter among the chapters. Its primary value lies in the literature reviews that many of the chapters provide because a good summary of the research in any area may always serve a useful function. The discussions of the organizational context for financial crimes in the third section are also worthy of review and reflection. On the other hand, the regression chapters explaining the use of secondary data could have been profitably omitted and redirected to the peer review literature where the quality of the work would have been enhanced by rigorous peer review.

The subtitle suggests that this book understands financial crimes from three discrete perspectives. My assessment of the psychological view is that the research is weak, inconclusive, and mired in dated psychological theories of personality development and disorders. The technological viewpoints do not appear to be written by technology experts as most of the conclusions and suggestions are about non-technological solutions to the problems technology has made possible. The ethical view is really only addressed at length in two chapters where an equivalency of criminal actions with unethical, immoral, and even sinful behavior is presumed. There are only three pages in the book that address the most pressing question about white collar crime, and that is, why is white collar crime treated with such lax attention by law enforcement and such light sentences by the courts? Here lies a social justice issue that should have been paramount in this book, and it is nearly neglected.

## Book Review

Ross, L., & Solinger, R. (2017). *Reproductive justice: An introduction (Vol. 1)*. Oakland, CA: University of California Press.

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Loretta Ross is currently a visiting associate professor at Hampshire College. She is a cofounder of SisterSong, an organization focused on improving reproductive rights for marginalized women. Ross has a 40-year history as a human rights activist and played a key role in coining the term, “reproductive justice.” Rickie Solinger is a historian and curator who has 30 years of experience writing scholarly articles and books about reproductive and welfare politics. She is a founding member of Women United for Justice, Community and Family, a grassroots organization in Boulder, CO working to improve the welfare system for low-income women. *Reproductive Justice: An Introduction* is the first book the pair has written together.

Ross and Solinger’s work should be a compulsory read for social workers and all people working to promote reproductive rights. The book details the troubled history of the movement for reproductive justice in America and ultimately reframes the argument for reproductive rights from one solely based on individual choice to one that considers broader, community implications. Powerful storytelling highlights the errors of the former myopic approach and the impact of neoliberalism and institutionalized racism on the movement. The authors’ clearly articulated perspective provides context and richness to the current, limited focus on abortion rights and outlines future directions for an all-inclusive reproductive justice activism that utilizes a human rights framework. The authors’ approach makes it manageable to see the

inseparability between the fight for reproductive justice and challenging mainstream ideologies and systems that serve to perpetuate all types of oppression. Social workers invested in reproductive justice for all will be compelled to recognize that their progress absolutely depends upon progress made in larger anti-neoliberalism and anti-racist movements like Black Lives Matter.

Chapter One, “A Reproductive Justice History,” starts with a comprehensive definition of reproductive justice created by a group of Black female activists that includes the right to not have children; the right to have children; and the right to parent children in a safe, supportive environment. In providing a detailed history of the rise of the reproductive justice movement, the authors emphasize the importance of context and resources in supporting these rights. The nation’s socio-political culture and dominant beliefs about class, disability, and race impact which groups of people benefit from reproductive rights’ protections and which groups are denied them.

The foundational chapter tells the story of division between races within the fight for reproductive rights; White women, particularly those of middle-and-upper-class, have not understood the unique struggles of Women of Color and instead capitalized on racism in attempts to get their own needs met. White activists initially defined reproductive rights as limited to birth control and abortion access. Ignoring the context in which the state views White reproduction as most valuable,

the resulting policies have harmed women from all races, but disproportionately affect women of color. Chapter One concludes by detailing the more inclusive definition of reproductive justice from the perspective of Women of Color advocates: It is a human right to have children as much as it is to prevent conception. Without a basic recognition of the human right of bodily self-determination, reproductive justice cannot be achieved. Equally important, however, is that basic human rights (e.g. right to health-care, right to education, right to a living wage, etc.) are pre-requisites for achieving reproductive justice.

Chapter Two, “Reproductive Justice in the Twenty-First Century” builds on the discourse for focusing efforts toward a human rights based movement which takes a more holistic approach to examining problems. This is informed by knowledge of intersectionality and its synergistic effects on the oppression of women:

For example, a Dominican homeless transwoman may be simultaneously affected by poverty, gentrification, transphobia, sexism, racism, xenophobia (that is, hatred of immigrants). These oppressive forces do not emerge or act independently of each other; they depend on each other and they gain strength from each other. . . a homeless woman’s problems will not be effectively addressed, for example, by giving her a bed in a temporary shelter or even permanent housing. If we use a holistic, intersectional approach, we ask, why is this woman homeless in the first place? We attempt to address the multiple root causes of her situation and not simply pay attention to the immediate, presenting symptoms. (Ross & Solinger, p. 75)

An understanding of intersectionality is required to appreciate the importance of securing all human rights because reproductive rights cannot stand alone. A realization of concrete basic human rights is required to achieve more abstract notions of social, economic, and reproductive justice.

Furthermore, the authors explain how America’s neoliberalism is in direct opposition to human rights culture. Neoliberalism is capitalistic and individualistic focused, and promotes racial, class, and gender division; whereas human rights requires attention to community and solidarity. Neoliberalism and White supremacy are two interwoven concepts that need increased consideration in the pursuit of a broader movement toward reproductive justice to bring people of various backgrounds together.

In chapters three and four, the authors proceed to highlight the need for individuals and groups to build coalitions to demand social change and human rights; these rights cannot be ensured via policy and federal and/or state laws alone. Today, women are often caught in a choice between human rights: “to pay for contraceptives [women] have to go hungry. . . Either they eat or buy birth control, but not both.” (p. 147). Neoliberalism asserts that each person, not the government, is responsible for its own reproductive health and economic well-being. However, a human rights framework cites that both health and financial security are entitlements to be protected, realized, and enforced by not only the government, but its people.

In conclusion, the authors convincingly assert that reproductive justice issues cannot be isolated from issues of social and economic justice. The text serves as an inspiring call for social workers to join a growing and more sustainable movement for true reproductive justice, which has gradually been taken on by larger organizations like the National Organization for Women (NOW). This approach requires the unification and inclusion of people of all races, classes, ages, and gender identities, to demand the realization of human rights and to honor their indivisibility and interconnectedness. Ross and Solinger provide much evidence and hope that political activism, informed by the inclusive definition of reproductive justice, will make the most significant and lasting impact in the demand for reproductive rights and equality.

## Book Review

Callahan, A. M. (2017). *Spirituality and hospice social work*. New York, NY: Columbia University Press.

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Professor Ann Callahan is uniquely positioned to write such a book; she draws from a wealth of social work experience (20-plus years) and over 10 years of academic research focusing on the spiritual dimensions of hospice care.

For the casual, general reader, this book is probably not for you; it is not a “page-turner.” But, for the social worker, those interested in thanatology and anyone who wishes to better understand the difficulties of providing quality end-of-life care, this book represents a research-based examination of hospice from the role of the social worker with focused attention to spirituality as an integral part of quality end-of-life care. And, as the Professor Callahan (2017) points out, “it is the premise of this book that hospice social workers can engage with patients in a therapeutic relationship that enhances life meaning” (p. 39).

The “hospice movement” was established in 1967 in England by Cicely Saunders who “... was a social worker, nurse and doctor” (p. 18). From the beginning, the elements of an interdisciplinary approach for the delivery of end-of-life care was adopted with interdisciplinary teams consisting of “physician/medical director, a registered nurse, a social worker, and a spiritual caregiver” (p. 3). Eventually this movement gained traction in the United States and by 2014, there were 4,000 hospice care agencies in the United States according to the CDC National Center for Health Statistics (2017). “In 2014, 2.6 million people died in the United States, and 1.1 million received hospice care” (p. 2).

In eight, well-researched thematic chapters (e.g., Champion of Spiritual Care, Spiritual Diversity, Spiritual Needs, etc.), the author helps guide us through the complexities of providing spiritual care as an important element of end-of-life care. In this examination, the author makes the case for the essential role of the hospice social worker.

To provide an example of the research foundation of these thematic discussions, one would logically assume “spiritual diversity” would be easily defined. However, in reality, it is an extraordinarily complex topic and research shows that across disciplines one still grapples with clear, concise definitions. “Despite efforts toward integration, conceptual ambiguity has been challenging to reconcile. Upon closer examination, the concept of spirituality has been either broadly inclusive or narrow in scope, while still failing to recognize the potential fluidity of spirituality as a state of being or stage of development” (p. 42). The author goes on to point out flaws in terms of previous research methodology and observes “... the majority of research about spirituality, including palliative and hospice-care research relies on samples of the general population rather than hospice patients ... these results are further limited by small sample sizes and low response rate” (p. 42).

The book provides concise and useful figures and charts which summarize some current research and information. These should be useful references for hospice social workers. For example; the author provides a table of the “bio-psychological-spiritual

signs of spiritual suffering. Below I have abbreviated and summarized some of these signs of “spiritual suffering” from the biological, psychological, social and spiritual dimensions of care:

- Biological: panic attacks; insomnia; restlessness; decreased physical abilities; physical discomfort; worsening physical symptoms; intractable pain; crying; treatment noncompliance.
- Psychological: fear (of the unknown, of death); insecurity; nervousness; anxiety; feeling overwhelmed; hopelessness; helplessness; resignation; emptiness; depression; anger; etc.
- Social: blaming other for condition; taking pain out on others for release; loss of self (in relations to others); altered body image; forced dependency; low self-worth, etc.
- Spiritual: guilt (related to God, feelings of being punished, judged, abandoned, rejected and/or neglected by God); loss of meaning, etc. (p. 79).

The essential nature and role of hospice social workers is touched upon again and again. Hospice social workers must develop the competencies to provide and support the spiritual dimension of care and as part of the interdisciplinary team. Social workers must be integral in the design and delivery of a quality end-of-life care plan. “There are special qualities in the relationship between a hospice social worker and patients” (p. 184) and the author does an excellent job in helping the social worker understand as well as inform the general public as to the importance of social work and its role in providing spiritual care in a hospice setting.

So, beyond the obvious market for such a book, Professor Callahan provides an important service to the public in helping define and clarify the current state of hospice social work care in terms of its challenges. She makes the case for the ongoing investigation of the spiritual dimension of care through scientific-based inquiry. As hospice care will likely be in many of our futures, this book is eye-opening and informative for both hospice social workers and for consumers. Spiritual care is a critical aspect of hospice; many challenges remain. Through research and increasing experience, we can make important changes to improve this aspect of quality end-of-life care.

## References

- CDC National Center for Health Statistics. (2017). Retrieved from <https://www.cdc.gov/nchs/fastats/hospice-care.htm>



## Book Review

Bodenheimer, D. (2017). *On clinical social work: Meditations and truths from the field*. Harrisburg: PA. The New Social Worker Press.

Reviewed by Elaine Spencer, MSW, RSW  
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“Dr. Danna Bodenheimer [is an] LCSW [Pennsylvania], master therapist, educator and supervisor” (foreword). *On Clinical Social Work: Meditations and Truths from the Field*, Dr. Bodenheimer’s second book, is a 53-chapter, 225-page gallop over a Grand Canyon-wide range of topics, from “Saying No to Gratitude and Forgiveness” through “On the Orlando Mass Shootings and Beyond” to “Scapegoats and the Social Work Workplace” and “Boundaries versus the Super Ego.” The book is organized into nine parts, showcasing Dr. Bodenheimer’s occasionally deeply moving musings on:

- The field and its stressors and realities
- Attachment and trauma
- Diagnosis and beyond
- Our clinical-internal worlds
- Use of theory
- Self-care
- What to do and how to do it: The world of assessment and intervention
- Demystifying dominant tropes
- Clinical social justice, we were made for this

Included in this work are photos taken by the author, as part of her self-care practice. These amateur photos lead us to the strength of the book—the author’s willingness to be vulnerable, personal, and unsure. Though some advice is clearly for new MSW students (such as the suggestions to learners

on pages 38 & 39), the bulk of the book is perhaps best read by new graduates about to set out into practice (such as Chapter 2, on negotiating salary, and Chapter 8 on starting private practice). The phrase *meditations from the field* fits well with Dr. Bodenheimer’s offering—shaped by her theoretical orientation (new order psychoanalytical with a feminist focus) and her advanced clinical experience (as the director of the Walnut Psychotherapy Centre) and her tender client focus (with some exquisite observations that made the slight slog through some chapters worthwhile for this well-seasoned clinician).

Don’t read this book if you want to thoroughly review clinical matters; like a clear sense of continuity and order; need a black or white answer; or like to see references for every utterance. Do read it if you are ready to listen to another’s rich voice of professional love of clinical social work filled with realism and hope for our world.

## Book Review

Ford, D. Y., (Ed.). (2017). *Telling our stories: Culturally different adults reflect on growing up in single-parent families*. Charlotte, NC: Information Age Publishing.

Reviewed by J. Porter Lillis, Ph.D.  
University of North Carolina at Pembroke

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In the introduction, Ford tells us her impressions of rereading the Moynihan Report (1965) five decades ago. Her response then, and the point of this collection five decades later, is that she is “professionally and personally offended” by the evaluation of the outcomes for single parent families—essentially labeling them all as “negative and hopeless” situations. She questions the national obsession with putting the focus on marriage as the curative social movement for poverty and inequality. The author tells us the intent of the collection is not to glorify single parenting, but to highlight successes, help dispel negative stigmas—and get “educators, sociologists and policy makers to listen and learn” (p. xi).

The edited book is a collection of 24 vignettes about being raised in single parent families by persons who were all “at risk,” “beat the odds,” “never gave up,” and whose caretakers decidedly refused for them to be subjugated to the assumed outcomes. The stigma of coming from a “single parent” family is a societal label, and need not be internalized or accepted is the overarching emphasis of this collection.

And that is the editor’s point, why are these the assumed outcomes? Why do we tell all persons in these categories that they are going to be another statistic? The vignettes are by both males and females, whose overriding themes include resiliency, tenacity, and the importance of the “village,” be it immediate or extended family, school, or the community.

This book does not provide a roadmap for escaping poverty or the other societal ills correlated with being from a single parent family. Many of the stories of their childhoods cite or reference journal articles and other readings—all of the authors are in academia as administrators and/or faculty. This is a collection of success stories about beating the odds. Great credit goes to the caregivers and the children themselves (now adults)—these stories can offer hope and courage and highlight the importance of hard work and “grit.”

# Forum: A poem .....BUT IT'S MY JOB

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## (1)

**\*\*\*I'm a 27 year old Secretary for a large Tobacco company, and I generate contracts for subsidiary agencies that work with our organization.**

“Dangerous” and “Harmful” are words in my mind  
In selling our product to those who seem blind  
  
I work very hard to just make a living  
But get very frightened for cancer we're giving  
  
The warnings are something people don't “read”  
They smoke up the cigarettes with passion and deed  
  
How long can I continue to stay in this role?  
With all of the conflict in my mind and soul  
  
Maybe someday I'll just walk out the gate  
But I've got to start working.....it's quarter to 8

## (2)

**\*\*\*I'm a 36 year old Engineer in a Munitions factory, calculating ballistic statistics**

for large weapons systems.  
My work is in math, statistics the path  
But at the end of the day, I sometimes feel wrath  
  
The Death machine is somebody's dream  
I have a good job, but what does it mean  
  
The reason is killing, if soldiers are willing  
I'm part of the process, my mind is for tilling  
  
Am I too, to blame in playing this game  
The final product must also bear my name  
  
Should I just step up and put down the cup  
My promotion is pending, and salary goes up

(3)

**\*\*\*I'm a 23 year old movie Actor, working "freelance"  
for several Pornographic film companies.**

"Crude, profane," and "dirty" some say  
For the process I go through in earning my pay

I sometimes feel discomfort, for sure  
In doing something that doesn't feel pure

"Degrading for women" and "sadistic for men"  
The bed and the couch, I may make Devil's pen

I debate in my mind if it's wrong or it's right  
And when it's all over, I still feel uptight

I didn't go to College, my life can't go far  
But doing these movies will make me a Star

(4)

**\*\*\*I'm a 57 year old retail Salesperson, working in a large mall department store.**

I feel I'm helping the public for sure  
If dressing up nice is some kind of cure

The problem I see is in all of the cost  
The "value" to patron, is very soon lost

The clothing is made in a factory, off site  
Where workers are cheated, because of their plight

The margin for profit is way off the charts  
As everyone piles cheap-made stuff in their carts

I sure need this job to help pay the rent  
And I still get "discounted" at 20 percent