

# Contents

Editorial: What is socialism? ..... 1  
*Stephen M. Marson, Ph.D., Editor*

LETTERS TO THE EDITOR..... 4

Changes at JSWVE and THANK YOU ..... 7  
*Stephen M. Marson, Editor, and Laura Gibson, Book Review Editor*

ANNOUNCEMENTS..... 8

## Feature Articles

Thinking Critically About Self-Determination: A Literature Review..... 9  
*Ginneh L. Akbar, DSW*

The Ethical Conflicts of Working in Solitary Confinement..... 18  
*Ali Winters, DSW, LCSW*

Collision: An Opportunity for Growth? Māori social workers’ collision of their personal, professional, and cultural worlds and the values and ethical challenges within this experience ..... 28  
*Andrea Watson, MSW (Ph.D. candidate)*

Flexner’s Thesis Was Prescient: Ethical Practices for Social Workers “In the Trenches” Requires Forensic Knowledge ..... 40  
*Dana E. Prescott, JD, Ph.D.*

The Unlikely Altruist: Practices of Exclusion in Volunteer-Based Social Work ..... 53  
*Lærke Bonnesen, Ph.D. Fellow*

Truth, Reconciliation, and Social Work: A Critical Pathway to Social Justice and Anti-oppressive Practice..... 70  
*Kirsten Havig and Lisa Byers*

The Ethics of Financial Social Work ..... 81  
*Elena Delavega, Ph.D., and Karina Reyes Cordero, Ph.D.*

## Book Reviews

Barsky, A. E. (2019). *Ethics and values in social work: An integrated approach for a comprehensive curriculum (2nd ed.)*. New York: Oxford University Press. .... 92  
*Reviewed by Lisa Reece, Ph.D.*

Goldkind, L., Wolf, L., & Freddolino, P. P. (2019). *Digital social work: Tools for practice with individuals, organizations and communities*. New York, NY: Oxford University Press. .... 94  
*Reviewed by Ottis Murray, Ed.D.*

Øland, T. (2019). *Welfare work with immigrants and refugees in a social democratic welfare state*. New York, NY: Routledge. .... 95  
*Reviewed by Peter A. Kindle, Ph.D, CPA, LMSW*

Pyles, L. (2018). *Healing justice: Holistic self-care for change makers*. New York, NY: Oxford University Press. .... 97  
*Reviewed by J Porter Lillis, Ph.D.*

Sangiovanni, A. (2017). <i>Humanity without dignity: Moral equality, respect, and human rights</i> . Cambridge, MA: Harvard University Press. ....	98
	Reviewed by Peter A. Kindle, Ph.D, CPA, LMSW
Shapira, O. (2018). <i>A theory of mediators' ethics: Foundation, rationale, and application</i> . Cambridge, UK: Cambridge University Press. ....	100
	Reviewed by Peggy Proudfoot Harman, Ph.D., MSW
Sumser, B., Leimena, M., & Altilio, T. (Eds.). (2019). <i>Palliative care: A guide for health social workers</i> . New York, NY: Oxford University Press. ....	102
	Reviewed by Ann M. Callahan, Ph.D., LCSW
Ukockis, G. (2019). <i>Misogyny: The new activism</i> . New York, NY: Oxford University Press. ....	104
	Reviewed by MaryAnn Thrush, Ph.D., MSW
Zeiger, S. J. (2019). <i>Alive after academia: Post-career reflections of social work educators</i> . New York, NY: Oxford University Press.....	106
	Reviewed by Mo Cuevas, Ph.D., LCSW

# Editorial: What is socialism?

Stephen M. Marson, Ph.D., Editor

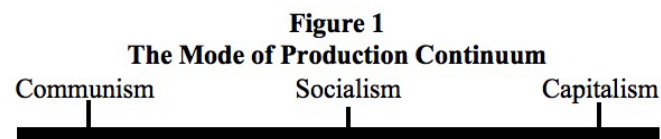
*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)

Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

I have been distressed from reading Facebook posts in which writers stress the evil that emerges from socialism. In several different posts, authors have used Nazi Germany as an example of socialism. Germany was much more of a capitalistic state. In fact, Hitler *hated* communism and socialism and believed these were instruments of the Jews. The question must be “What is socialism?”

Two characteristics exist for classifying economies (or “modes of production”). First, one must realize that socialism is not a discrete entity. Modes of production exist on a continuum. Currently, socialism falls between capitalism and communism. Thus, one would see a continuum as illustrated in Figure 1:



By employing Figure 1, we can immediately understand that some countries are more capitalistic than others; some are more socialistic than others; some are more communistic than others.

How can a person make such a statement? The answer lies within our second characteristic known as “control over the means of production.” By control over the means of production, we mean the degree to which a government regulates the economy. A government that nationalizes industry and sets strict standards for workers would fall in the left side of the continuum—communism. If a government offers no regulations to dictate the direction of the economy, it would fall on the right side of the continuum—capitalism.

In the United States, President Trump believes that our government should not control the means of production. He stresses that control over the production of goods and services should be *self-regulated* by those who own business enterprises. Businesses should make their own decisions unfettered by government regulation. In a communist economy, control over the means of production falls into the hands of the agents within the government. The government makes regulations that control the means of production. Socialism is in the middle of these extremes.

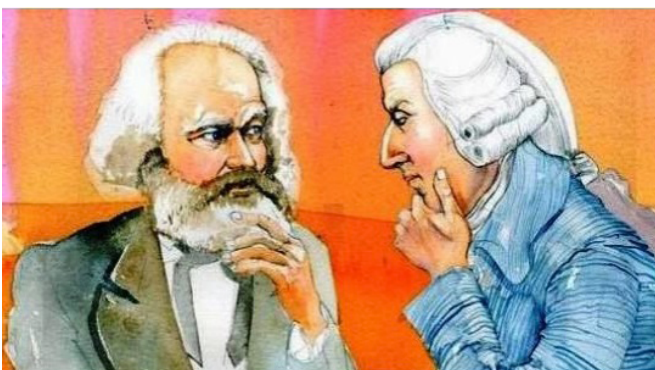
In the early part of the 20th century, the United States was located on the right; but after the Great Depression, the country moved slightly to the left. Social Security, welfare benefits, and farm subsidies emerged. Later, Medicaid and Medicare were born. These programs and many others reflect a socialist economy—our government began to control social services that formerly were under the economic purview of the private sector (i.e., churches). Thus, in the United States, we have many characteristics of a socialist economy.

Which mode of production is best? This is the wrong question. The quality and efficiency of an economy is based on the integrity of the governmental agencies that handle economic decisions. In Nazi Germany, for example, the control over the means of production was rooted in business with one exception—Jewish-owned businesses. Their property was commandeered by the government and transferred to white “Aryans.” If Germany had a socialist economy, they would have never been able to create such a powerful army. Keep in mind: It took the resources of three countries to defeat Germany. Nazi capitalism produced a surplus to

enable Germany to have a powerful army. Socialist economies have their priorities elsewhere and would not have the surplus to produce powerful armies.

What about North Korea? Relatively speaking, the country is much more communistic than are China and Cuba. It is a nuclear powerhouse that frightens South Koreans and Americans. How can North Korea have a powerful military without having a capitalist economy? The answer lies in the assessment of governmental leadership integrity. That government is failing to provide for citizens' needs as outlined by Marx. If North Korea provided the expected services to its citizens, the country couldn't afford a nuclear program. North Korea's nuclear program emerges from foreign aid. Once it is denied assistance, its citizens and particularly its elite class would be limited to a subsistence economy. Over time the country will collapse.

Where did the ideas of capitalism and communism emerge? Adam Smith popularized capitalism in 1776, while Karl Marx popularized communism in 1867. Although Marx and Smith are considered the fountainhead of their theories, both capitalism and communism existed centuries earlier. It is frequently stated that Marx debated with the ghost of Smith. Simply stated, Marx wanted the government to control the means of production, while Smith wanted private enterprise to control the means of production. The middle position is socialism.



Karl Marx

Adam Smith

So, who is the creator of socialism? There isn't one! Although online sites often refer to Marx as the father of socialism, *he is not*. Except in footnotes

where he addresses the work of others, Marx does not mention socialism in *Capital*. Marx was an advocate for communism, not socialism.

Socialism is a hybrid of capitalism and communism. Government officials of both economies tinker with their modes of production to resolve practical problems for their citizenry. For example, FDR established Social Security. Make no mistake, the Social Security legislation is a socialist strategy to address a problem that emerged from capitalism. Medicaid and Medicare from President Johnson's administration is also socialism. Governmentally controlled and funded fire departments *do not* fall in the realm of capitalism. Fire departments emerged out of socialism ideology. As a capitalist society, why do we permit socialistic governmentally controlled services? The answer is simple: Medicaid, Medicare, Social Security, and fire departments are more efficient and cheaper when they're governmentally controlled. First and foremost, we are a pragmatic society. We want to address problems in the best *but* least expensive manner. Sometimes socialism is the least expensive and most efficient pathway to achieve a particular goal.

People often use fire departments, Social Security, Medicare, and Medicaid as symptoms of socialism creeping into the U.S. economy. However, if we focus on governmental control over the means of production, these social programs are *not* a significant move toward socialism. The most glaring symptom of socialism *or communism* in the United States today is the income tax structure. Our income tax structure grants our government an unprecedented control over the means of production, which is commonly seen in communist economies. Our income tax structure has been designed to nurture some business enterprises while creating a liability for others. Research by Rafael Efrat (California State University Northridge, College of Business and Economics) demonstrates growing evidence that our income tax structure has increasingly become the prime cause of bankruptcy and failure of new business enterprises. Our income tax structure is *highly centralized* and has

a profound impact on *decision-making* within business enterprises. Centralization and control over production are key components that Marx strongly advocated in *Capital*. In a true capitalist economy, the government has no business to control business. Our federal income tax structure is a clear characteristic of communism not socialism. What alternatives are available for a tax structure that strips governmental control over the means of production? The answer may lie in a national sales tax. Nevertheless, our current income tax structure is clearly an inspiration of Marx's writings about communism.

The real problem lies in our preoccupation with labels. The questions we must ask are: "If a policy resolves a problem, should we employ it?" "If an idea that emerges from capitalism solves a major problem, should we use it?" Of course. "If an idea that emerges from socialism solves a major problem, should we use it?" The fact is, at this point in our country's history, a socialistic solution to a major problem will *not* gain political support. It will not gain political support merely because of the label. Ideas that solve problems are important, not the human-made labels that undergird the idea. Fear of employing a solution to a problem because the idea emerges from something with an unsavory reputation is a mindless exercise. It is robotic and doesn't reflect the mind of a thinking person.

In the end, we can confirm the adage: Within a communist economy, man oppresses man; while in a capitalist economy, it is the exact opposite. If you would like to comment, email [smarson@nc.rr.com](mailto:smarson@nc.rr.com) and I will print your email in the next issue.

# LETTERS TO THE EDITOR

The following letters were submitted in response to the Spring 2019 editorial titled “*Abortion and The Routledge Handbook of Social Work Ethics and Values.*”

Dr. Marson,

I was thankful to read your editorial piece. Although I have not read the 3 chapters related to abortion, I am so glad that different viewpoints were recognized and allowed to be shared. I think we need to do more of this within the social work profession so that those who hold a minority viewpoint on an issue can feel supported and free to voice their opinion!

Katy Harrell, MSW, LCSWA  
Charlotte, NC

---

Steve,

I am writing to report back from a class assignment using our *Routledge Handbook on Social Work Ethics & Values*. I asked the bachelors-level students in my macro-Human Behavior in the Social Environment course to select a chapter of their choice from the Routledge Handbook, and to write a reflection making connections between the handbook chapter, our textbook’s chapter on social work ethics, and their future practice as a social worker.

With 23 students in the class, they chose 19 different chapters from the book. This was a great success, since it allowed students to explore a specific topic of interest, while also seeing the breadth of the profession and how ethics permeate all that we do. During class, I had students talk about their papers in small groups, so they could learn about additional chapter topics from their peers.

One student asked if we could use the whole book as part of a course, so our faculty is talking about that possibility, or alternately using it across several courses within the major.

How have others found ways of using the book in your teaching?

Susan Schmidt, DSW, MSSW, LGSW  
Asst Professor of Social Work & Field Director  
Luther College, Decorah IA

---

The following letter was submitted in response to the Fall 2018 Forum article titled “*Aborting Abortions: How You Can Reduce Abortions in Your Community.*”

Dear Editors,

I am writing to express my dissent, disagreement, and distress over Dr. Bruce A. Thyer’s (2018) essay, “*Aborting Abortions: How You Can Reduce Abortions in Your Community.*” While I recognize that material in The Forum of JSWVE does reflect endorsement [*sic*] by its editors, I am concerned that, as a notable figure in social work, Dr. Thyer’s pen yields considerable influence over our profession. As a social worker, academic, and mother who made the heartbreaking decision to terminate a pregnancy due to fetal anomaly, I am compelled to respond to Dr. Thyer’s essay.

Readers should be aware that Dr. Thyer presents multiple uninformed assumptions about the reasons why women have abortions, avoiding our profession’s acknowledgement of social justice and access issues. His words further stigmatize women and minority/underserved populations.

In his essay, Dr. Thyer does not rely upon readily-available, peer-reviewed publications or widely-disseminated statistics on abortion in the United States. He states, “...the sad reality is that many women seeking an abortion do so purely for methods of birth control, for convenience, being unwilling to bear the burden of nine months of pregnancy.” (p. 95). It is a broad generalization to

suggest that the decision to have an abortion is one of convenience. Some women must travel great distances to obtain an abortion, and the majority have paid out of pocket for the procedure (Guttmacher Institute, 2019). According to the Guttmacher Institute (2016), 75% of US abortion patients are of low-income, and 59% already have a child. Thirty nine percent are women of color, who consistently are less able to access reproductive healthcare as compared with their white counterparts (Eltoukhi, Vance, Troutman, & Al-hendy, 2018). While 58% of all abortion patients wished they could have had an abortion earlier (Guttmacher Institute, 2019), certain populations are more likely to have them in the second trimester: women of color, low education, and those whose lives had been affected by disruptive life events.

The mission of social work is to meet the “basic human needs of all people, with a particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty” (National Association of Social Work, 2017, p. 1). Certainly, a discussion of abortion and reproductive rights should avoid stigmatizing women who have had abortions as “irresponsible” (Thyer, 2018, p.95), as he claims the “ready availability of low-cost and effective contraception to everyone”. While Dr. Thyer (2018) argues for “the love of human life, or babies, of women, love to prevent the needless deaths of tens of thousands of African-American babies” (p.95), he is apparently unaware of the systemic social, economic, and other forces beyond “love” that require the participation of social work to remedy lack of access to safe and reliable reproductive healthcare for African American women. If Dr. Thyer is truly concerned for life, women, and babies, he should invest his time not in proposing elaborate and manipulative methods to infiltrate women’s health clinics but actually proposing changes to systemically discriminatory legislation targeting oppressed populations across the country.

Additionally, Dr. Thyer’s essay presents hyperbolic language that places abortion clinic staff at risk. He writes in a dangerous tone, arguing, “The murder of an infant is not a price that should be paid for a parent’s carelessness” (p. 95) and suggests that abortion clinic staff meeting with ambivalent patients are likely to “persuade” such women to “abort her baby” (Thyer, 2018, p. 95). By suggesting that clinic staff and pressuring women to “murder” their “babies”, Thyer is placing the lives of countless individuals in danger. Now, more than a decade following the murder of George Tiller, the National Abortion Foundation (2018) has documented a continued number of death threats to providers, hate mail, internet harassment, and stalking. Divisive language characterizing abortion providers as callous and uncaring abandon’s our profession’s code of ethics to treat others with dignity and worth, as well as valuing human relationships (NASW, 2017). If Dr. Thyer truly cares about the well-being of women and children, he should turn his focus to building bridges across pro-life and pro-choice divides, instead of burning them.

I am deeply concerned about the information that Dr. Thyer continues to disseminate about abortion across our profession. In his chapter, “Social Work’s First Obligation: The Role of Social Workers in Protecting Unborn Children”, Thyer and co-author William C. Rainford (2019) argue that fetuses are “pain-capable” at fourteen weeks and beyond (p.112), and erroneously cites scholarly literature, when in fact, there is no scientific evidence indicating this (Lee, Ralston, Drey, Partridge, & Rosen, 2005). Further, Thyer and Rainford (2019) cite a 1984 anti-abortion “documentary”, *The Silent Scream*, to suggest that fetuses attempt to “escape the physician’s tools” (p. 112). This documentary has been largely discredited as misleading propaganda by medical experts, including neurobiologists (New York Times, 1985).

While Dr. Thyer is entitled to his opinion, he must be mindful that publishing misinformation across

our discipline can result in a lack of access and equitable treatment across the very populations we commit to assisting, in addition to placing lives at risk. I compel him to consider the damage essays such as his have as they perpetuate stereotypes and fuel the fire across the pro choice/pro-life divide. I request that the Journal of Social Work Values and Ethics consider publishing this letter to offer a different perspective on Dr. Thyer's work.

Dr. Erica Goldblatt Hyatt  
New Brunswick, NJ

## References

- Eltoukhi, H.M., Vance, A., Troutman, M., & Alhendy, A. (2018). Reproductive healthcare disparities: Insights and opportunities. *Current Women's Health Reviews, 14*(3), 261–266
- Guttmacher Institute. (2016). U.S. abortion patients. Retrieved September 26, 2019, from <https://www.guttmacher.org/infographic/2016/us-abortion-patients>
- Guttmacher Institute. (2019). United States abortion demographics. Retrieved September 26, 2019, from <https://www.guttmacher.org/united-states-abortion/demographics>
- Lee, S. J., Ralston, H. J., Drey, E. A., Partridge, J. C., & Rosen, M. A. (2005). Fetal pain: A systemic multidisciplinary review of the evidence. *Journal of the American Medical Association, 294*(8), 947–954.
- National Association of Social Workers [NASW] (2017). Code of ethics. Retrieved from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>.
- New York Times. (1985). A false 'scream'. Retrieved September 26, 2019, from <https://www.nytimes.com/1985/03/11/opinion/a-false-scream.html>
- Rainford, W. C., & Thyer, B. A. (2019). Social work's first obligation: The role of social workers in protecting unborn children. In S. M. Marson & R. E. McKinney, Eds. (2019), *The Routledge handbook of social work ethics and values*. New York, NY: Routledge.
- Thyer, B. A. (2018). Aborting abortions: How you can reduce abortions in your community. *Journal of Social Work Values and Ethics, 15*(2), 93–96.



# Changes at JSWVE and THANK YOU

Stephen M. Marson, Editor, and Laura Gibson, Book Review Editor

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)

Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

We welcome Teresa Bertotti, Ph.D., from University of Trento (Italy) to our editorial board. In addition to her work with ethical dilemmas and professional identity, Teresa is well known for her research in child protective services. Welcome to our board!

A great deal of work goes into each issue of the *Journal of Social Work Values and Ethics*. All work on our journal is completed by volunteers and *no one*—including our publisher, ASWB—makes a financial profit from the publication. In addition, we have unsung heroes on our editorial board who contribute to the existence of our journal. Because we have a rule that requires our manuscripts to be assessed blindly, I cannot offer public recognition by their names. I thank them! However, I can publicly announce the names of our hard-working copy editors. Their work is not confidential. For their major contributions to this issue, I must publicly thank:

Amelia Chesley  
Tamikka Gilmore  
Alison MacDonald  
Melissa Schaub  
Laura Smith  
Jennifer L. Wood

Thank you to the book reviewers who contributed their time to this issue. Following are the book reviewers who have given of their time to read books and write reviews in this issue of the journal.

Ann Callahan  
Peter Kindle  
Ottis Murray  
Porter Lillis  
Lisa Reece  
Peggy Proudfoot Harman  
Mo Cuevas  
J. Porter Lillis  
MaryAnn Thrush

Welcome two new book reviewers, Dr. Wanja Ogongi and Dr. Bertha DeJesus! Thank you for contributing your time and expertise to the *Journal of Social Work Values & Ethics*!

## ANNOUNCEMENTS

Many of those who are published in the *Journal of Social Work Values and Ethics* were invited to contribute chapters to *The Routledge Handbook of Social Work Ethics and Values*. This book became available on July 1, 2019, and can be purchased at Amazon as an e-book and as a printed book.

The *Journal of Social Work Values and Ethics* is on Facebook. You are invited to become our Facebook friend. Facebook is particularly helpful for authors because it provides updated information on the publication process.

Welcome Wanja Ogongi and Bertha DeJesus, new book reviewers to the journal.

# Thinking Critically About Self-Determination: A Literature Review

Ginneh L. Akbar, DSW  
West Chester University  
[GAkbar@wcupa.edu](mailto:GAkbar@wcupa.edu)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

Self-determination, the concept that individuals are qualified to make their own decisions about their lives, is a central concept in the social work profession. It is described in the NASW Code of Ethics as one of a social worker's primary ethical responsibilities, and it provides a framework for practitioners working with the many populations that social workers serve. Despite the NASW's professional mandate, self-determination has been the subject of decades of discipline-wide debate. Proponents argue that self-determination is empowering and acknowledges that clients are the best resource on their own needs. Critics argue that one can never fully be self-determined and that social workers face an impossible dilemma: they must promote client self-determination while upholding societal and agency conventions, oftentimes in contradiction with each other.

*Keywords:* self-determination, client self-determination, social work ethics, ethical dilemmas, social work values

## The Concept of Self-Determination

Self-determination, an ideal based on the freedom to think, choose and act on one's own path in life, is considered to be a core principle and among the top of the hierarchy in importance in many Western nations (Dolgoff, Loewenberg, & Harrington, 2004; Freedberg, 1989; Furlong, 2003; Weick & Pope, 1988). Self-determination

is based upon the principle that the individual is the best judge of his or her own interests and that each person has the right to make his or her own decisions (Furlong, 2003; Karlsson & Nilholm, 2006). Although self-determination is not explicitly mentioned in the United States Constitution, it is a right that is considered protected by the 9th and 14th amendments and is based on the broader values of liberty, justice, equality and freedom (Dolgoff et al., 2004; Staller & Kirk, 1997). An individual's self-determination provides him or her with a sense of purpose and destiny and can encourage positive outcomes in life.

Despite it being a seemingly positive concept, self-determination has been the subject of debate and controversy among social workers (Furlong, 2003; Perlman, 1965). As Tower (1994) states, the social work profession has held self-determination among its highest values, one that is implied in all of the other values in the Code of Ethics (Biestek & Gehrig, 1978). Yet, others dismiss it as a catchphrase, professional jargon, and a practice principle that is impossible to implement (Ackerman, 2006, Dolgoff et al., 2004; Weick & Pope, 1988). Even more harshly, Biestek & Gehrig (1978) label it as a term that could be seen as manipulative or deceitful.

The following review highlights the evolution of the concept of self-determination in the social work literature, from the early stages of social work through contemporary practice. The review examines self-determination by decade, noting the

social climate, the evolution of the profession, and how those factors impacted how social workers both define self-determination and promote it in practice. Overall, the literature reveals that the dichotomy between social work and promoting client self-determination is not newly emerging, and that social workers have struggled with similar conflicts since the origin of the profession. The decades examined are characterized by conflicts in self-determination unique to those time periods, which were influenced by the changing role of workers, as well as social and political factors of a particular era.

### **Early Historical Development of Self-Determination**

The earliest known definition of self-determination is found in Webster's dictionary in 1683, which defined the term as "determination of one's mind or will by itself toward an object" or "the action of a people in deciding its own form of government" (Wehmeyer, 2004, p. 340). In the early 18th and 19th centuries self-determination was primarily a philosophical principle derived from concepts surrounding man's free will and determinism to choose his life's path without "external compulsion" (Wehmeyer, 2004). In the early 1900s, the advent of evolutionary theory led to more biologically driven models to explain determinism in human behavior (Wehmeyer, 2004). The philosophical view of determinism, which posits that human behaviors and actions are effects of preceding causes, can be considered the antecedent of modern definitions of self-determination, but the terms must be distinguished. Self-determination was not seen as an inexorable human function, rather a human right, basic to all individuals, having the ability to reason, the capacity for growth and the choice of one's own actions (Freedberg, 1989; Weick & Pope, 1988).

Social work began with the charity organization and settlement movements of the 1890s, with middle- and upper-class families distributing financial, intellectual and moral aid to their lower socio-economic status neighbors (Courtney & Specht, 1994). At the turn of the century,

social work, then termed "social works," focused on working with individuals and communities (Courtney & Specht, 1994). During the early 20th century, from 1901-1910, the United States experienced large-scale immigration from Southern Europe, which inevitably influenced the country's population, federal policies, and thus social work practice. The communities that social workers served grew larger and more diverse and had more diverse needs. Social workers, with a mission to work with the country's most disadvantaged, saw an increase in agency caseloads due to the increased immigration (Biestek & Gehrig, 1978; Courtney & Specht, 1994).

From 1910-1920, social work became more recognized as a legitimate profession (Lubove, 1983). During this time many social work organizations were established, namely, the American Association of Medical Social Workers, the American Association of School Social Workers, and the American Association of Psychiatric Social Workers. Client self-determination was challenged as social work continued to define the role of the profession and establish the limits of case worker purpose and function. The expectations of clients varied as workers struggled with language barriers with their new clientele, and made their own interpretations of their clients' needs, generally providing basics such as food and shelter (Biestek & Gehrig, 1978). The social work literature noted the importance of the concept of "client freedom," but found difficulties in casework practice applications – particularly as social work became more influenced by the profession of psychiatry, which had a more medically oriented focus (Courtney & Specht, 1994). This "theory versus practice" dichotomy in defining and supporting self-determination is a recurring theme throughout the historical professional literature and social work practice. Even today, social workers struggle with how to integrate social work practice guidelines, which are based on theory and ethics, with work in the field.

The politics of the post-World War I era also influenced professional ideology, and in the

1920s and 1930s increased attention to the “self” was supported as a turn against socialism and totalitarianism (Martha M. Dore, 1990; Freedberg, 1989). As Freudian based psychodynamic theory increased momentum in the United States, the psychiatric influence was felt in social work as well (Freedberg, 1989; Reisch & Andrews, 2002). Overall, psychoanalytic thought was concerned with individual actions, particularly internal drives and intrapsychic conflicts, yet in social work the evolution of the functional and diagnostic theoretical schools took the debate on autonomy further. Although the diagnostic school did value the individual, the worker was still regarded as the expert and in control of the therapeutic relationship (Freedberg, 1989). In contrast, the functionalist saw clients as the fashioners of their own fate and the focus was on the individuals’ potential to use the self and their own will to make powerful choices that could effect change (Faatz, 1953; Freedberg, 1989; Kasius, 1950). The Functional School was based on the psychodynamic theories of Otto Rank, who was originally a student of Freud, but later received criticism from the Vienna circle of strict Freudians when he rejected traditional ego psychology and supported the strength of “The Will” in personality development (Cnaan, Dichter, & Draine, 2008; Martha M. Dore, 1990).

Following the lead of Rank, functionalist social workers Jessie Taft and Virginia Robinson supported the functional theoretical concept of a client’s potential to determine his or her own path within the helping relationship and the human condition (Martha Morrison Dore, 1999). Functionalists criticized diagnostic practitioners for their conformity with traditional medical paradigms where the helper/client relationship was seen as comparable to the doctor/patient alliance; where a social worker may be sought to treat intrapsychic needs similar to how a physician would treat a physical ailment (Simon, 1994; Weick & Pope, 1988). Dore (1999) elaborates on the historical implications of the functional model, stating:

With its focus on agency setting and its ready adaptation to relief giving,

functional practice was eager to establish a niche in the newly formed public assistance programs and other public institutions developed in response to the effects of the Depression (p.177).

Functionalists placed value on clients’ right and responsibility to choose desired outcomes in their lives, proposing that even in crisis situations, with a social worker serving as the agency’s representative to uncover needs, individuals have the potential to use the self and their own will to make those powerful choices to bring about change. This premise helped to sway the profession from a role of having pity for and holding judgments of vulnerable populations that needed to be cured, to one of empathy, advocacy and empowerment of individuals who can cultivate the change by themselves (Faatz, 1953; Hamilton, 1941; Kasius, 1950).

In 1931 Virginia Robinson, a Rankian social worker from the Pennsylvania School, published *A Changing Psychology in Social Casework*. Her book promoted changes in the casework relationship, and encouraged workers to allow clients to take an active role in their treatment. Social work concepts that are currently taught in educational institutions owe a great deal to the functional school. Phrases such as “self-determination,” “starting where the client is,” “bio-psycho-social” and “strengths-based” are commonplace for even beginning social workers today. In essence, they are the foundation of function in the helping process. However these ideals were revolutionary beliefs at a time in the early twentieth century, when the helper/client relationship was often paternalistic.

Through the end of the 1930s and 1940s the U.S. continued to be affected by the changing political climate. The American values of liberty and personal freedom were challenged by the expansion of Communism (Biestek & Gehrig, 1978). Roosevelt’s New Deal provided government relief for those affected by The Great Depression. In 1935 the Social Security Act was passed, stirring controversy about the broad relief provisions given

for the country's most vulnerable: the unemployed, the disabled, the elderly, and dependent children (Biestek & Gehrig, 1978). Although desperately needed, it was criticized for being too socialist in nature. It is also important to note that New Deal benefits often were not applied equitably across racial and ethnic groups. In fact, some argue that regarding certain policies, particularly those related to funding for housing, the New Deal actually created more race-based discrimination and institutional racism (Valocchi, 1994). Despite this, the Depression and The New Deal still had a significant impact on social work. Social work services were sought in large numbers by individuals who previously had no need for these types of services (Biestek & Gehrig, 1978). Social case workers saw increased caseloads due to the establishment of these new social programs and child guidance clinics increased their psychiatric and counseling services for children and families (Biestek & Gehrig, 1978). Socially, Americans struggled with the dichotomy between dependency and autonomy, as we shunned socialism, yet accepted the necessary post-Depression and post-war federal relief, aid and support (Biestek & Gehrig, 1978).

During this period, the terminology and ideological perspective shifted from "client participation" to "self-help," though some would argue that the motive for more client involvement was not the social worker's encouraging intentions but rather burgeoning caseloads (Biestek & Gehrig, 1978; Freedberg, 1989; Weick & Pope, 1988). Public welfare personnel had less stringent educational requirements, many social workers' roles were modified, and the new positions were labeled as welfare eligibility workers (Biestek & Gehrig, 1978; Ellett, Ellis, Westbrook, & Dews, 2007). Conflicts in self-determination were due to eligibility requirements for government social services, where social welfare recipients had to prove they were needy and were often subject to home visits from their social workers (Biestek & Gehrig, 1978).

It was also during the 1920s – 1930s that the

term "principle of self-determination" appeared in the social work literature (Biestek & Gehrig, 1978). Case workers understood their role in promoting the principle as being able to psychologically understand the client's life and environment and supporting the client to freely choose their own actions (Biestek & Gehrig, 1978). Case workers aimed to allow clients to decide whether they wanted treatment while providing input throughout the treatment process, and also providing clients with tools to make their own decisions, both during and after treatment. Social workers struggled with the use of authority in the social work relationship and questioned how to manage client freedom and self-determination with the inevitable position of authority that workers had in different agency settings such as family case work, medical social work, psychiatric social work, probation and parole agencies and public assistance agencies (Biestek & Gehrig, 1978). Each setting gave rise to distinct situations regarding self-determination, which social workers had to manage.

Moving forward, the dichotomy of client self-determination vs. worker authority repeats as a theme throughout the literature. In the 1950s and 1960s, several articles attempting to define authority in the worker-client relationship were written by social work practitioners and in professional journals (Hutchison, 1987). Writers explored the theme of authority in client interactions and questioned if clients had democratic participation and choice in relationships with workers, or whether social work was just another form of social control (Hutchison, 1987).

During the 1950s, the United States saw the growth of industry, population and urban living and the early stages of the Cold War and the civil rights movement (Biestek & Gehrig, 1978). This period was a turning point in the development of social work ethics and the discussion of self-determination, as it was the first time that self-determination was specifically and extensively defined in the social work literature (Biestek, 1951; Reamer, 2005). Writers continued to discuss self-determination as a social work principle as well as

the limitations to client self-determination (Biestek & Gehrig, 1978). Social workers focused on self-determination outside the realm of the worker/client relationship and again focused on self-determination as a human right. The 1950s also saw the establishment of the National Association of Social Workers and the merger of the American Association of School Social Work and the National Association of Schools of Social Administration to form the Council on Social Work Education (Biestek & Gehrig, 1978).

With the influx of immigrants into urban centers, the conclusion of World War II and the emergence of the civil rights movement, the fabric of the social structure in the United States was undergoing significant political, economic, and cultural changes. Social work mirrored the shifts of that era and evolved to meet the needs of a more progressive public. Though undercurrents of the ideas of the “worthy” and “unworthy” poor continued to exist and created a dichotomy in charitable helping, this new “social welfare” also included themes of individual rights, focus on the influence of the environment in human agency and the importance of the helping relationship to foster change (Leiby, 1985; Smalley, 1971).

The 1960s and 1970s saw an increase of many social and political movements such as anti-war, civil rights, and self-help, as well as the demedicalization, deinstitutionalization, and independent living of the disabled (Freedberg, 1989; Tower, 1994). The scope of social work widened to meet the contemporary needs of the population. Biestek and Gehrig (1978) state:

During the sixties the casework frame of reference expanded so that it now included the functional mode, the problem-solving model, the psycho-social mode, and the behavioral modification mode (p. 123).

Through the 1970s and 1980s, social work ethics were influenced by the development of the applied professional ethics and bioethics fields.

The terminology now included “personal agency” and “emancipation” (Biestek & Gehrig, 1978). The term “empowerment” was also introduced to social work in 1976 by Barbara Solomon’s publication *Black Empowerment* (Simon, 1994). Like self-determination, the empowerment approach “presumes that oppressed people and communities yearn for freedom, justice, and fulfillment” (Simon, 1994, p.3). Many African-Americans responded to social injustices by forming unity groups to fight racism and poverty (Biestek & Gehrig, 1978). Although the profession overall continued to struggle with dealing with discrimination and oppression on an institutional level (Brill, 2001), during this time more social workers were exploring the impact of these issues in society, their agency, and their practice.

During the 1980s, individualism and consumerism continued to make the United States one of the most affluent countries, but not without some costs (Chelf, 1992). The effectiveness of programs designed to fight poverty in earlier decades were re-examined during this time, when the gap between the richest and poorest Americans was widened (Chelf, 1992). A conservative shift in politics and economics impacted social work clients, funding, and overall social work practice (Brill, 2001). Conservatives criticized social programs, claiming they drained government resources and inhibited self-determination by creating a class of dependents (Chelf, 1992). Also during the 1980s, the rates of minorities and children in poverty grew in disproportionate numbers, and as dissatisfaction with the increases in out-of-home placement grew, critics of foster care promoted family preservation programs to keep children in their family of origin. One could argue that these new family preservation programs helped to promote self-determination by allowing parents to keep their families intact, while working with agencies to receive new skills and resources (Zell, 2006).

With the term “self-determination” now more widely used, there was an increased discussion of self-determination in social work literature, and the debates on theory versus practice continued.

Social workers now began to accept client self-determination to include the right to fail, and to make what the social worker might consider poor choices, where in the past a more paternalistic view with the social worker's plan taking precedence had been common (Biestek & Gehrig, 1978). Some have challenged social workers, questioning how they can respect a client's self-determination when their own idea of the client's best interests differs (Dolgoft et al., 2004). Others state that because of power and oppression, the client may have a limited understanding of the system and the consequences. These factors, among others, have left some social workers questioning whether full self-determination is unrealistic, and forces us to question whether it is the job of social workers to provide clients with the information and tools to make their own decisions. Or, is the social worker's role to help people live as functionally as possible within a system, despite the oppression and inequities that exist? Practitioners in all fields of social work continue to struggle with these questions.

### **Contemporary Views on Self-Determination**

Current literature on self-determination is limited. There are few current studies that focus on social worker practice issues related to promoting self-determination. However, the study by Rothman, Smith, Nakashima, Paterson, & et al (1996) on self-determination highlights some of the conflicts that professional social workers face promoting self-determination in practice. Rothman and colleagues proposed that practitioner directiveness, the degree to which a worker decides to either intervene or allow clients to make their own choices, involves the fundamental concept of self-determination. To examine the hypotheses surrounding the notion that social work practice interventions require, "...a complex array of intervention modes or helping strategies in working with clients (p. 397)," they implemented a study that explored helping strategies. Their survey asked a sample of 35 social workers, chosen from the field instructor pool at the University of California, Los Angeles School

of Social Welfare, to cite specific instances where they used reflective, suggestive, prescriptive, and determinative modes of interventions.

The findings indicated that practitioners have a range of directiveness behaviors, which are often influenced by conditional factors. The authors note the discrepancy between the concept of client self-determination that is taught in social work school, encouraging non-directive methods of practice, with real practice encounters that often require more directive interventions. Examples are those agencies with mandated clients, such as child welfare agencies.

In McCormick's (2011) exhaustive examination of the literature on self-determination and the right-to-die movement, he discusses that although the right-to-die movement has grown and now has the positive support of a large portion of the population, the government often does not share these views, and the law does not match public opinion (McCormick, 2011). And similar to the dichotomy child welfare workers face, hospice social workers face struggles regarding end-of-life issues. Generally medical staff are charged with using all available means to keep the patient alive, yet the right-to-die movement is based on respect for an individual's rights, personal choice and autonomy and the expectation that the patient and medical team will make joint decisions about treatment options. McCormick surmises that self-determination is extremely important to social work practice, yet is often influenced by not only agency culture but racial and ethnic culture as well. Social workers involved in end-of-life care often struggle between meeting the mandate to allow clients to be self-determined while also honoring cultural traditions and meeting legal standards (McCormick, 2011).

Taylor (2006) conducted a larger mixed-methods study, where she questioned the importance of self-determination among 320 seasoned mental health social workers. She used random sampling to recruit 750 participants listed in the National Association of Social Workers' (NASW) Register of Clinical Social Workers, of which 320 surveys



were returned. Taylor's study on self-determination was part of a larger study investigating professional dissonance. For that study she created and piloted her own instrument. A subsection of that scale consisted of three Likert-type questions and one open-ended question, which probed participants on their views regarding client self-determination.

Results from Taylor's study indicate "...both importance and utility of self-determination were heartily endorsed by the majority of participants (p.3)." Taylor's quantitative data suggests that mental health social workers support self-determination as "important", many participants found conflicts in practice situations with self-determination "troubling", and a large percentage think about issues related to self-determination "more now" than they did when they were new social workers (Taylor, 2006). The qualitative data stemmed from open-ended responses of the 175 participants who indicated they had experienced a change in how they thought about self-determination over the years, due to increased practice knowledge and life experiences. Taylor concluded that the richest data in the study came from the qualitative responses, which allowed the participants to express how they had evolved in their practice regarding their understanding of self-determination. Taylor states:

Through the answers to these questions, we see how social workers have evolved in their practice and the practice wisdom evident in these responses speaks to the largely untapped resource of our own experience to guide one another's practice, especially in difficult situations (p.4).

Rothman and colleagues as well as Taylor both cite their sampling frame as limitations to the study, with Rothman having such a small convenience sample and Taylor pulling exclusively from the Clinical Register, where a high proportion of workers are in private practice. The clientele of private practitioners and those in public mental health agencies is decidedly different and could

impact how practitioners assess client self-determination. Interestingly, Taylor also cites the issue of "social desirability" as a limitation of the study, stating that social workers are socialized to value self-determination, thus her results could have been skewed by self-serving bias.

## **Discussion**

Social work has promoted itself as a profession based on social justice and places an ethical mandate on its professionals to promote clients' self-determination. The topic has had an extensive history in the social sciences (Staller & Kirk, 1997). But how does the profession even define self-determination? Some of the controversy about self-determination persists because of the difficulty in how to operationalize it (Wehmeyer, 2004). The common threads among most definitions within the literature include having knowledge about one's own needs, having the capacity to choose, governing one's own behavior, self-advocacy, pride, and freedom from all external sources (Ackerman, 2006; Tower, 1994; Wehmeyer, 2004).

Still, researchers cite the need for expanded empirical clinical research on the operationalization of social work values, such as client self-determination, stating that although there is a generally agreed upon conceptualization of the meaning, the literature repeatedly suggests that the Code of Ethics does not specifically and explicitly define what the standard of self-determination means (McCormick, 2011; Rothman et al, 1996; Taylor, 2006). This is also evident in the progression of self-determination throughout history, since as the social climate changes, the understanding of the term as well as the actual term have evolved. And, as advances in medicine, bioethics and technology continue, it is likely that our understanding of self-determination will continue to expand.

## **References**

- Ackerman, B. (2006). Learning self-determination: Lessons from the literature for work with children and youth with emotional and behavioral disabilities. *Child & Youth Care Forum*, 35(4), 327-337.

- Biestek, F. P. (1951). *The principle of client self-determination in social casework*. Washington, DC: Catholic University of America Press.
- Biestek, F. P., & Gehrig, C. C. (1978). *Client self-determination in social work: A fifty-year history*. Chicago, IL: Loyola Press.
- Brill, C. K. (2001). Looking at the social work profession through the eye of the NASW Code of Ethics. *Research on Social Work Practice, 11*(223), 223–233.
- Chelf, C. P. (1992). *Controversial issues in social welfare policy: Government and the pursuit of happiness*. Thousand Oaks, CA: Sage Publications.
- Cnaan, R. A., Dichter, M. E., & Draine, J. (2008). *A century of social work and social welfare at Penn.* Philadelphia, PA: University of Pennsylvania Press.
- Courtney, M., & Specht, H. (1994). *Unfaithful angels: How social work has abandoned its mission*. New York, NY: The Free Press.
- Dolgoff, R., Loewenberg, F. M., & Harrington, D. (2004). *Ethical decisions for social work practice* (7th ed.). Belmont, CA: Brooks/Cole.
- Dore, M. M. (1990). Functional theory: Its history and influence on contemporary social work practice. *Social Service Review, 64*(3), 359–371.
- Dore, M. M. (1999). The retail method of social work: The role of the New York school in the development of clinical practice. *Social Service Review, 73*(2), 168–190.
- Ellett, A. J., Ellis, J. I., Westbrook, T. M., & Dews, D. (2007). A qualitative study of 369 child welfare professionals' perspectives about factors contributing to employee retention and turnover. *Children and Youth Services Review, 29*(2), 264–281.
- Faatz, A. J. (1953). *The nature of choice in casework process*. Oxford, UK: University of North Carolina Press.
- Freedberg, S. (1989). Self-determination: Historical perspectives and effects on current practice. *Social Work, 34*(1), 33–38.
- Furlong, M. A. (2003). Self-determination and a critical perspective in casework: Promoting a balance between interdependence and autonomy. *Qualitative Social Work: Research and Practice, 2*(2), 177–196.
- Hamilton, G. (1941). The underlying philosophy of social casework. *The Family, 22*(5), 139–147.
- Hutchison, E. D. (1987). Use of authority in direct social work practice with mandated clients. *Social Service Review, 61*(4), 581–598.
- Karlsson, K., & Nilholm, C. (2006). Democracy and dilemmas of self-determination. *Disability & Society, 21*(2), 193–207.
- Kasius, C. (1950). *A comparison of diagnostic and functional casework concepts*. New York, NY: Family Service Association of America.
- Leiby, J. (1985). Moral foundations of social welfare and social work: A historical view. *Social Work, 30*(4), 323–330.
- Lubove, R. (1983). *The professional altruist: The emergence of social work as a career, 1880-1930 / Roy Lubove*. Cambridge, MA: Harvard University Press.
- McCormick, A. J. (2011). Self-determination, the right to die, and culture: A literature review. *Social Work, 56*(2), 119–128.
- Perlman, H. H. (1965). Self-determination: Reality or illusion? *The Social Service Review, 39*(4), 410–421.
- Reamer, F. G. (2005). Social work values and ethics: Reflections on the profession's odyssey. *Advances in Social Work, 6*(1), 24–32.
- Reisch, M., & Andrews, J. (2002). *The road not taken: A history of radical social work in the United States*. New York, NY: Brunner-Routledge.
- Robinson, V. (1934). *A changing psychology in social casework*. Chapel Hill, NC: University of North Carolina Press.
- Rothman, J., Smith, W., Nakashima, J., Paterson, M. A., et al. (1996). Client self-determination and professional intervention: Striking a balance. *Social Work, 41*(4), 396–405.
- Simon, B. L. (1994). *The empowerment tradition in American social work: A history*. New York, NY: Columbia University Press.

- Smalley, R. E. (1971). *Social casework the functional approach* (16th ed.). New York, NY: National Association of Social Workers.
- Staller, K. M., & Kirk, S. A. (1997). Unjust freedom: The ethics of client self-determination in runaway youth shelters. *Child and Adolescent Social Work Journal*, *14*(3), 223–242.
- Taylor, M. F. (2006). Is self-determination still important? What experienced mental health social workers are saying. *Journal of Social Work Values and Ethics*, *3*(1).
- Tower, K. D. (1994). Consumer-centered social work practice: Restoring client self-determination. *Social Work*, *39*(2), 191–196.
- Valocchi, S. (1994). The racial basis of capitalism and the state, and the impact of the New Deal on African Americans. *Social Problems*, *41*(3), 347–362.
- Wehmeyer, M. L. (2004). Beyond self-determination: Causal agency theory. *Journal of Developmental and Physical Disabilities*, *16*(4), 337–359.
- Weick, A., & Pope, L. (1988). Knowing what's best: A new look at self-determination. *Social Casework*, *69*(1), 10–16.
- Zell, M. (2006). Child welfare workers: Who they are and how they view the child welfare system. *Child Welfare*, *85*(1), 83–103.

# The Ethical Conflicts of Working in Solitary Confinement

Ali Winters, DSW, LCSW  
Tennessee State University  
[awinter2@tnstate.edu](mailto:awinter2@tnstate.edu)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

Social work, human service, psychology, and counseling professionals charged with providing professional services to those in solitary confinement are tested by many ethical dilemmas, some quite difficult to resolve. The damaging psychological and medical effects of solitary confinement have been well-documented and the overuse of this type of housing in the US and across the world has been defined by many advocate groups as cruel and inhuman. This leaves helping professionals in a rather precarious position when working within a setting that imposes conditions evidenced to work against the well-being of clients. This article uses several standards of professional and medical ethics to arrive at principled decisions on multiple ethical conflicts present within this specialized field of practice.

*Keywords:* mental health, professional ethics, ethical dilemma, dual loyalty, solitary confinement, restrictive housing

## Introduction

Solitary confinement in the United States (US) has emerged in the national and international dialogue as a salient issue for both prisoner rights and correctional outcomes. Defined as confining an inmate to a cell for a minimum of 22 consecutive hours each day, solitary confinement is often referred to as restrictive housing or various forms of special management/housing, segregation, or isolation (Government Accountability Office, 2013). There are three main reasons why solitary confinement is used—institutional security,

protection, and punishment. Policies differ by institution; however, short term stays of 30 days or less are typically used for punishment of minor rule violations while prolonged or extended solitary confinement (in excess of 30 days) is generally employed for protective custody and institutional security. The most recent data in 2015 from the Bureau of Justice on solitary confinement in the US found that 260,000 state/federal prison and jail inmates were subjected to prolonged solitary confinement within the previous year (Beck, 2015; Kaeble & Glaze, 2016) and on any given day, 80,000 – 100,000 people in the US are being held in restrictive housing (Browne, Cambier, & Agha, 2011; Department of Justice, 2016).

Mirroring the philosophical and penological underpinnings of mass incarceration, entire prisons have been built across the US called “supermax prisons” to house increasing numbers of people in prolonged solitary confinement whose stays are generally indeterminate and often span decades. This overreliance on solitary confinement within prison and jail systems has been touted as necessary to maintain institutional security; however, the international community has become increasingly uneasy about the arbitrary, punitive, and retaliatory nature of its use common in many countries, including the US. The Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, adopted by the United Nations in 1984 (and signed by the US in 1994), includes standards for the treatment of prisoners stating that solitary confinement should be limited in scope to only preserving the security of an institution and that due process—initial and ongoing—should

be in place for this provision to all prisoners (United Nations General Assembly, 1984). At the International Psychological Trauma Symposium in 2007, the Istanbul Statement was created based on emerging evidence of the psychological trauma caused by prolonged solitary confinement. This statement was the first to identify vulnerable populations, such as the mentally ill and juveniles, who should be barred from such a practice (Ayan et al., 2007). More recently, a United Nations Special Rapporteur, Juan Méndez, defined the use of solitary confinement in excess of 14 days (and with the mentally ill, juveniles, and pregnant women) as an abusive practice that constitutes cruel, inhuman, and degrading treatment and, in some cases, is tantamount to torture (Méndez, 2013). In addition, the World Health Organization has called upon correctional institutions to use solitary confinement in only extreme cases as the very last resort and for the shortest possible time based on the clear and documented effects of this type of housing on inmate health, mental health, and long-term consequences after release (Shalev, 2014).

From a national perspective, there are multiple organizations actively advocating for the reduction and/or elimination of solitary confinement on local, state, and national levels. Social Workers Against Solitary Confinement, American Civil Liberties Union, National Religious Campaign Against Torture, The Vera Institute, Solitary Watch, Human Rights Coalition, Stop Solitary for Kids, Prison Law Office, and many others have been active in promoting safer alternatives to the use of solitary confinement, supporting legislative initiatives and correctional policies that reduce the use of solitary confinement, and campaigning for position statements from national professional organizations that denounce the use of prolonged solitary confinement in particular. These organizations and the people who drive them oppose the general misuse of solitary confinement, which translates into poorer correctional outcomes and subsequent ethical issues confronting those who choose to work in this field.

Efforts to end prolonged solitary confinement

and its use as a punishment or with vulnerable populations continue to encounter roadblocks but have gained some steam in the US. The most recent standards for federal prisons and accrediting bodies in corrections have started to place limits on the use of solitary confinement in US jails and prisons (American Correctional Association, 2018; Department of Justice, 2016; National Commission on Correctional Healthcare, 2016). Many departments of corrections in the US are coming to realize that prolonged solitary confinement is inconsistent with their mission, is often applied disproportionately, results in higher recidivism rates, does not reduce severe misconduct, and/or ultimately, does not make correctional systems or communities safer (Digard, Vanko, & Sullivan, 2018; Gordon, 2014; Lucas & Jones, 2019).

Practical, fiscal, and ethical considerations clearly require that all disciplines in corrections join together to fight for the basic human rights of those in prison or jail and most importantly, those who are in placed in solitary confinement. However, this advocacy work does not negate the unique set of ethical challenges that exist for the thousands of professionals who currently practice in solitary confinement units across America. Given the nature of this type of confinement, there are ethical conflicts that must be acknowledged and addressed when providing care within such an environment. To ignore these ethical issues or dismiss their implications on practice behavior sets professionals up to perform in a way that is ineffective and potentially unethical. Because professional organizations that guide practice for the helping professions have remained relatively silent on the topic of service in this particular setting, a framework for helping professionals in this specialized field is urgently needed. In this paper, the values and principles central to the provision of care to people in solitary confinement from the perspectives of a variety of helping professions will be explored. Additionally, options for ethical decision-making within this context will be used as a guide for those working on solitary confinement units confronted with multiple ethical conflicts.

## **Solitary Confinement**

Numerous research studies and reports have established that there are destructive psychological, emotional, and health-related consequences after even short periods of time in US solitary confinement units (Ahalt et al., 2017; Browne et al., 2011; Cloud, Drucker, Browne, & Parsons, 2015; Department of Justice, 2016; Grassian, 2006; Grassian & Friedman, 1986; Haney, 2003; Haney & Lynch, 1997; Kaba et al., 2014; Kupers, 2017; Lanes, 2009; Ross, 2007; Smith, 2006; Sullivan & Deacon, 2016). Despite the fact that those in solitary confinement account for less than 10% of the US prison/jail population, over 50% of the completed suicides across this system occur among those in restrictive housing (Kaba et al., 2014; Lanes, 2009). While there are a few studies that stand contrary to the established literature on the topic (Mears & Yahner, 2006; O'Keefe, Klebe, Stucker, Sturm, & Leggett, 2010), there is a dearth of any reliable studies supporting the use of solitary confinement as an effective correctional tool (Briggs, Sundt, & Castellano, 2003). Controlling for other factors, those who spend time in solitary confinement during incarceration are more likely to recidivate (Gordon, 2014; Lovell, Johnson, & Cain, 2007), making restrictive housing antithetical to two of the primary purported correctional goals—rehabilitation and community safety. In fact, many correctional systems routinely release inmates directly from restrictive housing to the community with little to no preparation or step-down assistance with adjustment and re-entry (Digard et al., 2018; McGinnis et al., 2014). There is an inconsistent message when correctional institutions deem a person too dangerous, sick, unstable, or problematic to live among the general prison population but perfectly safe to return directly to the community after months/years/decades in solitary confinement—with little, if any, help. This speaks to the deep disconnect between mission and reality that has plagued correctional systems that rely so much on a practice that is counterproductive.

Safe alternatives to the use of restrictive housing exist in abundance and many correctional

systems have or are currently transitioning toward many of these options. Because over half of those in solitary confinement are there for low-level, nonviolent offenses (Digard et al., 2018), the exclusive use of disciplinary sanctions other than solitary (such as restrictions on incentives) for minor rule infractions will generally reduce the restrictive housing population within most correctional systems by a significant amount without sacrificing their ability to regulate behavior. Policies that automatically or disproportionately place vulnerable populations such as the severely mentally ill, juveniles, and the medically compromised (including pregnant women) into solitary confinement can be eliminated and replaced with more creative solutions. Producing pockets of safe spaces—for example, mental health or assisted living units—in which those among special/similar populations can routinely interact with others and receive the services needed in a more nurturing environment is an especially effective alternative. Institutions that employ such a solution are better able to monitor high risk individuals, promote the dignity and worth of those with special needs, and manifest better overall outcomes for their system. To address inmates with more severe behavioral problems, developing a step-down program that begins within a short time of entry into restrictive housing can provide the necessary services and motivation to address the issues underscoring problematic behavior. Step-down programs typically combine steady mental health services or other types of programming with incentive-based increases in exposure to out-of-cell educational, vocational, creative, social, and/or recreational programming. While these safe alternatives are unlikely to result in 100% success, they are certainly more efficient and effective solutions compared to solitary confinement (Glowa-Kollisch et al., 2016; Kupers, 2017; McGinnis et al., 2014).

## **Commitment to Client**

Whether a client is defined as an individual, couple, family, group, organization, or community, commitment in the form of ethical responsibility to

the client is one of the most basic principles of all helping professions. Professional responsibilities to the client are central guiding factors in ethical decision-making and upon which many other professional principles and specific ethical standards are based. To this end, preambles to ethical codes for human service-related professions speak to the primary importance of recognizing, supporting, and ultimately promoting the dignity, strengths, welfare, worth, and/or well-being of clients (American Counseling Association, 2014; American Psychological Association, 2017; National Association of Social Workers, 2017; National Organization of Human Services, 2015). Rarely do other interests interfere with this commitment, and generally speaking, there is little that would supersede this commitment in ethical decision making on the part of any helping professional.

Within solitary confinement, the commitment to client extends to the specific individuals who are confined in isolation. The professional roles may be different, however. Some may involve providing direct services (such as assessment, mental health treatment, programming, classification, or case management) while others encompass more administrative, supervisory, legal, or advocacy-related duties. Helping professionals servicing the needs of clients in solitary confinement in any role should believe that those services are in the best interests of their clients and do not pose a threat to well-being. While there may be issues within the practice setting worthy of further consideration, the specific service and behaviors of the helping professional should be squarely focused on this commitment to client. Therefore, the client's dignity, worth, strengths, welfare, and well-being assume a primary position and any ethical decision made would be required to consider the needs of the client, in the context of the service provided, above most other ethical responsibilities.

Policies for the provision of care on solitary confinement units should reflect what we know about the impacts of this type of housing on psychological and health-related functioning. American Correctional Association (2018)

standards specifically set a frequency of weekly mental health contact and daily healthcare rounds for this purpose, at least for prisons. To mitigate risk of harm and support client goals, solitary confinement should be seen as an urgent mental health condition connected to a protocol that secures access to high-quality, high-intensity services with a qualified mental health provider (Winters, 2018).

Another feature within the commitment to client paradigm is the role of client self-determination. Not all people placed in solitary confinement perceive it as an undesirable experience and it is not entirely unheard of (although still exceedingly rare) for some to prefer to serve their time in that type of environment. Perhaps they feel safer there, prefer a single cell, believe the solitude will be advantageous to the work they must do on their case, or have become institutionalized to the solitary environment. Any number of reasons exist as to why someone would choose to be in solitary confinement or at least conclude the potential benefits outweigh the risks. Unless the client has a diminished capacity for decision-making, a preference for solitary confinement should be supported as a product of client self-determination. But if at any time a client begins to experience the adverse effects of solitary confinement and/or simply changes their mind, then a commitment to client on the part of the professional would require support of this altered need or preference immediately.

A final relevant feature within the commitment to client paradigm is confidentiality. Confidentiality and its limits are particularly complicated in many criminal justice system settings and roles. Information shared by a client in jail or prison, on parole, or as part of a mandated program may have significantly more obstacles and limits to confidentiality than in other areas of practice. Security procedures, the Prison Rape Elimination Act (PREA), reporting mechanisms for contraband, and other specific agency policies may present barriers to the level of confidentiality routinely afforded to clients in solitary confinement. Helping professionals should

seek to provide services only in an environment that can offer confidentiality; ACA guidelines require that correctional institutions provide a space in which the content of sessions between a service provider and those living in solitary confinement are not overheard by correctional personnel or other inmates (American Correctional Association, 2018). Providing “services at the door”—meaning delivering services to an individual in a cell where the provider is located outside the cell door—should never be used as an ongoing form of any service, for evaluation or assessment at any time (except in crisis situations), or to exchange any information that is careless or in any way potentially damaging to clients. Services at the door should only occur as a last resort, under urgent conditions when there is no other option, and should focus solely on the resolution of the current crisis. Thus, it is critical that mental health administrators be proactive in ensuring a confidential space for service provision to clients by working with correctional and security counterparts to dedicate personnel and generate specific procedures that accommodate this requirement. Outside of applicable laws or legal mandates, safety of the client, or duty to warn/protect, human service-related professional ethics generally do not promote other breaches in confidentiality (American Counseling Association, 2014; American Psychological Association, 2017; National Association of Social Workers, 2017; National Organization of Human Services, 2015). If there are additional limits imposed on confidentiality—for example, those pertaining to reporting contraband—then a choice to breach confidentiality falls to the discretion of the professional through the use of deliberate ethical reasoning, and the choice should be made exceptionally clear to the client when beginning services and periodically reinforced throughout service delivery.

### **Commitment to Employer and Practice Setting**

Helping professionals in corrections, as in all other fields, are ethically bound by a commitment

to their employer to follow agency policy but are also expected to inform employers of their ethical responsibilities as a professional. At times, however, there may be unforeseeable agency policies or procedures that constitute a violation of their ethical code of conduct. Situations when agency policy, the needs of the employer, or the actual practice setting come into conflict with an ethical standard of professional practice can be difficult to navigate. Further, correctional institutions and those who work within them are often not bound by the same ethical or professional standards, making it complicated to feel heard and understood.

Dual loyalty in this context is defined as an ethical dilemma in which a professional ethical obligation to a client comes into direct conflict with an explicitly or implicitly understood agency policy and/or third-party interest (Pont, Stöver, & Wolff, 2012). Those in supervisory or administrative positions within correctional systems are most at risk of confronting this ethical dilemma but those in direct service positions might encounter it as well. Ethical standards for human service professionals (Standard 24 & 25), social workers (Code 2.06 a, b & 3.09 b, c, d), psychologists (Code 1.03), and counselors (Code D.1.h) all suggest that constructive efforts should be made within the agency to (1) address the ethical conflict along appropriate channels and among those involved and (2) challenge policies or procedures to eliminate the conflict, enhance client functioning, or reduce potential client harm (American Counseling Association, 2014; American Psychological Association, 2017; National Association of Social Workers, 2017; National Organization of Human Services, 2015). For counselors and social workers, there are additional guidelines to include other avenues such as advancing outside of the agency to professional or accrediting organizations, advocating for improved conditions through public initiatives, and/or voluntary termination of employment if the conflict cannot be resolved internally (American Counseling Association, 2014; National Association of Social Workers, 2017).

In the case of solitary confinement, the



safety of correctional staff and other inmates is the foundation upon which most policies are constructed. Some may argue—with good reason—that correctional policies associated with solitary confinement are more aligned with a punitive culture and/or delivering retaliation; however, the spirit of many of these policies (as opposed to how these policies are implemented) is rooted in a genuine concern for safety that should not be so easily dismissed. Some of these policies are advantageous to the security of the institution and the people who work and live there; others create or contribute to unsafe conditions for clients in solitary confinement that can only be defined as cruel, inhuman, degrading, or torturous.

A decision to use solitary confinement solely for the purpose of protecting inmates and/or staff from immediate harm is a perfectly reasonable course of action. The situation gets a little sticky when due process/review, initial and ongoing, is examined. When someone is placed in restrictive housing, the points and ways in which the system reviews information, formally and informally, for the purpose of reassessing that decision become key indicators of institutional culture. In more progressive systems, these reviews occur very quickly after an initial decision and frequently thereafter using a multidisciplinary team approach (including the client) in a confidential area to assess all available information, including risk of harm to the client caused by this type of confinement and potential safe alternatives, to arrive at an informed decision that offers specific, reasonable steps and a practical timeline off solitary. By contrast, punitive systems implement these reviews very slowly after an initial decision and infrequently thereafter (if at all) using only correctional/security staff, that may not include the client or take place in a confidential area, to justify a decision that has already been made—to extend isolation—without considering the risk of harm to the client caused by this type of confinement, evaluating potential safe alternatives, or offering specific, reasonable steps and a practical timeline off solitary. As you can see, the latter will generate and maintain a high population

in prolonged solitary confinement whereas the former will quickly funnel most people away from prolonged solitary confinement into the most conducive setting that meets their rehabilitation needs.

When solitary confinement policies and/or how they are implemented are likely to create psychological or health-related consequences, such as in the case of prolonged solitary confinement or with vulnerable populations, then these policies should be seen as inconsistent with the ethical standards for helping professionals (United Nations General Assembly, 1982). In these cases, an ethical dilemma exists for those working within a solitary confinement unit—if not any institution that contains this kind of housing and a substandard process for review. In light of this dilemma, any ethical decision-making framework would have to reflect an obligation, at minimum, to attempt to remediate those policies that cause harm to the client or create barriers to healthy client functioning while also balancing the safety concerns of the institution and reducing risk to all.

### **The Ethics of Evaluation and Participation**

Accrediting bodies for correctional institutions generally set standards that require institutions to periodically evaluate the mental fitness of individuals to withstand the solitary confinement environment (American Correctional Association, 2018). These evaluations are to be completed by mental health providers and are used to assess an individual's mental health status, presence of suicidal ideation, current mental health symptoms, and general prognosis/disposition. Further, these evaluations essentially document a person's ability to function in solitary confinement for protracted periods of time. Given what we know about the dangerous effects of solitary confinement, any evaluation that documents someone's capacity to withstand solitary confinement in excess of 14 days (or a member of a vulnerable group for any period of time) places the professional at odds with their ethical responsibilities to their client by

promoting cruel and inhuman treatment (United Nations General Assembly, 1982). The American Psychological Association (2017) recently added a new standard (3.04b) that denies a psychologist the right to participate in or facilitate any type of torture or behavior that is cruel, inhuman, or degrading. While this addition was in response to another problem facing the field of psychology (the use of psychological expertise for enhanced interrogation), it is certainly worth considering here. These restrictive housing evaluations require an action based on professional expertise that creates an avenue for the use of prolonged solitary confinement. If a helping professional possesses knowledge of the damaging effects of prolonged solitary confinement yet chooses to use their professional expertise/credentials to affirm a client's capacity to withstand such effects (outside of those situations covered under self-determination), then they are culpable of facilitating cruel and inhuman treatment.

There is an unfortunate flip side to this evaluation issue, however. When an evaluation documents that an individual is ill-equipped to handle solitary confinement, they are typically placed in a holding cell as a precaution for suicide or self-harm. Stripped of their clothing, personal items, and dignity, they are in worse conditions than a traditional solitary confinement cell. These evaluations thus create a no-win ethical dilemma; the only ethical choice left is to refuse to complete this type of evaluation.

A similar ethical dilemma exists when a helping professional is asked to participate in disciplinary or review committee decisions about solitary confinement classification, especially in cases of prolonged solitary confinement. Because we have established that prolonged solitary confinement, and solitary confinement for any significant length of time with vulnerable populations, are contrary to the ethical standards of professional practice, there would be no situation in which it would be ethical to participate in a decision to impose such a sanction on a client as an ongoing mandate except in those situations covered under

client self-determination. However, it is perfectly reasonable—in fact quite ethical—to participate on a disciplinary or review committee in the position of advocate. Helping professionals can ethically serve on these disciplinary committees to present alternatives to the use of solitary confinement such as increased mental health services, substance abuse treatment, reduced incentives, or other disciplinary sanctions that are more ethical. For review committees, helping professionals can offer context to behaviors and advocate for reduced solitary confinement time, promote increased mental health services in solitary confinement, introduce information on the risk of harm posed by this type of confinement on the client, and work within the system to develop step-down programs and other safe alternatives.

## **Conclusion**

As social work, human service, psychology, and counseling professionals, we have an obligation to ourselves, our clients, our agencies, and our professions to provide services with integrity based on solid ethical standards. Sometimes that isn't easy, and in the case of solitary confinement, it certainly is not. The purpose of this article was to provide information within an ethical framework and process to help those who are currently working in solitary confinement, although some components could easily apply to those working anywhere in the criminal justice system. It was also intended to inform others and increase awareness of what is happening behind the walls of jails and prisons across the US. Join a local/state/national/international group dedicated to addressing this issue, lobby your professional organization for a position statement on solitary confinement, or offer to assist your local jail or state prison system in implementing the safe alternatives outlined in this article. With action, activists and advocates of all kinds can join the fight to reduce or eliminate the use of solitary confinement across the US.

## **References**

Ahalt, C., Haney, C., Rios, S., Fox, M. P., Farabee, D., & Williams, B. (2017). Reducing the

- use and impact of solitary confinement in corrections. *International Journal of Prisoner Health*, 13(1), 41–48.
- American Correctional Association. (2018). Restrictivehousingexpectedpractices. Retrieved from [http://www.aca.org/ACA\\_Prod\\_IMIS/ACA\\_Member/Standards\\_\\_Accreditation/Standards/Restrictive\\_Housing\\_Committee/ACA\\_Member/Standards and Accreditation/Restrictive\\_Housing\\_Committee/Restrictive\\_Housing\\_Committee.aspx?hkey=458418a3-8c6c-48bb-93e2-b1fcbca482a2](http://www.aca.org/ACA_Prod_IMIS/ACA_Member/Standards__Accreditation/Standards/Restrictive_Housing_Committee/ACA_Member/Standards and Accreditation/Restrictive_Housing_Committee/Restrictive_Housing_Committee.aspx?hkey=458418a3-8c6c-48bb-93e2-b1fcbca482a2)
- American Counseling Association. (2014). ACA code of ethics. Retrieved from [https://www.counseling.org/docs/default-source/ethics/2014-aca-code-of-ethics.pdf?sfvrsn=fde89426\\_5](https://www.counseling.org/docs/default-source/ethics/2014-aca-code-of-ethics.pdf?sfvrsn=fde89426_5)
- American Psychological Association. (2017). Ethical principles of psychologists and code of conduct. Retrieved from <http://www.apa.org/ethics/code/ethics-code-2017.pdf>
- Ayan, A., Baykal, T., Beynon, J., Dromer, C., Fincancı, Ş. K., Gautier, A., . . . Wernicke, M. (2007). *Istanbul Statement*. Paper presented at the International Psychological Trauma Symposium Istanbul, Turkey. Retrieved from [http://solitaryconfinement.org/uploads/Istanbul\\_expert\\_statement\\_on\\_sc.pdf](http://solitaryconfinement.org/uploads/Istanbul_expert_statement_on_sc.pdf)
- Beck, A. (2015). Use of restrictive housing in U.S. prisons and jails, 2011–12. Office of Justice Programs: Bureau of Justice Statistics. Retrieved from <https://www.bjs.gov/content/pub/pdf/urhuspj1112.pdf>
- Briggs, C., Sundt, J., & Castellano, T. (2003). Effect of supermaximum security prisons on aggregate levels of institutional violence. *Criminology*, 41(4), 1341–1376.
- Browne, A., Cambier, A., & Agha, S. (2011). Prisons within prisons: The use of segregation in the United States. *Federal Sentencing Reporter*, 24(1), 46–49.
- Cloud, D. H., Drucker, E., Browne, A., & Parsons, J. (2015). Public health and solitary confinement in the United States. *American Journal of Public Health*, 105(1), 18–26.
- Department of Justice. (2016). Report and recommendations concerning the use of restrictive housing. Office of the Deputy Attorney General. Retrieved from <https://www.justice.gov/archives/dag/report-and-recommendations-concerning-use-restrictive-housing>
- Digard, L., Vanko, E., & Sullivan, S. (2018). Rethinking restrictive housing: Lessons from five U.S. jail and prison systems. Vera Institute of Justice. Retrieved from [https://storage.googleapis.com/vera-web-assets/downloads/Publications/rethinking-restrictive-housing/legacy\\_downloads/rethinking-restrictive-housing-report.pdf](https://storage.googleapis.com/vera-web-assets/downloads/Publications/rethinking-restrictive-housing/legacy_downloads/rethinking-restrictive-housing-report.pdf)
- Glowa-Kollisch, S., Kaba, F., Waters, A., Leung, Y. J., Ford, E., & Venters, H. (2016). From punishment to treatment: The “clinical alternative to punitive segregation” (CAPS) program in New York City jails. *International Journal of Environmental Research and Public Health*, 13(2), 182. <https://doi.org/10.3390/ijerph13020182>
- Gordon, S. E. (2014). Solitary confinement, public safety, and recidivism. *University of Michigan Journal of Law Reform*, 47(2), 495–528. Retrieved from <https://repository.law.umich.edu/mjlr>
- Government Accountability Office. (2013). *Bureau of Prisons: Improvements needed in Bureau of Prisons’ monitoring and evaluation of impact of segregated housing*. (U.S. Government Accountability Office Publication GAO-13-429). Retrieved from <http://www.gao.gov/assets/660/654349.pdf>.
- Grassian, S. (2006). Psychiatric effects of solitary confinement. *Washington University Journal of Law and Policy*, 22, 325–384. Retrieved from [http://openscholarship.wustl.edu/law\\_journal\\_law\\_policy](http://openscholarship.wustl.edu/law_journal_law_policy)
- Grassian, S., & Friedman, N. (1986). Effects of sensory deprivation in psychiatric seclusion and solitary confinement. *International Journal of Law and Psychiatry*, 8(1), 49–65.

- Haney, C. (2003). Mental health issues in long-term solitary and “supermax” confinement. *Crime & Delinquency*, 49(1), 124–156.
- Haney, C., & Lynch, M. (1997). Regulating prisons of the future: A psychological analysis of supermax and solitary confinement. *N.Y.U. Review of Law & Social Change*, 23, 477–570.
- Kaba, F., Lewis, A., Glowa-Kollisch, S., Hadler, J., Lee, D., Alper, H., . . . Venters, H. (2014). Solitary confinement and risk of self-harm among jail inmates. *American Journal of Public Health*, 104(3), 442–447.
- Kaeble, D., & Glaze, L. (2016). Correctional populations in the United States, 2015. Office of Justice Programs: Bureau of Justice Statistics. Retrieved from <https://www.bjs.gov/content/pub/pdf/cpus15.pdf>
- Kupers, T. (2017). *Solitary: The inside story of supermax isolation and how we can abolish it*. Oakland, California: University of California Press.
- Lanes, E. (2009). The association of administrative segregation placement and other risk factors with the self-injury-free time of male prisoners. *Journal of Offender Rehabilitation*, 48(6), 529–546.
- Lovell, D., Johnson, L. C., & Cain, K. C. (2007). Recidivism of supermax prisoners in Washington state. *Crime & Delinquency*, 53(4), 633–656.
- Lucas, J. W., & Jones, M. A. (2019). An analysis of the deterrent effects of disciplinary segregation on institutional rule violation rates. *Criminal Justice Policy Review* 30(5), 765–787.
- McGinnis, K., Austin, J., Becker, K., Fields, L., Lane, M., Maloney, M., . . . Felix, T. (2014). *Federal Bureau of Prisons: Special housing unit review and assessment*. CNA, Institute for Public Research. Retrieved from [https://www.bop.gov/resources/news/pdfs/CNA-SHURReportFinal\\_123014\\_2.pdf](https://www.bop.gov/resources/news/pdfs/CNA-SHURReportFinal_123014_2.pdf).
- Mears, D., & Yahner, J. (2006). Wardens’ views on the wisdom of supermax prisons. *Crime & Delinquency*, 52(3), 398–431.
- Méndez, J. (2013). *Interim report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment*. United Nations General Assembly document A/68/295. Retrieved from [https://www.unodc.org/documents/justice-and-prison-reform/SPECIAL\\_RAPPORTEUR\\_EN.pdf](https://www.unodc.org/documents/justice-and-prison-reform/SPECIAL_RAPPORTEUR_EN.pdf)
- National Association of Social Workers. (2017). NASW Code of Ethics. Retrieved from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>
- National Commission on Correctional Healthcare. (2016). Position statement: Solitary confinement (isolation). Retrieved from <https://www.ncchc.org/solitary-confinement>
- National Organization of Human Services. (2015). Ethical standards for human services professionals. Retrieved from <http://www.nationalhumanservices.org/ethical-standards-for-hs-professionals>
- O’Keefe, M., Klebe, K., Stucker, A., Sturm, K., & Leggett, W. (2010). *One year longitudinal study of the psychological effects of administrative segregation*. National Institute of Justice grant-supported report. Retrieved from <https://www.ncjrs.gov/pdffiles1/nij/grants/232973.pdf>.
- Pont, J., Stöver, H., & Wolff, H. (2012). Dual loyalty in prison health care. *American Journal of Public Health*, 102(3), 475–480.
- Ross, J. I. (2007). Supermax prisons. *Society*, 44(3), 60–64.
- Shalev, S. (2014). 5. Solitary confinement as a prison health issue. In S, Enggist, L. Møller, G. Galea & C. Udesen (Eds.), *Prisons and Health* (27–35). Copenhagen, DK: World Health Organization. Available from [http://www.euro.who.int/\\_\\_data/assets/pdf\\_file/0005/249188/Prisons-and-Health.pdf](http://www.euro.who.int/__data/assets/pdf_file/0005/249188/Prisons-and-Health.pdf)
- Smith, P. (2006). The effects of solitary confinement on prison inmates: A brief history and review of the literature. *Crime and Justice*, 34(1), 441–528.
- Sullivan, D. & Deacon, A. (2016). Solitary confinement: Going down the rabbit hole. *Journal of Law & Medicine*, 24(1), 20–34.

- United Nations General Assembly. (1982). Resolution 37/194: Principles of medical ethics. Retrieved from <http://www.un.org/documents/ga/res/37/a37r194.htm>
- United Nations General Assembly. (1984). *Convention against torture and other cruel, inhuman or degrading treatment or punishment*. Assembly Resolution 39/46. Retrieved from <https://www.refworld.org/docid/3ae6b3a94.html>
- Winters, A. (2018). Alone in isolation: A clinician's guide to women in solitary confinement. *Criminal Behaviour and Mental Health*, 28(3), 217–222.

# Collision: An opportunity for growth? Māori social workers' collision of their personal, professional, and cultural worlds and the values and ethical challenges within this experience

Andrea Watson, MSW (Ph.D. candidate)  
Massey University, New Zealand  
[A.M.Watson@massey.ac.nz](mailto:A.M.Watson@massey.ac.nz)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

Reamer (2013a) identifies that the most difficult ethical dilemmas happen for social workers when their personal and professional worlds conflict. Māori (indigenous people to New Zealand) social workers (kaimahi) often live and work in the same area as their whānau (extended family), hapū (sub tribe) and iwi (tribe) and there is a high chance that members of their own whānau will come through the organisation where they work. This is when kaimahi might experience a collision of their personal, professional and cultural worlds. It is the domain where the three different systems have to interact—a professional system, a whānau system, and a cultural system and many values and ethics can conflict.

This article draws upon a research study that involved interviewing seven kaimahi who had experienced collision and explored their encounter of these collisions. A focus area of the research was on the well-being of kaimahi through this collision and how kaimahi values and ethics are impacted by the collision experience.

A key finding from this study reveals that collision is a complex area that requires careful navigation by kaimahi and the organisation they work for. It is imperative that kaimahi and managers discuss

and plan for collision as opposed to waiting until it happens, and organisations should have policies and protocols in place for working with whānau. This research also developed a definition and construction of what collision is in the social services and kaimahi have imparted words of wisdom so that others experiencing collision may find a way forward.

*Keywords:* collision, kaimahi, whānau, personal, professional.

## Introduction

The profession of social work is value-laden, and issues of values, ethics and boundaries underpin social work practice (Reamer 2013a). Banks (2006) informs us that a distinguishing feature of social work is that generally the profession has a code of ethics shaped by a professional body. Social work practitioners in New Zealand are guided by the SWRB Code of Conduct (SWRB, 2016), Aotearoa New Zealand Association of Social Workers (ANZASW) Code of Ethics (ANZASW, 2015) and organisational policies and procedures for guidance regarding ethical and boundary issues in social work.

Māori social workers (kaimahi) are consistently faced with conflicting cultural tensions and differences in their practice, and most have

found a way to work effectively in both the Māori and Pākehā (non-indigenous) worlds. Kaimahi have had to grow strength and resilience to achieve this, and at times this may cause challenges and dilemmas for them. Add into this mix, kaimahi own whānau (family) coming through services they work in and there is the potential for a 'smack-bang' collision.

This article presents findings from research on Māori social workers' experiences of collision. First, by exploring what the collision zone in social work is in relation to general literature on ethics and values in social work. Second, the specific challenges, ethical dilemmas and boundary issues faced by kaimahi in their practice are considered (including dual roles and accountability, conflicting cultural tensions, dilemmas of biculturalism in practice and the issue of collusion). Finally, suggestions drawn from the research are presented, including the need for appropriate supervision for kaimahi; reviewing protocols for working with whānau; and appropriate support for kaimahi.

### **The Collision Zone**

The research was titled *Tukia: Mā te hē, ka tika—Māori social workers' experiences of the collision of their personal, professional and cultural worlds*. The study focussed on seven kaimahi who had experienced Tukia (collision) and explored their encounter with Tukia—what helped, what hindered, what could have helped, and words of wisdom they would pass on to others experiencing collision. The methodology utilised Kaupapa Māori, and Pūrākau (stories) to connect the research to Māori Worldviews, and the research framework was guided by Pā Harakeke (flax bush learnings). It is not the intent in this article to unfurl the methodology—this will be done in a future article.

A focus area of the collision research was on the well-being of kaimahi through this collision and how kaimahi values and ethics are impacted by the collision experience. A key message from the perspectives of the participants was that "*Out of the big bang comes the growth*" and that kaimahi

could come out the other side of their collision with it becoming a lived experience that may strengthen and deepen their social work practice.

In this research kaimahi are social workers who identified themselves as Māori, tangata whenua o Aotearoa (indigenous people of New Zealand). This research explored how kaimahi managed the collision experience of their personal, professional and cultural worlds and what factors helped or hindered this process.

### **What Is Collision? *Whack—the Biggest Mack Truck Ever!***

The collision zone in social work can be likened to the collision zone in rugby—it is hard-hitting, can be unexpected and can leave you winded, or worst still, wounded and sent off the field with an injury! Collision is used to describe the crashing together of a practitioner's personal, professional and cultural worlds. Other words could have been used to describe this such as clash, conflict or tension; however, the word 'collision' was the most accurate to describe a violent crashing together of worlds causing an impact. The cultural dimension of the collision focused on the fact that all the research participants were Māori, may have a Māori worldview, and may also be culturally impacted by the collision, hence the personal-professional-cultural worlds' collision. The Māori word 'tukia' is utilised to describe collision; tukia means to ram and crash into ([www.Māoridictionary.co.nz](http://www.Māoridictionary.co.nz)). It can also be used to describe the ramming of a bull's horns (I. Noble, personal communication 25 February 2017). The title of the thesis, *Tukia: Mā te hē, ka tika*, translates to "Collision: Through trial and tribulation and experience, rightness or correctness is achieved, therefore we gain learning through our mistakes and experiences" (I. Noble, personal communication, 25 February 2017). This depicts a view of well-being that underpins my own practice and a belief that even though we can have experiences in life that are challenging and negative, these experiences can lead to our own personal growth and development and eventually a place of wellness and well-being. Underpinning this are western models of resilience

(Ungar, 2012) strengths based perspective (Saleebey 1997, 2002) and Post-Traumatic Growth (Tedeschi & Calhoun, 1995; Van Slyke, 2015; Zoellner & Maercker, 2006).

An outcome of this research was the construction of a definition of collision. This is encompassed in the words outlined by kaimahi to describe collision including: “clashes”, “conflict”, “bedlam”, “emotional”, “interface”, “impact”, “big bang”, and “Whack—the biggest Mack truck ever!” Collision was defined as clashes/conflicts between kaimahi and the organisation they work for, the clash of cultures (Māori/Pākehā) and a lack of understanding of cultures, conflict between the genders, the conflict between kaimahi with their own family, and whānau expectations of kaimahi in social work roles. Collision was also defined as being about different perspectives and forming relationships to create a bridging between those differences. The tāne (men) viewed collision quite generally and as not being a ‘big deal’ whereas the women were greatly impacted. Collision was defined personally because of the personal experience of it, and emotionally because of the emotional and internal reaction to it; this sense was conveyed in the following comment:

It's the reaction internally that creates the collision ... I start getting that whole feeling in my puku (stomach) of that dilemma and I feel frozen, not knowing what to do or where to go from here ... It's kind of like the puku, the heart and the head and they all clash.

Collision could also be a “layered, impacting intergenerational trauma,” where there is a whole series of impacts happening at once; and, finally, collision can result in positive growth:

Out of the big bang comes the growth, the realization, the magic, the power of creation ... I like to see it as every collision is purposeful—it's meant to be.

In summary, although collision for kaimahi in social work can be hard-hitting and impacting, and feel like being hit by a big Mack truck, it can eventually lead to positive growth for the kaimahi.

## **General Literature on Ethics and Values**

This section attempts to ground general ethics and values in western worldviews first before introducing ethical and boundary issues specifically faced by kaimahi as Māori social workers.

There is significant literature regarding ethics, professionalism and accountability in general social work (Banks 2006, 2008, 2011; Doel, Allmark, Conway, Cowburn, Flynn, Nelson and Tod, 2010; Hugman (in Davies), 2013; Mattison, 2003; Reamer 2001, Reamer 2013b).

Mattison (2003) affirms that social workers can develop ethical reasoning to assist in preventing errors in judgment and that in addressing ethical dilemmas, social workers often fail to acknowledge and accept that personal values, lived experiences, and other influences, for example, culture and beliefs can impact on professional decisions. Professional boundaries is a complex area that is subject to a range of interpretation (Banks 2006, 2008, 2011; Congress, 1999; Dewane, 2010; Doel et al., 2010; Fine & Teram, 2009; Reamer 2003). For Doel et al., the word ‘boundary’ is full of ambiguities and describes “what is acceptable and unacceptable for a professional to do, both at work and outside of it, and also the boundaries of a professional’s practice” (2010, p.1867). While Reamer (2003) affirms that skillful management of boundary issues can enhance the ethical integrity of social work.

Banks also highlights that for social workers there can be issues around professional roles, boundaries and relationships and suggests that there needs to be “considerations of issues of boundaries between personal, professional and political life” (2006, p. 14). Reamer (2013a) highlights that for social workers the most difficult ethical dilemmas can happen when their personal and professional values conflict. There is a suggestion that a separation of the personal and professional is necessary, however,



this thinking sees the social worker as separate from their private self (Banks, 2006). In social work the practitioner is the tool so the use of self is critical (Weld & Appleton, 2014). Reupert (2009) claims that self-awareness is essential in the helping relationship and that the use of self is not incidental, unconscious and inevitable and that, “There are risks involved in the involvement of self, there are also costs in not involving the self” (2009, p. 775). Weld and Appleton clarify that the personal self is about, “who we are as people, what we bring from our life journey, our socialisation, our families, choices, experiences and personality” (2014, p. 16).

Kaimahi bring their life experiences to their mahi (work) as social workers and often acknowledge and accept that their personal values, lived experiences, and cultural influences may impact on the professional decisions they make. Walsh-Mooney (2009) shares that clinicians should have essential knowledge of self, however that in trying to establish rapport with clients the ‘use of self’ is disputed. She also reveals that, “for Māori the sharing of self starts at the very beginning when whakapapa (family history) is shared and connections are made” (2009, p. 70). This is particularly relevant as in the Māori world it is essential that connections to each other are made.

The next section will consider the ethics and boundary issues specific to kaimahi in the research.

### **Challenges, Ethical Dilemmas and Boundary Issues Faced by Kaimahi**

Several challenges, ethical dilemmas and boundary issues were identified by kaimahi experiencing collision. This section explores dual roles and accountability, conflicting cultural tensions, issues of biculturalism in practice, and the issue of colluding.

#### **Dual Accountability and Roles for Māori —“Which Hat—Professional or Nana Hat?”**

Dual accountability and roles for Māori practitioners are outlined by Collins, 2006; Love,

2002; Moyle, 2013; and Wilson and Baker, 2012. Collins (2006) discusses dual accountability for herself as a Māori researcher and a member of a community—the tension being her responsibility and accountability to her community, her iwi (tribal affiliations), and to her research academy. She found that at times her dual roles were “incompatible as they incorporated different contexts and agendas” (2006, p. 31-32). She also discussed the dilemmas of double perspective of insider-outsider dichotomy where as an insider someone is a member and a participant of the group being researched but as an outsider you are a researcher and observer with a set agenda. With the collision research, kaimahi experienced that same tension (i.e., responsibility and accountability to whānau [extended family], hapū [sub-tribe] and iwi [tribal affiliations] and responsibility and accountability to their organization or place of work). Moyle (2013) in her research on challenges faced by Māori social workers within the care and protection system, highlighted issues of dual accountability as well.

Many kaimahi interviewed for this research were working in their whānau, hapū and iwi areas so the chances of their own whānau coming into services was high. O’Leary et al. (2012) discuss dual relationships as social workers requiring a professional relationship as well as social contact. Issues of dual role accountabilities for kaimahi included the dilemma of managing being a professional social worker and being a whānau member. This could also involve being a Child, Youth and Family (CYF—now called Oranga Tamariki) social worker and CYF caregiver at the same time, or supporting whānau going through the CYF system, or being a whānau member in the CYF system, for example, attending a Family Group Conference (FGC) as a whānau member. Other issues included being able to manage working in the same office as the CYF social worker of their mokopuna (grandchild/ren), and being approached in work time to talk about their personal whānau situation. One participant likened it to having two hats—a ‘professional hat’ and a ‘Nana hat’. She went on to explain that she wore both hats and

that the roles cannot be separated because 'you are who you are'. Three kaimahi talked about trying to separate the roles by having clear, defined boundaries between the personal and professional worlds.

Most kaimahi discussed the grey boundary issues and how boundary crossings occurred. This could work two ways (e.g., colleagues crossing boundaries by asking about personal whānau situation during work time, or kaimahi approaching a colleague in their organisation to discuss their personal whānau situation). These were areas that were unclear and obscure at times as often the kaimahi and their workplace were trying to navigate the processes where there were no firm policies regarding managing this. Kaimahi shared that it was important to declare your personal and professional role immediately to your workplace if a referral for a whānau member came into your service. One participant's professionalism was brought into question by CYF when her own mokopuna were involved in a notification to CYF—they questioned whether she would be able to be professional when her own mokopuna were involved.

Another ethical dilemma for kaimahi was to not use privileged position as a social worker to look up information on work databases or approach the police, who kaimahi had a relationship with, to acquire more information. There are challenges in this, particularly if there are unanswered questions for kaimahi and whānau, however this was identified by kaimahi as a clear cut boundary violation (Reamer, 2013a).

The implications for kaimahi and organisations are that this is a complex area that requires careful navigation by the kaimahi experiencing collision and also the organisation that the kaimahi works for. This raises the issue of the importance of managers and social workers in being able to talk about collisions, this would be in the form of sharing that this is an issue for social workers and that inevitably can happen, particularly for Māori social workers. It would also be a matter of appropriate discussion of the term collision and

then appropriate planning for collision, as opposed to waiting until it happens in organisations.

### **Conflicting Cultural Tensions— “A White House and a Māori Whare”**

For kaimahi working in mainstream services conflict was experienced between their cultural values and beliefs and those that were dominant in their workplaces. Some kaimahi shared the challenges of working under Pākehā (non-indigenous) systems and questioned whether some of these systems were tokenistic, for example, the way karakia (incantation/prayer) was implemented in their workplace and some non-Māori colleagues expressed that they did not see the value of karakia and would 'bear' it. Moyle (2013) discussed the difficulties encountered for her participants of walking creatively between two worlds and likened it to walking a tightrope whereby they are attempting to traverse Te Ao Māori (the Māori world) and Te Ao Pākehā (the western world) whilst attempting to manage their own personal and professional identity. One kaimahi in the collision research discussed the conflicting cultural tensions as having two houses—a White house (where the kaimahi works) and a Māori whare (house where the kaimahi lives) and talked about the Māori whare having a consistent tikanga (customary correct and right procedure) being built around respect and all the principles of the Māori whare—Kaitiakitanga (guardianship, stewardship), manaakitanga (the process of showing respect, generosity and care for others), aroha ki te tangata (respect for people). However the white house had procedures and policies that the kaimahi saw getting broken every day—these being the policies that guide the organisation. Another kaimahi discussed this tension as two currents clashing and used the metaphor of fire alarm boxes on a wall and there being two—one is Pākehā and one is Māori, and that some Māori can break the two boxes (i.e., can live in both worlds); however, some Pākehā will always default back to their own system because that is their hidden safety bias. The kaimahi used the analogy of the fire alarms to reiterate that although

kaimahi may be immersed in their Māori world, they have learned how to work in mainstream, sometimes quite effectively, and can move between the two worlds successfully, however this can cause them challenge.

Wilson and Baker's (2012) research findings confirmed that Māori nurses face many conflicting cultural tensions between their Māori cultural perspective and their medical profession. Moyle (2013) reiterates this point stating that Māori practitioners face the dual burden of professional and cultural expectations in organisations as well as from communities. Elder's (2008) research explored Māori cultural identity of Māori psychiatrists and registrars who worked with children and their whānau. The findings of this research was that Māori doctors "work differently" and apply "tikanga Māori working methods" (2008, p. 203) in their work as doctors. This is the experience for many Māori social workers as well. English et al. (2011) discuss how Social Workers in Schools (SWiS) kaimahi go the 'extra mile' when advocating on behalf of the whānau they work alongside. They expressed that at times this may cause professional dilemmas for them such as coming into conflict with other professionals because the kaimahi may advocate for tikanga Māori proceedings to be utilised when working with whānau.

Although kaimahi are consistently faced with conflicting cultural tensions, most have found a way to work effectively in both worlds—Te Ao Māori and Te Ao Pākehā; however, this can be a balancing act for them. The implications of this are that there are strong, resilient kaimahi, who may face these conflicting cultural tensions, but are working effectively and successfully in the two worlds. Moyle stated that her participants (Māori social workers), "walked creatively between two worldviews in order to best meet the needs of their own people ... felt over-worked and under-valued" (2014, p. 55). This is an issue facing many kaimahi who are walking between two worlds—the Māori and Pākehā worlds. Participants in Moyle's research talked about having to work twice as hard to get the

job done and work as an in-between. Moyle linked the Māori 'in between role' to Indigenous Australian social workers and stated that Indigenous workers "walk a tightrope between two worldviews whilst at the same time managing their own personal and professional identity" (2014, p. 56). These conflicting cultural tensions can lead to 'Brown Face Burnout'.

Hollis-English (2012, 2016) and Moyle (2014) discuss "brown face burn-out" being the result of Māori social workers being unhappy in their work and being overworked. Hollis-English (2016) outlined that Maori staff have an "additional qualification: being Māori is an attribute that is brought to engagement with Māori clients" (2016, p. 73). Moyle states that this burnout is due to, "cultural expectations and additional responsibilities because of being Māori" (2014, p. 57). Sometimes Māori social workers have expectations put upon them in mainstream services and this can lead to cultural burn-out for kaimahi Māori.

### **Biculturalism in Practice—*"You Are a Whakapapa Emancipation of a Paepae That Has Dual Culture on It!"***

The above quote came from a kaimahi in the collision research and talks about the history of Aotearoa (New Zealand) and how this includes having a dual culture—Māori and Pākehā, and that contemporary Māori are a product of this. Kaimahi observed that some people can sit in the middle ground and speak two worldviews and become the people that knit the two worldviews together. These are the people who can '*meet at the border*'. Kaimahi ascertain that some Pākehā colleagues are '*allies*' and keen to learn and embrace biculturalism, can work Māori principles into their practice, and are working effectively with whānau Māori. Finding this middle ground allows for Māori and non-Māori to move forward. Munford and Sanders (2011) explored how Māori frameworks have influenced mainstream social work practice. Their findings confirmed that Te Aō Māori constructs have influenced, strengthened and affirmed mainstream

social work practice in Aotearoa and brought “vibrancy” to practice and “shaped” mainstream practice.

In mainstream services kaimahi are utilising Te Ao Māori concepts in their practice and have much to contribute to the social work profession. It would be beneficial for all to see these utilised in mainstream practice, particularly in organisations that have significantly high Māori participation. However, three kaimahi had concerns with trying to fit Māori culture into a non-Māori workplace because their experience was that Pākehā will often have expectations of Māori within mainstream, will try to tell Māori to do Māori things in a Pākehā way, and that Pākehā control Māori processes in mainstream. To utilise Te Ao Māori effectively in mainstream will require Māori spearheading and monitoring this process.

Another challenge faced by kaimahi is the dilemma of possible colluding.

### **Colluding—“What’s That Word? We’re Colluding”**

At times whānau placed expectations onto kaimahi and assumed that because kaimahi worked in the social work field, they would be fine and would know what to do next. Kaimahi admitted that at times they would freeze and not know the best way to proceed. Albert’s (2013) study explored social work practice development by Māori women and noted that one participant found that she had challenges from dealing with her own whānau who had expectations that she would ‘collude’ with them. In the collision research, when discussing boundary issues, one kaimahi shared that she did not want the father of her mokopuna (grandchild) to accuse her of ‘colluding’ because of her professional role at CYF so she took clear steps to not cross boundaries by not discussing her case with her colleagues and Police. Another kaimahi shared that with her collision the mother of her mokopuna made a complaint to the kaimahi service stating that she (kaimahi) had broken confidentiality and there were possible issues of collusion. One kaimahi shared that Māori social workers have embedded Māori

principles into their practice but may have ‘hidden’ this because, “from a mainstream view they consider it wrong, they consider it, what’s the word? We’re colluding”. Another element to colluding is raised in Hollis-English’s (2012) research in that some Māori social workers viewed other Māori social workers as contributing to colluding with the organisation they worked for and that these workers were “not rowing in the same direction in terms of Māori development or strategic planning or forward planning for Māori” (2012, p. 174). In the collision research colluding seemed to be a concept that kaimahi felt their own whānau might expect them to do, their mainstream organisation may expect that they are already doing, some of their Māori peers may already be doing within organisations that they work in, and kaimahi are worried that they will be expected to do this or be accused of doing this. A question raised from the collision research is how do kaimahi manage this issue of colluding? This is another dilemma for kaimahi.

### **Suggestions From the Collision Research**

The research findings from the collision research suggests that organisations need to have specific protocols for working with own family, there needs to be appropriate supervision for kaimahi, and collision needs to be discussed and planned for, and appropriate support for kaimahi be provided.

### **Review Protocols for Working With Own Family—“Are You Asking Me as a Social Worker for CYF or as a Whānau Member?”**

Five of the seven kaimahi were working for or had worked for CYF in the past. Three kaimahi shared that they did not support the CYF belief/policy that social worker’s judgement is compromised when their own family are involved in cases, which has resulted in social workers being excluded from working with their own family (immediate or extended). The rationale presented by kaimahi was that they have inside information

of their own whānau, know what is going on, and can get to the 'true' issues more effectively than an outsider who has no knowledge of the whānau whakapapa (family history) and dynamics. A kaimahi who worked for CYF when her collision experience happened did not feel she was treated respectfully by CYF in the process, particularly as numerous ethical and boundary issues were crossed, even with the existing policies surrounding working with their own family.

The kaimahi stated that there needed to be better communication and clearer boundaries in terms of when and what should be discussed by management and peers with kaimahi during work time. These are complex issues as one of the reasons for excluding workers from being involved with their own family is about protecting the worker, the client and the agency. These areas were obscure for the kaimahi and their whānau, and may also be so for the social workers, supervisors, and managers in terms of how to manage the dynamics effectively. This raises the question 'Is there a better way to manage this process for all concerned?' Kaimahi in the research suggested that CYF should have new protocols for working with own whānau, and having protocols in place for when working with own whānau would be beneficial for practitioners and the organisations they work in. There needs to be clear communication and clear boundaries in terms of when and what should be discussed by management and kaimahi during work time.

**Appropriate Supervision  
for Kaimahi—*"They're Not  
Supervisors Because They're Good  
Supervisors ... You Know the  
Grandad Stuff the Longer You've  
Been There, You Move Up"***

Social workers work with and within complexity and require effective systems to process their work—the system that assists this process is supervision (O'Donoghue 2003; O'Donoghue & Tsui 2013). Kaimahi affirmed that supervision has to be good to help them manage this complexity. Supervision gives kaimahi the time to stop and

reflect on what they have or have not done. Effective supervision helped some kaimahi to manage their collision experiences; however a lack of appropriate and quality supervision definitely hindered the process for others. One participant stated that supervisors in CYF were often not adequate to meet social workers needs because they lacked practice wisdom and were often thrown into the roles. This kaimahi also stated that there is a tendency to promote social workers very quickly therefore they may not have yet developed sufficient knowledge, skills and practice wisdom to take on the supervision role. ANZASW (2015) and SWRB (2016) clearly state in their Supervision Expectations and Supervision Policies, Māori social workers' supervision should be underpinned by Te Tiriti o Waitangi (The Treaty of Waitangi) and Māori cultural worldview. This is a challenge for those who supervise kaimahi as interpretation of Te Tiriti o Waitangi and worldview are viewed differently, particularly between Māori and non-Māori. One kaimahi reported on supervision that was culturally appropriate and beneficial to her because her supervisor was Māori and had knowledge and understanding of the concepts of Mauri ora (a workforce development programme based on cultural imperatives when working alongside whānau from a place of kahupo (state of disease) to toiora (state of total well-being) ([www.tekorowaiaroa.org](http://www.tekorowaiaroa.org)). This supervisor had training from Te Korowai Aroha (an Indigenous Education and Training Institution) who educate practitioners on Mauri ora. This was a good 'fit' for her supervision needs and she reported the supervision experience as significantly beneficial, particularly through her collision experience.

O'Donoghue and Tsui (2012) identified the need for indigenous models of supervision and appropriate cultural training for supervisors. They also reported that the supervision literature in Aotearoa (New Zealand) was monocultural, revealing the dominant Pākehā culture, and that bicultural and Māori supervision models were not well understood by Pākehā (2012). Walsh-Tapiata and Webster also assert that the supervision experience for Māori social workers is based in a,

“western mono-cultural framework” (2004, p. 15). Bradley, Jacob and Bradley identified that Māori worldview should be the base for supervision for Māori. “Maori have a set of key cultural values and principles ... that underpins Māori practice methods, and therefore workers need supervisors who are conversant and confident with these values” (1999, p. 3).

There is emerging literature on supervision for kaimahi Māori showcasing that supervision models need to be more embracing of Māori worldview (Eketone, 2012; Elkington, 2014; Eruera, 2005, 2012; King, 2014; Lipsham, 2012; Murray, 2012). Studies have also noted the benefits for Māori workers of Kaupapa Māori supervision as a safe, professional approach to supervision utilising a Māori worldview, values and beliefs in practice and a ‘by Māori for Māori’ approach (Eruera, 2005, Elkington, 2014, and Walsh-Tapiata & Webster, 2004). Elkington further highlights that non-Māori need to be aware of “mono-cultural values and their contribution to ineffective social service delivery particularly when faced by the high statistics of Māori service use” (2014, p. 72). Eketone (2012) explored ‘culturally effective supervision’ in Aotearoa and disclosed that Māori workers believed that there was no valuing of cultural supervision, and that organisations did not understand that workers live and exist in their Māori communities. One worker found their agency’s attitude to cultural supervision left them in a dilemma because they were accountable to a tauwi system that told them how to be accountable to Māori (Eketone, 2012).

As the emerging literature confirms there is a need and a place for Māori models of supervision and supervisors need knowledge and experience of Te Aō Māori, an understanding of the practice implications of Te Tiriti o Waitangi and an understanding of monocultural biases and how these can impede practice.

### **Discussion and Appropriate Planning for Collision**

Kaimahi and the organisations they work for generally do not talk about or have plans for

managing collisions of personal, professional and cultural worlds. For kaimahi working in their tribal areas these collisions may be inevitable. Another suggestion from the collision research is that discussion and appropriate planning for collision occur between kaimahi and their organisations before collisions actually happen—the same way that kaimahi are encouraged to have a self-care plan (as opposed until waiting until one is necessary and needed). There should be discussions regarding the possibility of collision for kaimahi if their own whānau come through the service they work in, and organisations should have processes and/or protocols in terms of how to best manage these collisions. These should include details of ethical/boundary issues to consider, cultural issues and how the organisation may seek help and support to address these (i.e., kaimahi having access to culturally appropriate supervisors). Other avenues of cultural support for kaimahi need to be discussed and made available (i.e., Tautoko [support] from whānau, access to kuia/kaumātua [cultural elders] and/or tohunga [skilled person with cultural expertise]), allowing kaimahi time to replenish themselves by returning to their significant cultural places and landmarks (i.e., their mountain, river, sea, forest etc. in their tribal areas). Organisational support also needs to be offered in the form of appropriate supervision, counselling, Employee Assistance Programme (EAP), making sure the relationship is declared right from the beginning (when whānau come through service), and clearly defining the boundaries for kaimahi and organisation e.g. what can and cannot be discussed in the kaimahi work time.

### **Conclusion/Summary**

This article has presented findings from research on collision, provided a definition of collision, and explained the collision zone in social work. Specific challenges, ethical dilemmas and boundary issues facing kaimahi in practice were explored. These included managing dual roles and accountabilities, conflicting cultural tensions, biculturalism in practice and the issue of

colluding. Suggested ways forward discussed from the collision research outlined that organisations should review their protocols for working with kaimahi and their whānau, that kaimahi and organisations should discuss and plan for collision, and appropriate support be provided for kaimahi including appropriate supervision.

A key message from the collision research is that “*Out of the big bang comes the growth*” and that kaimahi could come out the other side of their collision with it becoming a lived experience that may strengthen and deepen their social work practice. For social workers to win in the collision zone there needs to be more kōrero (discussion) about what collision actually is, how it can be managed, and what tangible supports are necessary to help social workers manage a way through.

## References

- Albert, P. (2013). An exploration of social work practice development by Māori women. A research report presented in partial fulfilment of the requirements of the Master of Applied Social Work degree, Massey University, Palmerston North, NZ.
- Aotearoa New Zealand Association of Social Workers (ANZASW) (2015). Code of Ethics. Dunedin, NZ: ANZASW (Inc.).
- Aotearoa New Zealand Association of Social Workers (ANZASW) (2015). Supervision Policy. Dunedin, NZ: ANZASW (Inc.).
- Banks, S. (2006). Ethics and values in social work (3rd ed.). Basingstoke, UK: Palgrave.
- Banks, S. (2008). Critical commentary: Social work ethics. *British Journal of Social Work*, 38(6), 1238–1249.
- Banks, S. (2011). Ethics in an age of austerity: Social work and the evolving new public management, *Journal of Social Intervention: Theory and Practice*. 20(2), 5–23.
- Bradley, J., Jacob, E., & Bradley, R. (1999). Supervision: Reflection on culturally safe supervision or why Bill Gates makes more money than we do. *Te Komako III Social Work Review*, 11(4), 3–6.
- Collins, A. (2006). Role duality: The implications for Māori researchers of linking personal and professional associations when working amongst their own communities. *AlterNative*, 3(1), 27–41.
- Congress, E. (1999). Social work values and ethics: Identifying and resolving professional dilemmas. Belmont, CA: Wadsworth.
- Dewane, C. (2010). Respecting boundaries—The don'ts of dual relationships, *Social Work Today*, 10(1), 18.
- Doel, M., Allmark, P., Conway, P., Cowburn, M., Flynn, M., Nelson, P., & Tod, A. (2010). Professional boundaries: Crossing a line or entering the shadows? *British Journal of Social Work*, 40(6), 1866–1889.
- Eketone, A. (2012). The purposes of cultural supervision. *Aotearoa New Zealand Social Work Review*, 24(3&4), 20–30.
- Elder, H. (2008). Ko wai ahau? (Who am I?) How cultural identity issues are experienced by Māori psychiatrists and registrars working with children and adolescents. *Australasian Psychiatry*, 16(3), 200–203.
- Elkington, J. (2014). A Kaupapa Māori supervision context—cultural and professional. *Aotearoa New Zealand Social Work Review*, 26(1), 65–73.
- English, A., Selby, R., & Bell, H. (2011). Working with Whānau: Māori Social Work in Schools. Te Wānanga o Raukawa, Otaki.
- Eruera, M. (2005). He Kōrero Kōrari: Supervision for Māori. Weaving the past, into the present for the future. (Master's thesis), Retrieved from: [https://mro.massey.ac.nz/bitstream/handle/10179/6471/01\\_front.pdf?sequence=1&isAllowed=y](https://mro.massey.ac.nz/bitstream/handle/10179/6471/01_front.pdf?sequence=1&isAllowed=y)
- Eruera, M. (2012). He Kōrari, he kete, he kōrero. *Aotearoa New Zealand Social Work Review*, 24(3&4), 12–19.
- Fine, M., & Teram, E. (2009). Believers and sceptics: Where social workers situate themselves regarding the code of ethics. *Ethics & Behavior*, 19(1), 60–78.

- Hollis-English, A. (2012). Māori social workers experiences with social service organisations. (Doctoral dissertation). Retrieved from <http://hdl.handle.net/10523/2127>
- Hollis-English, A. (2016). Working with non-indigenous colleagues: Coping mechanisms for Māori social workers, *Indigenous Social Work Journal*, 10, 71–84.
- Hugman, R. (2013). Ethics. In M. Davies (Ed). *The Blackwell Companion to Social Work*, (p. 379–386). Oxford, UK: Wiley-Blackwell.
- King, L. (2014). KIAORA—The emerging construction of a bicultural professional supervision model. *Aotearoa New Zealand Social Work Review*, 26(1), 20–28.
- Lipsham, M. (2012). Āta as an innovative method and practice tool in supervision. *Aotearoa New Zealand Social Work Review*, 24(3&4), 31–40.
- Love, C. (June 2002). Māori perspectives on collaboration and colonization in contemporary Aotearoa/New Zealand child and welfare policies and practices. Paper presented at the Positive Systems of Child Welfare Conference, Waterloo, Ontario, Canada. Retrieved from: [http://www.quarterfest.ca/documents/7201/Māori\\_perspective.pdf](http://www.quarterfest.ca/documents/7201/Māori_perspective.pdf).
- Mattison, M. (2003). Ethical decision making meets the real world of field work [Interactive article]. *The New Social Worker*, 10(2). Retrieved from: <http://www.socialworker.com/discus>
- Moyle, P. (2013). From family group conferencing to whānau ora: Māori social workers talk about their experiences. (Masters thesis). Retrieved from: [https://mro.massey.ac.nz/bitstream/handle/10179/4731/02\\_whole.pdf?sequence=1&isAllowed=y](https://mro.massey.ac.nz/bitstream/handle/10179/4731/02_whole.pdf?sequence=1&isAllowed=y)
- Moyle, P. (2014). Māori social workers' experiences of care and protection: A selection of findings. *Aotearoa New Zealand Social Work*, 26(1), 55–64.
- Munford, R., & Sanders, J. (2011). Embracing the diversity of practice: Indigenous knowledge and mainstream social work practice, *Journal of Social Work Practice*, 25(1), 63–77.
- Murray, V. (2012). Hoki ki tōu maunga kia purea ai e koe ki ngā hau o Tāwhirimātea—a supervision model. *Aotearoa New Zealand Social Work Review*, 24(3&4), 3–11.
- O'Donoghue, K. (2003). *Restorying social work supervision*. Palmerston North, NZ: Dunmore Press.
- O'Donoghue, K., & Tsui, M. (2012). Towards a professional supervision culture: The development of social work supervision in Aotearoa New Zealand. *International Social Work*, 55(1), 5–28.
- O'Donoghue, K., & Tsui, M. (2013). Social work supervision research (1970–2010) The way we were and the way ahead. *British Journal of Social Work* 45(2), 616
- O'Leary, P., Tsui, M., and Ruch, G. (2013). The boundaries of the social work relationship revisited: Towards a connected, inclusive and dynamic conceptualization. *British Journal of Social Work*, 43, 135–153.
- Reamer, F. (2001). *Ethics Education in Social Work*. Alexandria, VA: NASW
- Reamer, F. (2003). Boundary issues in social work: Managing dual relationships. *Social Work*, 48(1), 121–133.
- Reamer, F. (2013a). *Social Work Values and Ethics*. New York, NY: Columbia University Press.
- Reamer, F. (2013b). Social work in a digital age: Ethical and risk management challenges. *Social Work*, 58(2), 163–172.
- Reupert, A. (2009). Students' use of self: Teaching implications, *Social Work Education*, 28(7), 765–777.
- Saleebey, D. (1997). *The strengths perspective in social work*. New York, NY: Longman.
- Saleebey, D. (2002). *The strengths perspective in social work*. New York, NY: Longman.
- Social Workers Registration Board. (2016). *Code of conduct*. Wellington, NZ.
- Tedeschi, R. G., & Calhoun, L. G. (1995). *Trauma and transformation: Growing in the aftermath of suffering*. Thousand Oaks, CA: Sage Publications.



- Ungar, M. (2012). *The social ecology of resilience: A handbook of theory and practice*. New York, NY: Springer.
- Walsh-Mooney, H. (2009). *The value of rapport in rangatahi Māori mental health: A Māori social work perspective*. (Master's thesis). Retrieved from [https://muir.massey.ac.nz/bitstream/handle/10179/1363/02\\_whole.pdf](https://muir.massey.ac.nz/bitstream/handle/10179/1363/02_whole.pdf)
- Walsh-Tapiata, W., & Webster, J. (2004). Do you have a supervision plan? *Te Komako Social Work Review*, 12, 15–19.
- Weld, N., & Appleton, C. (2014). *Walking in people's worlds: A practical and philosophical guide to social work*. Auckland, NZ: Dunmore Publishing.
- Wilson, M., & Baker, M. (2012). Bridging two worlds: Māori mental health nursing. *Qualitative Health Research* 22(8), 1073–1082.
- Zoellner, T., & Maercker, A. (2006). Posttraumatic growth in clinical psychology—A critical view and introduction of two component model. *Clinical Psychology Review* 26(5), 626–53.

# Flexner's Thesis Was Prescient: Ethical Practices for Social Workers "In the Trenches" Requires Forensic Knowledge

Dana E. Prescott, JD, Ph.D.

Boston College

[dana.prescott@simmons.edu](mailto:dana.prescott@simmons.edu)

Journal of Social Work Values and Ethics, Volume 16, Number 2 (2019)

Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

In a speech in 1915, Abraham Flexner, M.D. described his taxonomy for defining a profession and concluded that social work may be an "amateur occupation." Social work scholars have challenged his criteria for decades. Flexner, however, foreshadowed a tension inherent in social work's approach to delivering social justice in the various "trenches" where vulnerable populations work and live. The capacity to critically analyze and apply various forms of knowledge and science to social and individual problems requires more than good intentions and vigorous advocacy. In modern terms, this means that social work should teach and train its profession to critically formulate and evaluate multiple hypotheses, to employ multiple sources of data beyond just what a client expresses, and to critically apply and transform evidence-informed research from other disciplines to environments in which social welfare policy shapes outcomes for clients. The eventual implementation of a code of ethics for social work filled a significant gap in terms of providing a formal mechanism for decision making at the organizational, political, and clinical levels. I argue, however, that Flexner was correct in his assertion that social work may lose its way if it becomes so enamored with the righteousness of its causes that it loses the rigor required to sustain social justice. In response, I propose that social work pedagogy should adapt specialized forensic models as a method for teaching conceptual frameworks,

observational strategies, hypothesis-testing, and effective transmission of data to host environments to minimize unguided guesswork or reflexive decision making.

*Keywords:* Forensics, social work ethics, expertise, Abraham Flexner, pedagogy

## Introduction

In the United States, social work has historically been defined by the identity and role of case managers, advocates, and clinicians acting for clients who often live in the shadows of host environments: prisons, schools, courts, and hospitals (Hardcastle, Powers, & Wenocur, 2004; Karger & Stoesz, 2013; Prescott, 2013). This article derives from my experience of 35 years in these environments and particularly the courts. As a trial lawyer, I have witnessed the stress an adversarial system places on professionals to maintain ethical decision making and practices. For licensed social workers, in particular, the power and privilege to label and diagnose carries with it the authority to influence the rights of vulnerable persons by offering expert opinion to courts or other host environments such as prisons, hospitals, and schools. These expert opinions may concern parental termination and child custody, competency and criminal responsibility, clinical and medical treatment services, elder safety and protection, and a range of other powerful gatekeeping roles played by social workers.

As a trial lawyer for many years and a social worker with advanced degrees, I have spent significant time as a graduate student and an instructor in MSW and PhD programs. In those roles, I have witnessed the struggle to teach social workers the means to critically assess ethical risks and liability. I have also witnessed the impact of legitimately accepting the client's truth for purposes of clinical treatment but then translating that truth, without looking for or examining other alternative data, to adversarial systems and institutional authorities. Training in MSW programs offers many positive pedagogical and rigorous opportunities. The knowledge gap, however, is in the transfer of those skills to actions within host environments that may critically test rather than accept the well-intended opinions of a social worker.

In such policy and practice environments, social workers may be held to a standard of competent and ethical practice that requires much more than clinical instincts or a personal feeling about right and wrong (Reamer, 2013). These environments require social workers who can engage in the independent review of multiple sources of data and hypotheses, as well as explanations for how one knows what they claim to know. From such a framework, the social worker may acquire a particular way of knowing that is supported by intellectual and technical rigor, emotional insight, and, ultimately, expert opinions drawn from a transparent analysis of observational and assessment data (Goldblatt, 2004; Grimwood, 2015). These skills may be found in the specialty of forensic pedagogy, methodology, and ethics.

In this article, I argue that becoming a social worker ought to mean "being forensic." By this term, as I will further describe, I mean the praxis that flows from the mindset and academic influence that connects pedagogy and theory to *being forensic*. Being forensic is the act of rigorously applying methods of data gathering, hypothesis testing, research analysis, and clinical observation to individuals living in organic and adaptive organizational or institutional systems (Barker & Branson, 2014; Bartol & Bartol, 2017). It is this transfer of skills and knowledge from the academic

realm to a core competency in practice that suggests the need to develop critical consciousness and skill-based competencies for social work as a profession (Abrams & Moio, 2009; Sakamoto & Pitner, 2005).

The foundation for this argument may be traced to the often cited and criticized speech by Abraham Flexner, a physician and the Assistant Secretary to the General Education Board of New York City at the turn of the 20th century, who understood that social work had the potential to be unique among all other professions. In 1915, however, Flexner questioned social work's identity as a profession as he defined other professions, such as medicine and law. Much literature has been expended responding to this speech of more than a century ago. More recent interpretations have made the argument that its strange influence on the development of social work was disproportionate to its argument or a misreading of his thesis (Morris, 2008).

As discussed in this article, Flexner foreshadowed the struggle by social workers to pass on their core set of methodologies and conceptual frameworks. The active, real-time delivery of social justice within communities and host environments where people daily survive was well known to Flexner. In fact, as I argue here, because social workers were in the trenches from the inception, the profession's role and identity were shaped by much more than a clinical duty to understand one person's story or struggles. Instead, social workers sought to apply the best science of that day to better understand and alter the biological, political, and social forces that shaped individual outcomes (Fook, Ryan, & Hawkins, 1997). As Reamer (1998) summarized on the hundred-year anniversary of social work's founding, during late 20th century "many social workers were more concerned about cultivating perspectives and methods that would be indigenous to social work, partly in an effort to distinguish social work's approach to helping from those of allied professions, such as psychology and psychiatry" (p. 489).

The historical duty of social workers is to advocate for clients by embracing the concomitant

ethical duty to function with integrity and with evidence-informed competence within the client's host environment. As the social work profession shifted to a more formal pedagogy and academic structure offered within the university, the balance between academic rigor through classroom learning and the role of field placement has been the source of ongoing study and refinement (Lay & McGuire, 2010; Wayne, Bogo, & Raskin, 2010). The underlying struggle is how to transfer academic and practice skills to the active capacity to make reflective and rational ethical judgments (i.e., competently and with integrity) within the client's environment. If intellectual and emotional skill sets are limited to what they perceive as "right" or "wrong" social workers might reflexively align with a client or agency without regard to alternative hypotheses or accepted models for ethical decision making (Lovat & Gray, 2007).

Clients are at risk when a social worker does not perceive the limits of knowledge or data or the influences of bias and institutional pressures in order to actively apply those factors in practice (Mattison, 2000). The evolution of the social worker from graduate school to practice has the potential to boomerang when the social worker lacks critical analytic skills. Throughout the past century, social work has become a profession with its own systematic methodologies, practice conceptualizations, and ethical code. Yet the trade-off of moving to a clinical emphasis and state licensure may have added an unforeseen consequence: the education and training of the profession may be too narrow in terms of what social workers must confront in the complex universe of clients and institutions.

This article begins with an exploration of what it means for social workers to be forensic as a social work competency. This means becoming an expert with the ability to objectively organize and transmit complex information to a host environment, such as the criminal or civil justice systems or the hospitals, prisons, and schools, that clients must navigate. The capacity to be forensic, rightly understood, should be embraced and promoted in the pedagogy of teaching ethical practice for the social work profession. This

is not a rejection of values in the role and identity of social work, rather, it is a recognition that individual thoughts about how something "should be" is not the same as what is feasible or possible or supported by a careful balancing of evidence and research (Webb, 2001). If that is so, the operative question then becomes whether graduate programs and training in social work should adopt models that impose the ethical duty and rigor of becoming a forensic expert on all social workers as a core function of their duty to client and community.

### **The Value of Becoming Forensic**

Generally, values can be defined as what religious, moral, cultural, ideological, or social beliefs are "worthy or valuable" to an individual or group (Banks, 2012, p. 7). Ethics is an organized code of conduct that concerns professional relationships and against which a violation might result in sanctions by a government agency or professional organization (Banks, 2012; Reamer, 2013). It is true that social work education has a macro component that is part of foundation policy courses, and this suggests that social work educators intend to extend the field's knowledge to an understanding of how groups act and think about other groups. Furthermore, that macro component informs the role and duty of social workers—armed with the power to label and diagnose—to advocate for clients within host environments and not simply from the armchair in an office. Yet, even in those instances when social work education serves to explain the differences between values and ethical codes, Flexner's concern that social work could become so self-absorbed in its good works as to lose its way is still present today.

It is not novel to recognize that teaching specialization in forensics is a "sprawling thicket," which is to say a dense and somewhat unruly endeavor (Green, Thorpe, & Traupmann, 2005; Randall & Kindiak, 2008; Roberts & Brownell, 1999). Yet this realm is the very heritage of the profession's core value of delivering social justice in the trenches, as Flexner (1915) implied. The underlying challenge, therefore, flows from the deeper meaning

of his speech. The professional discipline of being forensic has a more precise role identification and correlative duty than what social workers are taught in graduate school: to convey with competence and integrity relevant opinions that ethically and rationally inform decision making about a person (American Psychological Association [APA], 2012; Edwards, 2010; National Organization of Forensic Social Workers [NOSFW], 2012; National Research Council of the National Academies, 2009).

As Maschi and Killian (2011) summarize, "Effective forensic social work requires an integrated yet two-pronged approach that addresses well-being (psychosocial) and justice (law and policy) to help individuals, families, and communities" (p. 13). The two-pronged strategy is important, because transmuting conceptual frameworks, theories, or hypotheses with observations from testing and interviews as a predictive funnel is predicated on assisting judges to minimize errors from unguided guesswork or intuitive or reflexive decision making (Cashmore & Parkinson, 2014). After all, there is always the potential for implicit and explicit bias, even for trained professionals and those who have the power to judge others, when life experience and heuristics trump intelligent and reflective observation and insight (Edmond, Tangen, Searston, & Dror, 2015; Kassir, Dror, & Kukucka, 2013).

Even a partial list of being forensic for social workers includes identifying, assessing, and labeling diagnoses, competency, criminal responsibility, child protection and termination, child custody, psychological evaluations, disability, sentencing mitigation, elder guardianships, hospitalization, suicide risk, and other matters that profoundly influence everything from punishment to loss of rights to treatment interventions (Lewis, 2013; Maschi & Leibowitz, 2017). Social workers routinely transfer and transform various forms of data and knowledge from an array of scientific disciplines. The act of expressing agency to an authority about another person or group is, by definition and practice and licensure, acting in a forensic role (Barker & Branson, 2014; Maschi & Killian, 2011).

Flexner (1915) conceived the social worker in such a role, "not so much as the agent grappling with this or that situation, but rather as controlling the keyboard that summons, cooperates with and coordinates various professional specialists" such that "this breadth of attainment is very far from being a matter for reproach" (pp. 17-18). The power of this role should not be conferred on anyone who prefers to see work with a client as only a self-organized and isolated event rather than part of a system that could implement policy and practice through force or authority. In these capacities, anyone entering the portal to be a social worker will exercise the forensic power and privilege that Flexner characterized more gently as "professional spirit" (1915, p. 24). This spirit has been the core identity of social work from its inception. The core values of social work are meant to assure that voices are constructively heard in ways that too many people cannot articulate for themselves.

### **Teaching Forensics as a Core Competency**

Two decades ago, Reamer (1998) identified the challenge in social work's development, as twofold. The profession must "intensify its efforts to educate students and practitioners about ethical issues and standards and ways to address them" and "social work education programs should implement ambitious agendas to offer in-depth and comprehensive instruction and research on ethical dilemmas and standards, ethical decision-making strategies, risk management, and ethical misconduct" (p. 489). As he aptly concluded, "social workers can no longer afford to have only a vague understanding of prevailing ethical standards" (p. 489). In this regard, students may study social work ethics in a separate course or in every course, but commentary and limited research suggests that students learn ethical behavior through observing their teachers (Bryan, 2006; Congress, 2000; Sanders & Hoffman, 2010). The specialty guidelines and skills that relate to forensic practice should be similarly integrated into the teaching of social work as a profession, because resolving ethical dilemmas

and advocating for clients is coextensive with such specialty knowledge and skills.

Social work educators must not only know the NASW *Code of Ethics*, but consciously link and integrate ethical practices to practice and educational experiences in the classroom (Barsky, 2009). That linkage extends to thoughtful insights about privilege and oppression as organic and adaptive forces imposed by institutions and government on clients as well as the social worker. The challenge thereby becomes more about what faculty understand and value as knowledge and skills for students than what students, with little experience in the field, believe relevant to becoming a professional social worker. If professional educators acknowledge that social workers must, as Flexner (1915) recognized, advocate for clients in all forms of environments, by extension such a form of pedagogy requires attention in curricula and classrooms. This objective is not a radical change in teaching social work, but more the strengthening of the intellectual and ethical rigor required for self-protection and for the specific skills of core concepts.

Since the 1980s, the forensic role has had a specific meaning in specialty ethics codes for mental health professionals (APA, 2012; APA, 2016; NOSFW, 2012). The following is a common definition:

For the purposes of these Guidelines, forensic psychology refers to professional practice by any psychologist working within any sub-discipline of psychology (e.g., clinical, developmental, social, cognitive) when applying the scientific, technical, or specialized knowledge of psychology to the law to assist in addressing legal, contractual, and administrative matters. Application of the Guidelines does not depend on the practitioner's typical areas of practice or expertise, but rather on the service provided in the case at hand. (APA, 2012 Introduction)

The National Association of Social Workers (NASW) *Code of Ethics* (2017) does not specifically define forensic social work as a specialization, nor has the NASW adopted, like the APA, specialty guidelines. However, the NASW code does provide guidance in section 1.04(c): When "generally recognized standards do not exist with respect to an emerging area of practice, social workers should exercise careful judgment and take responsible steps (including appropriate education, research, training, consultation, and supervision) to ensure the competence of their work and to protect clients from harm." (p. 9)

From section 1.04(c) two premises can be derived. First, the reality is that most social workers, working with vulnerable populations in practice and organizations, will find themselves in a forensic role for clients. This should seem obvious, given that the people who find themselves at clinicians' offices are intertwined with one or more host environments, often for many years. Second, the ethical duty to offer competent and evidence-informed opinions within the scope of their knowledge and experience is, itself, an ethical obligation of social workers to truthful and transparent expert opinion (Garber & Simon, 2018; Reamer, 2013). Both these pre-conditions require constant attention to reduce the impact of explicit or implicit biases. The exercise of expert opinion is the force of power and authority that can impact access to children, mental health services, loss of freedom in prison, fitness to adopt, competence and criminal responsibility, and many other rights.

On a concurrent path, the nine core competencies, called the Educational Policy and Accreditation Standards (EPAs) generated by the Council of Social Work Education (CSWE) (2017) for accreditation, provide that generalist and specialized knowledge integrate the knowledge, values, and practical skills required to help others in an ethical manner. Thus, social work curricula and competencies for decades have been undergirded with the premise that social work is the development and delivery of social justice in conjunction with, or in opposition to, powerful government entities,

institutions, and organizations acting in concert. In such a manner, social work education and training may have inadvertently turned the pyramid of social work knowledge upside down. The argument that teaching forensic practices to social workers as part of the education of the profession is not novel, but it still requires thoughtful implementation (Payne, 2006; Robbins, Vaughan-Eden, & Maschi, 2014).

In addition to the NASW and CSWE's codifications of ethical principles, there continues to be a need to find complementary means to teach and transform ethical knowledge into a deeper and reflective strategy for social workers. Webb (2001), for example, described this need in the context of teaching a rational actor model for evidence-based social workers. Arguing for a more "sweeping critique of the evidence-based models" for social work, he recognized that social workers, as "agents of change" require a deeper understanding for the process of deliberations and choice when making decisions (p. 67). As he succinctly noted, "Notoriously, social workers make decisions not only because of the ways things are but because of the way they would like things to be" (p. 67). Developing an ethically-framed pedagogy requires an explicit model for social workers, who are always acting as agents within open and adaptive systems in which there are consequences to both clients and social workers from reactive or value-laden decisions (Prescott, 2007).

In this sense, the original base of the social work pyramid was founded on reform of public health and safety, as recognized by Flexner in 1915, while advocating for access to justice through social and political remedies. A pedagogy for teaching social work that incorporates forensics as a function of being a social worker is influenced by the unfortunate reality that "theory and research evidence is taught on social work training courses, in which the link between theory and practice, or knowledge and its implementation, is not always made explicit or left for students and practitioners to unravel" (Trevithick, 2008, p. 1217). Flexner (1915) recognized that a profession required more than a feeling about doing right for others; though

he accepted that social value. Moreover, the failure to explicitly educate modern social workers about ethical duties leaves social workers vulnerable to imprudent and emotional alignments, confirmation bias, and various other forms of misconduct or liability (Hodgson & Watts, 2017; Lacasse & Gomory, 2003). The point of a professional pyramid may, however, be sharpened by compelling students to accept, at the opening passage to any environment, that they enter realms requiring intellectual rigor, knowledge of scientific methodologies, and political sophistication.

### **Flexner's Pyramid Turned Back on its Point**

Social work, as a profession, has evolved for more than a century from an intersection of frameworks: generalist, community, individual needs, human rights, and social justice (Kam, 2014; Press, 2009). These frameworks ever adapt, shift, and merge, and then re-emerge with new obligations and new theories, along with new evidence-based practices. In laying out a specific taxonomy for professions like law and medicine and characterizing social work otherwise, Flexner's speech created an odd defensiveness among social workers. His very title, "Is Social Work a Profession?", seemed to cast an aspersion. This sense of injury, however, was misplaced. Flexner (1915) prefaced his speech by stating that he had not been asked to "decide whether social work is a full-time or part-time occupation, whether, in a word, it is a professional or an amateur occupation" (pp. 2-3). In the vernacular of what was called rhetoric in that era, this was, of course, precisely what he was addressing throughout the remainder of the speech.

Even scholars who argue for a kind of radical nature of social work reconcile the history and values of social work as representing the very core of the profession when waging these battles (Reisch & Andrews, 2014). Indeed, Flexner (1915) insightfully argued that, "the battles that social work wages will not be won by phrases which too often serve as a substitute for experience and knowledge, but by trench warfare carried on by

men and women who have learned every inch of the ground over which they must fight" (p. 22). This insight, social workers advocating for forgotten or marginalized populations, honors the core of social work values. Flexner recognized that this role was not a shortcoming but was the fundamental identity of social work, even if he found it lacking relative to his self-defined definition.

A good deal of what is called social work might be accounted for on grounds that other recognized professions have developed too slowly on the social side. Suppose, for example as Flexner argued, that medicine was fully socialized: medical practitioners, institutions, and organizations would look after certain interests that the social worker might currently care for given the shortcomings of medical practice. As viewed by Flexner (1915) in that context, social work is, in part at least, not so much a separate profession "as an endeavor to supplement certain existing professions pending their completed development. It pieces out existing professions, breathes a new spirit into them, and binds them together in the endeavor to deal with a given situation from a new point of view" (p. 18).

The reaction among some social workers, however, has been to focus on Flexner's bullet-point taxonomy for defining a profession and his remark that social work was an "amateur occupation." This hemming and hawing about what is social work or, correlatively, what is the profession of social work, has been puzzled over for decades (Eaton, 1956, p. 11). The notion that a profession, by definition, requires compartmentalized learning and specialization is, ironically, the bane of much science today, with serious consequences to research, practice, and the public good (Sovacool, 2008). Such compartmentalizing, however, is not the reverse of the argument for consilience among all sciences so much in vogue with physical sciences (Thielke, 2004; Wilson, 1999). Both segmented specialization and consilience should be anathema to social work, because social work is a bridge, as Flexner suggested, between ethical and evidence-informed knowledge derived from many professions.

What Flexner foreshadowed was that the teaching and training of social workers would require academic and intellectual rigor as a function of their being public intellectuals. Karger and Hernández (2004) suggest that, "social work's adoption of micro practice and hyper-professionalism led to a form of anti-intellectualism, which manifested itself in several ways, including a partial withdrawal from its earlier social justice mission" (p. 55). Maschi and Leibowitz (2017) support the edge of that proposition by arguing that forensic social work has "affected the social work profession with a call to fulfill its long-forgotten mission to respond and advocate for justice reform and health and public safety" (p. xv).

By the end of his speech, Flexner (1915) had explicated the role of social work as the binding between professions, as long as social workers both understood and avoided the arrogance of other professions that had begun to confuse good acts with self-righteousness. What if the reaction of the social work profession decades ago had been to support the identity and role as Flexner envisioned: by piecing together existing professions, breathing into them a new spirit of social justice that alleviated harm to vulnerable populations, and binding them together in a shared endeavor to deal with and improve a given situation from new points of view? What if to achieve such a goal, every social worker was required to understand and employ the ethical paradigm of forensics as a matter of competence and integrity? And what if social work meant that advocacy did not end at the door of the office, regardless of the preference of the social worker to avoid host environments, because ethical duties under the NASW code requires protection of the client's right to self-determination and autonomy in any environment?

### **Being Forensic: Praxis, Power, and Privilege**

Vulnerable and oppressed populations must frequently intersect with one or more host environments over a life span. The frequency and



severity of those interactions might differ depending on race, culture, immigration status, socioeconomic status, gender, or other variables. From field placements to clinical practice, social workers often find themselves supplying documentation, records, and expert opinion based on knowledge and data acquired from and about clients who have little practical right to autonomy or self-determination (Grimwood, 2015). Understanding the implications of this is essential to educating social workers "in a meaningful and practical way" (Maschi & Leibowitz, 2017, p. xvii).

The hazards of not training social workers to recognize their power and wield it judiciously and ethically was captured by the title of Specht and Courtney's book *Unfaithful Angels* (1995). There is much about the book that warrants fair criticism, including the notion that social work had an "imagined and glorious golden age where we all worked together in communitarian bliss to ameliorate poverty and fight the good fight" (Longhofer & Floersch, 2012, p. 500). In this article, I am not proffering blame or retrospective longing for social work's purported purer past.

Instead, I would argue that social work is unique to all other mental health and social science professions in that social workers are intrinsically and unavoidably forensic because the core values of social work always recognized that social workers undertake and employ macro-knowledge at all levels of service (Eaton, 1956; Meinert, Pardeck, & Kreuger, 2000). This pertains to the competency of pursuing social justice to ensure the dignity and worth of people and relationships in the most vulnerable populations. In actuality, the power and authority and privilege of being a social worker requires each of them to engage the power and privilege of their expert opinions as observers and advocates within various host environments, political systems, and government institutions.

A social worker's engagement, however, is not the benign (even if well-intentioned) transfer of information about a person or group to a government authority with the power to sanction

or reward. Rather, this forensic social work role is an intentional act of agency between a vulnerable individual, or groups of such individuals, from whom information is transferred and transformed, to an authority with the power to render judgment. Longhofer and Floersch (2012) made this argument clearly in an examination of social work research:

As social work practitioners move throughout the day, even moment-to-moment, they strive to competently act, interact, and understand the meanings of their actions and interactions in open systems. And social work has over the years used many practical techniques to accomplish this: field-based training and supervision, licensure and continuing education, consultation, and by paying close attention to the nature and quality of helping relationships. Some have called the process by which these skills or theories are used or realized *praxis*; found in both Greek and Latin, it is understood as doing, acting, action, and practice. (p. 506)

This praxis is much more than reflexive in the clinical sense of acting as a social worker (Payne, 1998). This praxis means, in the very deepest ethical and moral sense, that *becoming* a competent social worker who practices with integrity requires explicitly engaging and accepting the forensic role as a prerequisite to *being* a social worker. Given the global dimensions of privilege and power today, the historical oppression of minorities and vulnerable populations, and the historically-situated identity of modern social work and its core values, the need to require social workers to understand the role of being an expert is especially acute (Abrams & Gibson, 2007; Gray & Lovat, 2007; McBeath & Webb, 2002). As such, the privilege to enter graduate school and obtain a degree and licensure comes with accountability for understanding the nature of

power, as well as the ethical code and legal duty to competently serve and protect the client in the host environments when called upon.

## **Forensics as Pedagogy for Social Work**

Cole (2012) argued that Flexner himself may have provided the impetus for social work to eventually develop a code of ethics and its six core values: Social Justice, Service, Dignity and Worth of the Person, Importance of Human Relationships, Integrity, and Competence. These core values took many decades to evolve into a single text from which the profession, through its adoption by the NASW in 1978, could seek guidance and aspiration (Reamer, 2013). What evolved was a more subtle and incremental transformation of social work from its community roots to a clinical preference. The shift invited students to join the profession with an implied promise that the messy world of policy, politics, and government institutions would not intrude on helping clients engage in positive change. The thorny problem was that clients exist in adaptive but organic relationships to institutional surveillance and force and cannot be easily separated from that reality of oppression and consequence (Gilbert & Powell, 2010).

Others have suggested the need for more specialized education and post-degree training in forensics or other fields to protect vulnerable populations (Sheehan, 2016). These moral and legal concepts are grounded in the very core of the ethical duty to possess the integrity and competence required to exercise power thoughtfully and with cultural sensitivity and intellectual depth. This question of identity and role and its relationship to being forensic, however, is only in play because of a predicate question: How did this identity get lost among the foundation courses, electives, and specialization now found in social work programs? Finding the answers might require travel back to Baltimore in 1915 to consider anew Flexner's analysis.

As previously noted, Flexner's speech had an odd influence on social work education and

practice even as it suggested the need for a cohesive and articulated ethical paradigm for social work education and practice (Bisman, 2004; Gibelman, 1999; Mumm & Kersting, 1997). Within the profession's academic and research platforms, the identity and role of the social worker as a forensic expert has been considered, but not in a way that has entered mainstream education and practice (Barker & Branson, 2014; Gothard, 1989; Maschi, & Killian, 2011; Rome, 2013).

A social worker cannot avoid the world of the client by choice or preference. Becoming and being forensic means that social workers accept responsibility for clients living within diverse organizations and social environments. As such, Maschi and Leibowitz (2017) make the following salient point about forensic social work skills:

[They] target the important and emerging practice specialization of forensic social work, a practice specialization that speaks to the heart, head, and hands (i.e., knowledge, values, and skills) of social work using a human rights and social justice approach integrated with a forensic lens. (p. xv)

Perhaps this argument will fall by its own lack of merit. Advocacy, after all, "is very different from usual activities of social workers, and advocacy skills are very different than the usual social work skills" (Saltzman & Furman, 1999, p. 496). Rome (2013) expressly recognized that social workers might serve both roles but need to understand carefully the distinction when social workers "undertake some forensic activities as part of their day-to-day practice, including testifying in court as fact witnesses" (p. 63). Intellectual rigor is a core function of acting within a professional role and preserving professional identity. These are intentionally (not accidentally) acquired traits that require iterations of testing and re-testing by the professional through reflective action and praxis. This means that social workers must employ thinking and reasoning intentionally as causally

related to exercising their professional judgment and transforming that knowledge to host environments for clients.

For Flexner (1915), service in these trenches was the very definition of social work's core mission. In that manner, voluntarily entering social work's portal and accepting education and state-sponsored licensure should have always meant accepting the duties that flowed from the profession's core values. Clients should be protected by the promise of social work's core values with the assurance that the social worker is sufficiently educated and competent in all manner of host environments, as fitted to serve the particular needs of the client (see, for example, Colvin, Nelson, & Cronin, 2011; Lens, Katz, & Suarez, 2016). Flexner was critical of social work in his time, but he was also hopeful that social work could serve to bridge and bind the egoisms, strengths, and weaknesses of the other professions he described as fitting his taxonomy.

What concerned Flexner (1915), therefore, was the risk that social work would become a "vast army of reaction" with the "occasionally reckless" confidence of the reformer (p. 21). The irony is that the strength he perceived as the very being of social workers in the trenches is what might have been lost with the passage of time. Bridging the past to the present through forensics is not new to social work, as other professions such as nursing, medicine, psychology and psychiatry long ago recognized the special tools and skills required to perform those duties (Roberts & Brownell, 1999). The future of social work might entail critically challenging students at the onset of their training. Other professions have the option to choose forensics as a specialty. The difference with the other professions is that the very praxis of social work is the social worker's duty to apply theory in the trenches amid the adaptive and crucial intersection of all aspects of clients' lives with host environments.

Possessing forensic knowledge and competencies by education and training should be the culmination of an intentional effort to help assure the competency and integrity required by the NASW *Code of Ethics*. The spirit of the social

work profession, so recognized by Flexner (1915), implicates the core value of social justice, which thereby demands of social workers rigor, civic knowledge, and willingness to engage in the active marketplace of host environments in which clients must live. The process by which these skills are used or realized occurs within the various forms of action and agency that should be required within the profession of social work. The rigor and specialty codes for forensic practices are a means to design and guide a more precise pedagogy for graduate schools of social work and post-licensure trainings.

## References

- Abrams, L. S., & Gibson, P. (2007). Teaching notes: Reframing multicultural education: Teaching white privilege in the social work curriculum. *Journal of Social Work Education, 43*, 147–160.
- Abrams, L. S., & Moio, J. A. (2009). Critical race theory and the cultural competence dilemma in social work education. *Journal of Social Work Education, 45*, 245–261.
- American Psychological Association. (2012). Specialty guidelines for forensic experts. *American Psychologist, 68*, 7–19.
- American Psychological Association. (2016). Revision of ethical standard 3.04 of the "Ethical principles of psychologists and code of conduct" (2002, as amended 2010). *American Psychologist, 71*, 900.
- Banks, S. (2012). *Ethics and values in social work*. London, UK: Palgrave Macmillan.
- Barker, R. L., & Branson, D. M. (2014). *Forensic social work: Legal aspects of professional practice*. New York, NY: Routledge.
- Barsky, A. E. (2009). *Ethics and values in social work: An integrated approach for a comprehensive curriculum*. New York, NY: Oxford University Press.
- Bartol, C. R., & Bartol, A. M. (2017). *Introduction to forensic psychology: Research and application* (5th ed.). Thousand Oaks, CA: Sage Publications.
- Bisman, C. (2004). Social work values: The moral core of the profession. *The British Journal of Social Work, 34*, 109–123.

- Bryan, V. (2006). Moving from professionally specific ideals to the common morality: Essential content in social work ethics education. *Journal of Teaching in Social Work, 26*(3-4), 1-17.
- Cashmore, J. & Parkinson, P. (2014). The use and abuse of social science research evidence in children's cases. *Psychology, Public Policy, and Law, 20*, 239-250.
- Cole, P. L. (2012). You want me to do what? Ethical practice within interdisciplinary collaborations. *Journal of Social Work Values & Ethics, 9*(1), 26-39.
- Colvin, J. D., Nelson, B., & Cronin, K. (2011). Integrating social workers into medical-legal partnerships: Comprehensive problem solving for patients. *Social Work, 57*, 333-341.
- Congress, E. P. (2000). What social workers should know about ethics: Understanding and resolving practice dilemmas. *Advances in Social Work 1*(1), 1-25.
- Council on Social Work Education Commission on Accreditation. (2008, update 2017). *EPAS Handbook*. Alexandria, VA: Council on Social Work Education.
- Eaton, J. W. (1956). Whence and whither social work? A sociological analysis. *Social Work, 1*, 11-26.
- Edmond, G., Tangen, J. M., Searston, R. A., & Dror, I. E. (2015). Contextual bias and cross-contamination in the forensic sciences: The corrosive implications for investigations, plea bargains, trials and appeals. *Law, Probability and Risk, 14*, 1-25.
- Edwards, H. T. (2010). The National Academy of Sciences report on forensic sciences: What it means for the bench and bar, *Jurimetrics, 51*, 1-15.
- Flexner, A. (1915). Is social work a profession? In *Proceedings of the National Conference of Charities and Corrections* (pp. 576-590). Chicago, IL: Hildman.
- Fook, J., Ryan, M., & Hawkins, L. (1997). Towards a theory of social work expertise. *The British Journal of Social Work, 27*, 399-417.
- Garber, B. & Simon, R. A. (2018). Individual adult psychometric testing and child custody evaluations: If the shoe doesn't fit, don't wear it. *Journal of the American Academy of Matrimonial Lawyers, 30*, 325-341.
- Gibelman, M. (1999). The search for identity: Defining social work—past, present, future. *Social Work, 44*, 298-310.
- Gilbert, T., & Powell, J. L. (2010). Power and social work in the United Kingdom: A Foucauldian excursion. *Journal of Social Work, 10*, 3-22.
- Goldblatt, D. (2004). *Knowledge and the social sciences: Theory, method, practice*. New York, NY: Routledge.
- Gothard, S. (1989). Power in the court: The social worker as an expert witness. *Social Work, 34*, 65-67.
- Gray, M., & Lovat, T. (2007). Horse and carriage: Why Habermas's discourse ethics gives virtue a praxis in social work. *Ethics and Social Welfare, 1*, 310-328.
- Green, G., Thorpe, J., & Traupmann, M. (2005). The sprawling thicket: Knowledge and specialization in forensic social work. *Australian Social Work, 58*, 142-153.
- Grimwood, T. (2015). *Key debates in social work and philosophy*. New York, NY: Routledge.
- Hodgson, D., & Watts, L. (2017). What can moral and social intuitionism offer ethics education in social work? A reflective inquiry. *The British Journal of Social Work, 47*, 181-197.
- Kam, P. K. (2014). Back to the 'social' of social work: Reviving the social work profession's contribution to the promotion of social justice. *International Social Work, 57*, 723-740.
- Karger, H. J., & Hernández, M. T. (2004). The decline of the public intellectual in social work. *Journal of Sociology & Social Welfare, 31*, 51-68.
- Karger, H. J., & Stoesz, D. (2013). *American social welfare policy: A pluralist approach* (brief edition). Boston, MA: Pearson.
- Kassin, S. M., Dror, I. E., & Kukucka, J. (2013). The forensic confirmation bias: Problems, perspectives, and proposed solutions. *Journal of Applied Research in Memory and Cognition, 2*, 42-52.
- Lacasse, J. R., & Gomory, T. (2003). Is graduate social work education promoting a critical

- approach to mental health practice? *Journal of Social Work Education*, 39, 383–408.
- Lay, K., & McGuire, L. (2010). Building a lens for critical reflection and reflexivity in social work education. *Social Work Education*, 29(5), 539–550.
- Lens, V., Katz, C. C., & Suarez, K. S. (2016). Case workers in family court: A therapeutic jurisprudence analysis. *Children and Youth Services Review*, 68, 107–114.
- Lewis, K. (2009). *Child custody evaluations by social workers*. Washington, DC: NASW Press.
- Longhofer, J., & Floersch, J. (2012). The coming crisis in social work: Some thoughts on social work and science. *Research on Social Work Practice*, 22, 499–519.
- Lovat, T., & Gray, M. (2007). Towards a proportionist social work ethics: A Habermasian perspective. *The British Journal of Social Work*, 38, 1100–1114.
- Maschi, T., & Killian, M. L. (2011). The evolution of forensic social work in the United States: Implications for 21st century practice. *Journal of Forensic Social Work*, 1, 8–36.
- Maschi, T., & Leibowitz, G. S. (Eds.). (2017). *Forensic social work: Psychosocial and legal issues across diverse populations and settings*. New York, NY: Springer Publishing Company.
- Mattison, M. (2000). Ethical decision making: The person in the process. *Social Work*, 45(3), 201–212.
- McBeath, G., & Webb, S. A. (2002). Virtue ethics and social work: Being lucky, realistic, and not doing one's duty. *The British Journal of Social Work*, 32, 1015–1036.
- Meinert, R. G., Pardeck, J. T., & Kreuger, L. (2000). *Social work: Seeking relevancy in the twenty-first century*. Binghamton, NY: Haworth Press.
- Morris, P. M. (2008). Reinterpreting Abraham Flexner's speech, "Is social work a profession?": Its meaning and influence on the field's early professional development. *Social Service Review*, 82, 29–60.
- Mumm, A. M., & Kersting, R. C. (1997). Teaching critical thinking in social work practice courses. *Journal of Social Work Education*, 33, 75–84.
- National Association of Social Workers. (2017). *Code of ethics of the National Association of Social Workers*. Washington, DC: NASW Press.
- National Organization of Forensic Social Workers. (2012). *Code of ethics*. Retrieved from <http://nofsw.org/wp-content/uploads/2014/03/NOSFW-Code-of-Ethics-Changes-2-16-12.pdf>.
- National Research Council. (2009). *Strengthening forensic science in the United States: A path forward*. Washington, DC: The National Academies Press.
- Payne, M. (1998). Social work theories and reflective practice. In R. Adams, L. Dominelli, & M. Payne (Eds.), *Social work: Themes, issues and critical debates* (119–137). Basingstoke, UK: Macmillan.
- Payne, M. (2006). *What is professional social work?* Chicago, IL: Policy Press.
- Prescott, D. E. (2007). The act of lawyering and the art of communication: An essay on families-in-crisis, the adversarial tradition, and the social work model. *Legal Ethics*, 10, 176–192.
- Prescott, D. E. (2013). Social workers as "experts" in the family court system: Is evidence-based practice a missing link or host-created knowledge? *Journal of Evidence-Based Social Work*, 10, 466–481.
- Press, C. N. (2009). *Incorporating intersectionality in social work practice, research, policy, and education*. Washington, DC: NASW Press.
- Randall, G. E., & Kindiak, D. H. (2008). Deprofessionalization or postprofessionalization? Reflections on the state of social work as a profession. *Social Work in Health Care*, 47, 341–354.
- Reamer, F. G. (1998). The evolution of social work ethics. *Social Work*, 43, 488–500.
- Reamer, F. G. (2013). *Social work values and ethics*. New York, NY: Columbia University Press.
- Reisch, M., & Andrews, J. (2014). *The road not taken: A history of radical social work in the United States*. Philadelphia, PA: Routledge.
- Robbins, S. P., Vaughan-Eden, V., & Maschi, T. M. (2014). It's not CSI: The importance of forensics

- for social work education. *Journal of Forensic Social Work*, 4, 171–175.
- Roberts, A. R., & Brownell, P. (1999). A century of forensic social work: Bridging the past to the present. *Social Work*, 44, 359–369.
- Rome, S. H. (2013). *Social work and law: Judicial policy and forensic practice*. Boston, MA: Pearson Education.
- Sakamoto, I., & Pitner, R. O. (2005). Use of critical consciousness in anti-oppressive social work practice: Disentangling power dynamics at personal and structural levels. *The British Journal of Social Work*, 35, 435–452.
- Saltzman, A., & Furman, D. M. (1999). Locating and using the law. In *Law in social work practice* (2nd ed.). (77-116). Chicago, IL: Nelson-Hall.
- Sanders, S., & Hoffman, K. (2010). Ethics education in social work: Comparing outcomes of graduate social work students. *Journal of Social Work Education*, 46, 7–22.
- Schwartz, V. E., & Silverman, C. (2006). The draining of Daubert and the recidivism of junk science in federal and state courts. *Hofstra Law Review*, 35, 217–274.
- Sheehan, R. (2016). Forensic social work: Implementing specialist social work education. *Journal of Social Work*, 16, 726–741.
- Sovacool, B. K. (2008). Exploring scientific misconduct: Isolated individuals, impure institutions, or an inevitable idiom of modern science? *Journal of Bioethical Inquiry*, 5, 271–282.
- Specht, H. & Courtney, M. E. (1995). *Unfaithful angels: How social work has abandoned its mission*. New York, NY: Simon & Schuster.
- Thielke, S. (2004). The hedgehog, the fox, and the magister's pox: Mending the gap between science and the humanities. *Psychiatric Services*, 55, 459–459.
- Trevithick, P. (2008). Revisiting the knowledge base of social work: A framework for practice. *The British Journal of Social Work*, 38, 1212–1237.
- Wayne, J., Bogo, M., & Raskin, M. (2010). Field education as the signature pedagogy of social work education. *Journal of Social Work Education*, 46(3), 327–339.
- Webb, S. A. (2001). Some considerations on the validity of evidence-based practice in social work. *The British Journal of Social Work*, 31, 57–79.
- Wilson, E. O. (1999). *Consilience: The unity of knowledge*. New York, NY: Vintage.

# The Unlikely Altruist: Practices of Exclusion in Volunteer-Based Social Work

Lærke Bonnesen, Ph.D. Fellow  
Roskilde University  
[lbannesen@ruc.dk](mailto:lbannesen@ruc.dk)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

**Acknowledgments:** This work was supported by the Danish foundation TrygFonden.

## Abstract

Despite the benevolent image of the voluntary sector, social inequalities in volunteerism persist. In this research article, I present empirical findings from observations of and interviews with volunteers and staff in a Danish non-profit organization that strives for “inclusive volunteering.” Even here, I find that organizational gatekeepers in the form of paid volunteer supervisors and core volunteers make use of three different exclusionary practices which create barriers for participation for younger and working-class volunteers: non-recruitment, informal exclusion, and formal exclusion. These exclusionary practices are seemingly utilized in the attempt to translate abstract notions of “the ideal volunteer” based on aspirant volunteers’ social status.

*Keywords:* Volunteerism, exclusion, inequality, social class, youth

## Introduction

Public perceptions of the voluntary sector tend to imagine volunteer work as possessing many of the desirable qualities that the commercial labor market does not: those of a non-hierarchical, open, fair, inclusive, and fertile breeding ground for social network creation across social boundaries. Policymakers in Europe, the US, and elsewhere celebrate a benevolent image of volunteerism

(Dean, 2013; Dekker & Halman, 2003). Despite this, research on volunteerism consistently demonstrates that patterns of participation in volunteering mirror social inequalities found in the traditional labor market (Wilson, 2012). White, well-educated high earners midway through life are among the most likely to volunteer their spare time, at least as far as volunteering in formal organizations goes (Wilson, 2012; Smith, 1994; Fridberg, 2014).

This skewed participation pattern may represent a problem for social equality, as studies reveal that those who participate in formal volunteering yield private returns on their engagement in the form of higher employability, widened social networks, new skills and knowledge, and improved health, among other things (Musick & Wilson, 2008). Inequality in access to volunteering has the potential to exacerbate existing structures of inequality in society, creating a self-reinforcing process of accumulated privilege. Furthermore, volunteers most often seem to flourish in the company of peers (socially, racially, and economically speaking), as has been confirmed by the so-called “homogeneity thesis” (Musick & Wilson, 2008). Thus, a high degree of homogeneity in voluntary organizations may jeopardize the role that volunteering can potentially play in providing the many “promised” goods unlikely to be produced by for-profit organizations – such as social cohesion, inclusive participation, and empowerment.

Despite these threats to equality in volunteerism, very few scholars have taken on the task of unravelling the social processes that facilitate social stratification within the voluntary sector. This is primarily due to the tendency of many studies on volunteering to adopt a rather static approach, focusing on the here-and-now, thus neglecting a processual perspective on volunteer work. Furthermore, a predominantly individualistic approach to the study of volunteering further overlooks organizational dynamics that render civic engagement improbable for some societal groups. Examples of studies which are both time-static and individual-focused include prominent pieces of literature on volunteering such as Bekkers (2005) and Wilson & Musick (1997). Omoto & Snyder's (1995) "volunteer process model"—a novel contribution with three stages of volunteer involvement (antecedents, experiences, and consequences) as well as three different levels of investigation (individual, organizational, and societal)—is one example of scholarly attention to processual as well as contextual factors contributing to individual volunteer involvement. But most empirical research guided by the model has, in the authors' own words, "focused on only one level of analysis" (the individual) (Omoto, Snyder & Hackett, 2010, p. 1707).

The present study sets out to investigate the social practices within organizations that may create barriers to civic engagement for some societal groups while paving the road to participation for others. It does so by posing these questions: What—and who—makes for an "ideal" volunteer? And which social practices translate these ideals into social reality by including some citizens in social volunteer work while excluding others? I am interested in the organizations that act as gatekeepers to volunteer positions: my purpose, thus, is to investigate the kinds of social practices (at an organizational level) that facilitate an enduring and rewarding volunteering experience for some societal groups and not for others.

The research questions have been investigated through a case study of volunteer-based

social work at three different project locations in a rather large youth organization in Denmark. I have interviewed and observed volunteers and volunteer supervisors at the three locations for one and a half consecutive years.

My intention with this study is to investigate the social and organizational practices that exclude "unfavorable" volunteers from participation, as well as the social logic—the concept of the "ideal volunteer"—that serves as the ethical foundation for such exclusionary practices. In my analyses, I have found social class and age to be useful social categories in the process of understanding exclusion from volunteer participation—but the practices leading up to the exclusion of aspiring volunteers may well be applicable to other social categories, such as ethnicity, gender, or disability.

## **Theoretical Foundations**

During past decades, the discipline of volunteerism studies has been established as an independent and flourishing field within the social sciences. Most theoretical definitions of (formal) volunteering tend to emphasize features such as free choice, lack of material compensation, the productive nature of the work performed (helping strangers or a cause), as well as the formalized organizational context of the work (e.g. Snyder & Omoto, 2008; Dekker & Halman, 2003). Politically, volunteerism is an increasingly popular topic for policymakers of all ideological convictions, as the act of volunteering has become a widespread "solution" to a range of societal problems, such as political apathy, unemployment, or welfare service deficits (Hogg & Baines, 2011).

### **Inequality in volunteerism**

In 2012, around 35% of the Danish population had participated in volunteer work during the past year (Fridberg, 2014). This share is rather high in comparison with that of other European nations (McCloughan, Batt, Costine, & Scully, 2011) as well as when compared to American volunteer rates (United States Department of Labor, 2016).

But this relatively high civic participation rate masks a high degree of unevenness regarding



Danes' propensity to volunteer: While an impressive 44% of 36- to 45-year-old adults report having volunteered in 2012, only 24% of 16- to 25-year-old youths did the same. And while half (51%) of Danes holding a university degree claim to have volunteered within the past year, this is true for just one-quarter (26%) of unskilled workers (workers who hold no formal educational qualifications) (Fridberg, 2014). In other Western countries, volunteer participation patterns are similarly tilted towards the middle-aged, highly educated, high-earning and able-bodied members of the ethnic majority (Musick & Wilson, 2008).

Although most scholars agree that the unequal distribution of volunteering propensity is no coincidence, there have been different theoretical attempts to explain why this is the case. The single most influential theory in recent years is undoubtedly the so-called "integrated" theory of volunteer work proposed in 1997 by the American sociologists Marc Wilson and John Musick (Wilson & Musick, 1997). The theory argues that three key types of resources—human, social, and cultural capital—are needed in volunteer work, thus attracting individuals who are affluent in these forms of capital. Thus, the integrated theory of volunteering treats volunteer recruitment as a fairly "straightforward" process involving the demand and supply of objectively desirable resources. In opposition to this view of the "objective" nature of social inequality in volunteerism, I argue that different social practices will produce inequality patterns of different kinds and different degrees. As in other parts of society, social inequality in volunteering is socially constructed and thus potentially changeable. Although this is not a groundbreaking insight, the social constructivist view does, however, direct our attention to the social practices that produce and sustain social inequality. It is thus surprising that so few authors have addressed the subject of *how* social inequalities in volunteer work come to exist.

Some scholars have sought to empirically examine the circumstances of "unlikely" groups of volunteers, such as working-class or unemployed citizens, ethnic minorities, young people, the

elderly, and refugees. Yap, Byrne, and Davidson (2010), in a study of refugees in the United Kingdom, found that volunteering is used as a means to "transcend" the negative stigma of being a refugee. Baines and Hardill (2008) argued that volunteering can provide a basis for mutual support in a disadvantaged, jobless community in the UK. Tang, Morrow-Howell, and Hong (2009) argued that certain means of institutional facilitation (e.g. flexibility in assigning roles and tasks, providing transportation, etc.) are especially crucial for older volunteers of lower socioeconomic status. And as early as 1983, Gay and Hatch found unemployment to be a detriment to recruitment into volunteer work, as voluntary organizations and their volunteers would regard the unemployed as less resourceful and less competent. A new report on volunteering in the Danish population, requisitioned by the Danish Ministry of Social Affairs, concluded that citizens who are permanently out of the labor force are less likely to volunteer, though when they do, they are typically involved in voluntary social work (Rambøll, 2017).

However, only a few of such studies have applied a process perspective to the study of "unlikely" volunteers and inequality in volunteerism. One exception is Dean (2016) who found that public policy on youth volunteering in the UK has unintentionally reinforced structural access barriers for working-class youths.

Thus, there are two main gaps in our knowledge base with regards to inequality in volunteerism: Firstly, past studies have tended to employ a predominantly individualistic approach to the study of *who* volunteers with a focus on individuals' resources and motivations—persuading us that social inequality in volunteerism is, first and foremost, a "natural" byproduct of individual actions. Secondly, many studies more often paint a static portrait of the social composition of the voluntary sector—vital knowledge provided by quantitative cross-sectional studies, but thus neglecting a process perspective which could provide insights into *how* this very picture comes about.

In the following subsection, I argue that the theoretical concept of *social exclusion* is highly relevant for understanding exactly how barriers to civic engagement come to exist.

### **Social exclusion in volunteer work**

Social exclusion is obviously not a phenomenon unique to the voluntary sector. However, the public perception seems to be that exclusion is an evil more easily escaped in volunteer work than in other parts of society. Perhaps for this reason, other research areas within the social sciences have more readily acknowledged the need for a processual understanding of the social dynamics that foster social segmentation. This is especially true in literature in human resources and organizational studies where one can find several fruitful studies, for example, on social inequality in recruitment processes, often in relation to gender (see Koivunen, Ylöstalo, & Otonkorpi-Lehtoranta, 2015; Acker, 2006).

But most kinds of work—volunteering included—entail hierarchical forms of organization, and—as David Pocock noted as early as the 1950s—social exclusion is a generic trait of all social hierarchies (Allman, 2013). This logic further points us to the fact that *all* organizations produce and reproduce some forms of social inequality. Joan Acker (2006) proposed a theory of “inequality regimes,” arguing that all human organizations—even those committed to promoting diversity and inclusivity, such as the present case organization—embrace practices that nourish social inequality. Importantly, different organizations may differ in the kinds of inequalities they sustain and the degrees to which they do so.

For Acker (2006), recruitment processes are a typical way in which organizations produce and maintain systematic inequalities. The professional and personal qualities that organizations explicitly or implicitly value in employees are socially constructed and oftentimes based on existing societal stratifications. These notions of the “ideal worker”—or the “ideal volunteer”—play a major part in determining who gets included and excluded

in the labor market (Acker, 2006; Koivunen et al., 2015)—or in volunteer opportunities.

The theory of inequality regimes is relevant to the academic study of social exclusion because the identification of the specific exclusionary practices happening within an organization can help in defining its unique inequality regime. But the concept of “exclusion”—used theoretically in many fields within the social sciences, such as sociology, psychology, and anthropology—is criticized for its “contested” nature and lack of definitional consistency (Taket et al., 2009). Coined in 1970s France (“*les exclus*”), the concept now denotes many kinds of barriers to participation in different societal spheres, such as the labor market, politics, or civil society. Common to most definitions of social exclusion is the idea that non-participation must be involuntary for the excluded group or individual (Bak, 2012). As such, the (unequal) distribution of power is central to an understanding of social exclusion.

Many renowned scholars have theorized upon social exclusion or related concepts, such as Max Weber’s (1968) theory on “social closure,” or Erving Goffman’s (1963) famous work on social stigma. Despite the immense scholarly interest in the concept, a lack of definitional clarity impedes its empirical utility.

Social exclusion can be viewed as a state or a process (or both). Whereas quantitative studies define social exclusion mostly in static terms, qualitative studies tend to employ a process-oriented understanding of the concept. In the present paper, the concept of social exclusion is conceptualized as the latter: Someone can clearly *be* excluded from volunteering, but *how* this comes to be is the dominant focus of this analysis. Hence, in this study, the focus is on exclusionary practices.

Furthermore, inclusion/exclusion is not to be regarded as a dichotomy, but as a continuum along which lie many degrees of inclusion and exclusion. One may, for example, differentiate between “core” and “peripheral” members of a volunteer group, while still others are banned from participation altogether. In the present article,

exclusionary practices are viewed as those that reject or marginalize individual members or entire social groups from full participation in volunteerism. Although full-on rejection is always involuntary (aspiring volunteers are “dismissed” from volunteer service), some forms of exclusion may be subtler (as when volunteer group members are marginalized to the periphery of the social group). The first kind of exclusion can be termed “formal exclusion,” while the second and more subtle kind of exclusion can be referred to as “informal.”

### **Social class and age as status markers**

In the course of analyzing the empirical material, inequality in access to volunteering presented itself via age- and class-based forms of exclusion. Thus, in the following subsection, the concepts of youth and social class will be addressed briefly.

Inequality in access to core volunteering positions in the case organization were, firstly, *class-based*. The subject of social class has been developed by a number of authors across the social sciences throughout the past two centuries, the French sociologist Pierre Bourdieu (1984) perhaps being the most renowned modern theorist on social class. In modern Danish society, it is meaningful to make use of Bourdieu’s (1984) distinction between three “layers” of class structure, consisting, broadly, of a *working*, a *middle*, and an *upper* class (Juul, 2012).

Secondly, the low social status of youth participants seemed especially relevant to some exclusionary practices in the case organization. Though there is no theoretical consensus on a clear age demarcation of youth, most studies tend to focus on adolescence and early adulthood as life stages characterized by “in-betweenness”—less marked by dependency than childhood, but still deprived of many of the citizenship rights associated with adulthood (Furlong, 2013).

Both working-class affiliation and youth are marked by a lower social standing in general society—in part because of a deficiency in what Bourdieu (1984) denoted as “symbolic capital”—and this is accompanied by a lack of participation

in civil society. In Denmark, as well as in many other countries, young people and working-class citizens are under-represented in the voluntary sector (Fridberg, 2014; Musick & Wilson, 2008). Because volunteer work is expected to increase employability and direct at-risk individuals towards more socially acceptable behavior, volunteerism comes to serve as a political vehicle for the “self-improvement” of low-status citizens, such as young people (Dean, 2016) and the unemployed (Baines & Hardill, 2008).

### **Methodological Reflections**

In the present study, data has been collected intensively over one-and-a-half consecutive years in 2015 and 2016 in cooperation with a single Danish organization, referred to as “the organization”. Single-case studies are well-known for their ability to generate deep knowledge and track causal processes but are often criticized for their low generalizability. But case studies need not suffer from a lack of generalization potential; though statistical inference is certainly a virtue of large quantitative studies, an informed case selection can pave the way for broader relevance of the analytical findings in a case study (Gerring, 2008).

As previously stated, Denmark features a relatively high rate of volunteering, internationally, which logically entails that, on a sheer aggregate level, a large proportion of the population is included in some form of volunteer work. Additionally, the case organization performs social work, an area within the voluntary sector somewhat more diverse with regards to educational backgrounds and gender than other areas, such as sports or health (Overgaard, Petrovski, & Hermansen et al., 2015). At an institutional level, the organization is explicitly dedicated to “inclusive volunteering” and creating equal opportunities for civic engagement for people from diverse backgrounds. These things considered, I argue that the organization selected for empirical analysis makes for a “least likely” case for observing practices of social exclusion in volunteerism. Thus, the findings put forward in this paper may be of relevance to other voluntary organizations as well.

The specific methods used in the data production for this study are semi-structured individual interviews with nine volunteers as well as overt participatory observation at three project locations. Initial interviews were rather unstructured (though the interview questions were all related to the informants' voluntary engagements) with a focus on themes that informants themselves seemed passionate about or preoccupied with. Later interviews became increasingly structured, as thematic similarities (of social exclusion in volunteering) emerged and became apparent. Thus, the data collection process moved from inductive to increasingly deductive. Interviews often followed sessions of observation, as participatory observation paved the way for a contextual understanding of the volunteer groups and activities, which proved beneficial for conversations with interviewees.

The local projects were part of a nation-wide social care program for children and youths at risk of social isolation, with all day-to-day activities run by volunteers. The three projects were selected to reflect different geographical areas of Denmark—from the small provincial village to the large provincial city. Interviewees were sampled with an eye toward including a variety of participants with regards to formal positions in the volunteer groups, gender, age, and socio-economic status. Thus, of the nine volunteer interviewees, three served managing functions, three were male, two were unemployed, and three were formally unskilled. In total, I have qualitative data from 11 visits to the local projects (each visit lasting between three to five hours) and 12 hours of recordings from personal interviews with nine volunteers. Furthermore, I hosted a focus group interview in the fall of 2016 with three volunteer supervisors who are employed full-time as staff at the organization's main offices. Their task portfolios featured overall facilitation of local projects as well as tending to volunteer recruitment and retention.

Qualitative data analysis was conducted with the help of standard computer software (NVivo), with coding of sequences of transcriptions from interviews and summaries of field notes that were

related to inclusionary or exclusionary practices and processes in the voluntary work. For practical reasons, I take a person's occupation and education level as indicative of their membership in specific social classes. Initially, all participants at the three local project locations I studied were mapped with regards to their formal occupations and educational backgrounds.

## **Empirical Analysis**

The following analysis will strive to shed light on the kinds of practices that exclude volunteers from voluntary social work.

### **The case organization—a brief description**

The organization that is the empirical foundation of this paper is a youth organization with local branches in several parts of Denmark. It is a non-profit, democratically governed, private organization with international roots that performs social care work for children and young people, mostly targeting disadvantaged children and adolescents through homework clubs, summer camps, and the like.

To implement its many diverse projects all over Denmark, the organization relies almost exclusively on volunteer labor, in addition to around 40 paid staff members and a couple of dozen student assistants and interns in the organization's main offices who facilitate and support local projects, recruit new volunteers, and so forth. The official organization is explicitly dedicated to "inclusive volunteering" and is outspoken about creating equal opportunities for civic engagement for people from different socioeconomic backgrounds, and especially for young people.

The increased sense of the importance of inclusive volunteering has clearly had an impact in the specific volunteer program studied for this paper. Here, it seems that the organization has succeeded in recruiting a share of "atypical" volunteers (e.g. lower-skilled or very young volunteers). The program offers after-school activities for disadvantaged children and youths

in different project locations in Denmark, three of which I followed over the duration of this study.

### **Analysis of social exclusion of volunteers in the organization**

During my observations at the three project locations in the organization, as well as through personal interviews, I learned of several examples of exclusion of volunteers—both aspirant and long-term members. These examples of exclusion varied largely in degree. Only a few of these cases of exclusion were of the “formal” kind: three applicants were formally rejected as volunteers despite explicitly applying to volunteer jobs—one from each project location. Certainly, becoming excluded as a volunteer is not an either/or phenomenon; it can happen along a gradually descending continuum, from highly included and respected team-member to non-participating non-volunteer.

Studying the cases of social exclusion of varying degrees, it seems rather obvious that those most at risk of exclusion generally enjoyed a lower social standing in society. Specifically, it seemed, relatively younger participants seldom enjoyed the informal status of “core” volunteers, and working-class volunteer applicants were more likely to become formally excluded from the projects. All three formally excluded volunteer applicants encountered during the research period had been affected by long-term unemployment, had a working-class family background, and/or lacked formal educational qualifications.

Before proceeding with a presentation of the exclusionary practices encountered in the case organization, an analysis of the social logics that pave the way for exclusionary processes is offered in the following subsection.

### **Fuel for inequality: “The ideal volunteer” and logics of social exclusion**

As in Joan Acker’s (2006) work on inequality regimes in organizations, the notion of the “ideal worker”—here the “ideal volunteer”—is central to an understanding of exclusion of volunteers in the present analysis. The volunteer ideal represents an organizational logic that can morally justify practices

of inclusion and exclusion within an organization.

The notion of the “ideal volunteer” was reflected in the organization’s discourse on recruitment and retention among volunteers and supervisors. Because the ideal was highly shared among individual volunteers, paid supervisors, and across project locations, and because it seems to converge with widespread notions of “the Volunteer” in society, I will argue that what I have learned during my time in the organization about the ideal volunteer, and the practices of exclusion that it fuels, can carefully be generalized to other non-profit organizations.

The ideal volunteer is a Janus head, consisting of two axes of socially desirable qualities of volunteers: firstly, motivations, and, secondly, skills. I elaborate on these in order below.

#### *Motivational ethics*

In interviews with volunteers and supervisors at the organization, many types of incentives seemed to motivate interviewees in their volunteer work—both those that could be considered “other-serving” (or altruistic) and some more “self-serving” (or egoistic).

What seemed to matter for the social value of a volunteer was the (perceived) motivational orientation of that person: The individual’s motivations had to seem primarily and authentically *altruistic* (what is often referred to as a *pro-social* orientation) for fellow volunteers and supervisors to fully accept that volunteer as a “core” group member. Self-serving incentives, such as adding experiences to one’s resumé, developing one’s professional skills, socializing with peers, or tending to one’s own family needs were clearly second-rate incentives that could be accepted only if they were secondary to other, more altruistic motivations. Volunteers who seemed to value the companionship of fellow volunteers a little “too much” were consistently disparaged as a “coffee club,” and volunteers who had joined the projects by way of their own children being recipients of the organization’s services/benefits were often suspected of tending too much to their own self-interest:

I think that Johanna and I, we are generally very interested in the kids. I have a feeling that [the other volunteers] come here just because they have their own kids here. (Female volunteer with managing functions, no children of her own involved in the project)

But I'm not like a real volunteer. I'm here because I have kids in this after-school club. (Female volunteer, answering my initial request for an interview)

This volunteer provided this answer despite having worked in the kitchen making afternoon snacks for the child recipients, with no special contact with her own children during all of the times I had come to visit.

When asked about what good qualities a volunteer needed, most volunteers emphasized altruistic motivations and would reply with something similar to this:

The main thing actually is that you need to care about the children. You should want to be there for them. (Male volunteer)

In short, pro-social incentives needed to be primary. And importantly, volunteers and supervisors were convinced that the supply of "altruistic motivations" was unequally distributed among volunteers. Notably, working-class volunteers were regarded as unlikely altruists and were often suspected of volunteering for the "wrong" reasons. For example, one female volunteer pondered about the motives of a young aspirant volunteer:

I'm just not sure she really cares about the children—I mean, whether she wants to spend time with the younger kids and do some activities here, or if she's actually just in it to hang out with us [the older volunteers]. (Female volunteer)

Additionally, paid volunteer supervisors seemed to find the recruitment of especially working-class men challenging:

Because...they were, like, these technical college scooter-guys, you know? And, well, they really needed a place for themselves. That was their main agenda. So, in a way, you can get them on board... But I think that maybe the carrot needs to be a bit bigger than full-scale altruism. (Volunteer supervisor)

I know that we need to accommodate volunteering for atypical volunteers. But, I mean, isn't it okay that we can't make room for everyone? My volunteers should feel that it's a good time and want to engage. And, well, I just don't think that dude from technical college thinks that. He probably thinks that some other things are cooler than volunteering. (Volunteer supervisor)

It isn't the purpose of this analysis to judge whether the class-based assumptions of volunteers and supervisors are correct or not, or whether working-class volunteers are indeed more "self-serving" in their incentives to engage. However, what is of importance to the present analysis is that there is a widespread focus on ethical dispositions in defining the "ideal volunteer" and that the general assumptions about the unequal distribution of such ethical motivations seem to be working in favor of middle-class inclusion and working-class exclusion in volunteerism.

The finding that altruistic motivations are expected of "ideal" volunteers isn't new. In defining the essence of volunteering, central theories on volunteer resources highlight a certain ethical disposition: Wilson & Musick's 1997 "integrated theory" of volunteering identifies ethical resources as one of three main capitals that enable volunteer engagement: "The volunteer-recipient relationship

is an ethical one,” they claim (Wilson & Musick, 1997, p. 695). In other words: motivations matter.

### *Qualifications ethics*

Whereas ethical incentives, one could argue, are defining of and somewhat unique to volunteerism, the notion of the ideal volunteer in the organization also meant that supervisors expected volunteers to possess qualities and resources similar to those in demand on the traditional labor market. One property high in demand was, notably, *initiative*—the ability to demonstrate leadership and solve tasks independently:

Well, in this project, there are basically two kinds of people, right? There are those alpha-types that take charge of tasks—and then there are beta-types that just follow and don’t start anything up themselves. (Male volunteer on the skills needed to perform volunteer work)

Another skill in high demand was that of *professionalism*, as, for instance, reflected in regular work attendance and respect for central rules and norms, such as the duty of confidentiality. Volunteers were—perhaps unsurprisingly—generally unhappy about fellow volunteers who seemed unwilling or unable to take the volunteer work as seriously as they would a paid job. Similarly, volunteers and supervisors often stressed certain specialized and pedagogical qualifications as a prerequisite for caring for the children and young people who were recipients of the project activities:

Henry, he is one of those kids with ADHD. And that’s why Marianne has started here [as a volunteer]. I’ve shanghaied her to, like, help me handle those kinds of kids [...] Marianne is a former pediatric nurse, and that’s just great. I know what [the other rank-and-file volunteers] might be thinking “Why is she using her more than she’s using us? Aren’t we good enough?”

But we need somebody with a broader perspective [...] Marianne is amazing with the kids. She knows exactly what it’s all about. (Female volunteer with managing functions.)

Overall, it was clear that a person’s position in the for-profit labor market reflected itself in the opportunities that they enjoyed as part of their volunteer work. For example, one unemployed woman applying to become a volunteer at one project location was eventually formally excluded because the remaining volunteers did not believe that she could contribute enough to the daily tasks. One female volunteer described the grounds for the exclusion with reference to the applicant’s long-term unemployment:

It’s nothing personal. It has nothing to do with her person, but more to do with her situation. That she’s all the way out there where there’s no possibility of returning to an ordinary job. (Female volunteer)

In all three cases of formal exclusion that I witnessed during my time in the organization, volunteers at the three project locations followed a similar line of reasoning when explaining these formal dismissals: that the applicants in question were not resourceful enough to contribute adequately to the work performed in the projects, and that inclusion would require an absorption of volunteer resources—whether hours and/or energy—that they wouldn’t or couldn’t spare to support the “weak” volunteers. A male volunteer with managing responsibilities at one project location put it the following way:

[Volunteer applicant] didn’t belong here. Someone had to keep an eye on him constantly. He needed a lot of support to do things. Then I said, “Well, we’re not doing that.” We couldn’t have resources going from the kids to him—he’s supposed to be a help and not an inconvenience. I mean,

we have some 70 kids to take care of here—that’s enough, you know? We can’t keep an eye on adults, too.

The reasoning seems to be that the benevolent resources of volunteers are earmarked for supporting those who belong to the official target group, i.e. the service recipients—here defined as (disadvantaged) children and young people. Thus, the imperative to help and support that is expected to define volunteer engagement does not necessarily extend beyond the specified cause of the project. In this way, volunteer work is, first and foremost, defined as a *productive* activity with an “output” goal as the guiding work principle. Although this instrumental logic may not be the first thing on most people’s minds when thinking of volunteerism, some scholars have reached similar conclusions—notably Wuthnow (1991), who argued that a main function of the volunteer role is to “limit compassion,” e.g. to a specific subgroup of care recipients.

Summing up, the “ideal volunteer” is defined, firstly, by the “right” set of motivations (i.e. altruism), and, secondly, the “right” skill set. Volunteers are expected to possess certain resources on arrival that, in part, mirror those found on the traditional labor market, such as independent initiative or professional skills. In this way, patterns of inequality in volunteerism come to reflect those of the traditional labor market, as large quantitative studies have tended to find. On the other hand, I find that the assumed ethical motivations of volunteers—as reflected in their (perceived) incentives to engage—help justify gatekeepers in pushing working-class citizens out of volunteerism: the middle-class gatekeepers (core volunteers and paid supervisors) seem unconvinced about the altruistic motives of working-class applicants. In this way, the recruitment ideals governing volunteer work in the organization seem to reflect the intermediary position of non-profit or third-sector organizations noticed elsewhere in the literature (Evers, 1995). Specifically, this intermediary position is reflected in the duality of the purposes of third-sector organizations, in that

they are altruistically motivated, as is unpaid work performed in the private sphere, but also “output-maximizing’,” converging to the logic governing paid work performed in private or public companies.

Discourses on the “ideal volunteer” provide an organizational logic that fuels concrete practices that include or exclude volunteers and aspiring volunteers from joining or continuing with the organization. In the following section, I analyze those practices.

### **Practices of social exclusion in volunteer work**

Overall, the many ways of excluding would-be volunteers observed in the local projects seemed to converge in three basic forms of exclusion: *non-recruitment*, *informal exclusion*, and *formal exclusion*. Common to all three different forms of exclusion is the reasoning that young or working-class volunteers are lacking in personal and professional resources as well as pro-social dispositions. The three categories of practices will be described and substantiated below.

#### *Non-recruitment*

Non-recruitment was perhaps the subtlest of exclusion mechanisms, as recruiters would direct their recruitment efforts towards middle-class volunteers. This was done in an (often implicit) attempt to adhere to the common volunteer ideals described in the previous section. Paid volunteer supervisors were often predominantly in charge of formal recruitment processes, and, furthermore, as authoritative organizational representatives, were expected to abide by official organizational policies for inclusive volunteering. For these reasons, non-recruitment was the most common exclusion strategy practiced by supervisors, as it is subtle and therefore less identifiable as an inequality-producing mechanism. As one volunteer supervisor told me:

It’s more who we actively turn to [in recruitment]. Because, often, if [undesirable volunteer applicants] come to us, we can’t just say, “we can’t accommodate you.” (Volunteer supervisor)



There are basically two ways of averting direct recruitment of undesirable volunteers: one is through *contact-avoidance* and the other is through *network recruitment*. *Contact-avoidance* is a mostly unintentional recruitment strategy which evades contact with potentially undesirable applicants. For example, placing advertisements for volunteer jobs where they were unlikely to be spotted by working-class applicants (often on specific volunteer recruitment websites that supervisors were aware were mostly used by middle-class applicants), or promoting volunteer job openings at places mostly frequented by middle- or upper-class citizens, such as institutions of higher education. Though other recruitment efforts—such as Facebook-advertisements, which provided for a more diverse recruitment outcome—were also undertaken in this case organization, contact-avoiding recruitment meant that especially working-class volunteers became unlikely applicants.

*Network recruitment* is a very common—official or unofficial—staffing strategy in the private sector as well as in volunteerism. People with wider social networks have higher volunteering rates, as they are more likely to be invited into volunteer organizations (Wilson, 2012). The potential “dangers” of the network recruitment strategy are well-known; for example, the effects of social network recruitment can reinforce social stratification in society (Korpi, 2001). In the case organization, network recruitment was a way to guide recruitment efforts in the direction of desirable future volunteers, as valued core volunteers were more likely to enjoy extensive social networks and recruit new volunteers similar to themselves. Though initiated by supervisors, the organization’s actual recruitment efforts were in fact placed in the hands of volunteers. In some instances, network recruitment could yield more inclusive results, as when working-class volunteers recruited new volunteers from their own social circles.

It wasn’t that volunteer supervisors didn’t make efforts to recruit atypical volunteers. A number of attempts were made, and the supervisors focused a lot of efforts on facilitating youth volunteering. But volunteer supervisors were in

a jam between two sets of principles that didn’t always correspond: the official policies of the organization supporting inclusive volunteering and an ideal of the resourceful and altruistic volunteer. Although supervisors were entrusted with the task of implementing abstract organizational visions for inclusive volunteer recruitment and retention, they also perceived themselves as responsible for composing volunteer groups that were “productive” and “functional” in practice. These different goals were, to some extent, perceived as irreconcilable by supervisors.

Perhaps because of this tension, supervisors (and volunteers) commonly distinguished between “weak” and “strong” volunteers; this terminology seemingly allowed all organizational participants to talk about social class without directly addressing social inequality. During my time in the organization, it became quite clear that *weak* referred to working-class volunteers and *strong* referred to middle-class volunteers. And although the project locations studied for this research did include a great number of *weak* volunteers, the projects were only perceived as “sustainable” by supervisors if they consisted of a majority of *strong* volunteers. One supervisor said:

If you have an excessive number of weak volunteers, well, then the whole thing implodes! Then it becomes unsustainable, and they have a hard time doing the work that’s required.  
(Volunteer supervisor)

#### *Informal forms of exclusion*

Whereas formal exclusion is a common practice in the public and for-profit sector, with dismissals of employees and rejection of job applicants that are found unsuitable for job vacancies, informal forms of exclusion might be more common in the non-profit sector. In voluntary organizations, as in the organization studied for this research, rejecting willing volunteer applicants directly might be viewed as acting in opposition to core organizational values of inclusivity and equality. In the organization studied, I noted a plethora of informal ways of excluding volunteers.

Here, I focus on those practices that organizations have some degree of control over. Although these exclusionary processes didn't seem strategic in the intentional sense, they served exclusionary ends nonetheless.

Though there are undoubtedly many informal ways of marginalizing members of social groups, I will elaborate on two concepts that are related to informal exclusion practices at an organizational level: *economic costs* and *recipient retention*.

Economic concerns can present obstacles to volunteer participation for less affluent citizens. Half of the interviewed volunteers talked in some length about personal economic difficulties that could stand in the way of volunteer engagement. A need to spend time earning money does not necessarily match well with providing unpaid labor.

Though it is difficult for an organization to battle negative views on volunteerism that exist in some societal groups, an organization can take steps to dismantle the potential economic costs endured by volunteers. Such costs will likely be a bigger hurdle for working-class or younger volunteers to overcome. As one 40-year-old middle-class volunteer told me during an interview:

We [volunteers] have to pay for the daily stuff we need for the kids [child recipients] and then wait for [the organization] to reimburse us. Oftentimes, we must wait quite a while. That's something we can handle—*our* family can handle it, you know? (Female volunteer)

Delays in economic reimbursement for volunteer expenses were referenced by all but one working-class volunteer as a frustration, as it could often be difficult to have larger amounts of money owed to you, especially by the end of the month. One male working-class volunteer stated:

I must say that this has been one of the biggest challenges so far, and it's something that angers me a bit.

You know, we pay out of our own pockets most of the time. And then it goes something like, 'Well, has the money been repaid yet? No, not today...' And then you have something like two times 2-300 DKK [equals to approximately 60-100 USD] missing in your bank account, you know? We can't keep doing that. (Male volunteer).

After having paid for volunteer-related items, such as equipment or food, volunteers were instructed to send the receipt and a signed reimbursement form to the organization. Some, especially younger and inexperienced volunteers, found the system of expense reimbursement difficult to understand and use, sometimes presenting a hindrance to reclaiming volunteer expenses in practice. So, although in theory no volunteer was required to endure any economic costs while volunteering for the organization, the oftentimes prolonged wait before reimbursements were made, coupled with the somewhat complex reimbursement system, made economic costs very real for especially working-class or younger volunteers.

The second informal exclusionary practice is referred to as *recipient retention*. This practice takes place when service recipients are retained in "client"—and thus subordinate—positions instead of being allowed to transition to more powerful, and potentially empowering, volunteer positions. In the case organization, in the spirit of inclusive volunteering, there was a major focus on the transition from *service recipient*—meaning the disadvantaged children and adolescents who were the official target group of the volunteer program—to *volunteer*—meaning the (adult) helpers who organized and hosted activities in the local projects. The official intention was to open doors to volunteering for at-risk youths, in this way aiding them in transcending their vulnerable life situations. But, in practice, the transition from recipient to volunteer proved strenuous. In some projects, adolescents were invited to become

“junior volunteers,” or they were positioned in such subordinate roles in practice. Although they were sometimes given the title of “volunteers,” this title didn’t always translate into actual influence or an interesting task portfolio. In most cases, the youth “volunteers” were not invited to volunteer staff meetings, nor did they have much say in selecting their own tasks. In actuality, they functioned like service recipients with slightly more responsibilities, but were still referred to as volunteers. One adult volunteer talked about a young recipient who had expressed a desire to become a volunteer when she turned 15:

We [the adult volunteers] were discussing if she could be sort of a half-way volunteer. Because she wanted to become a volunteer here, but, if so, we felt that she shouldn’t be allowed to join our meetings. We were thinking something like a “junior-senior” solution or something like that. (Female volunteer)

Still other youth recipients were denied the volunteer title altogether, as they weren’t deemed “ready” or “fit” for the role of a volunteer. The tension between ideals of equality in volunteerism and the fundamentally unequal relationship between the volunteer (with the connotation *powerful*) and the recipient (with the connotation *powerless*) are not unfamiliar within the literature on volunteerism: In their seminal book *Volunteers: A Social Profile*, Musick and Wilson (2008) noted that “volunteers must have needy people with whom to connect” (p. 423), but that the subordinate position of clients can make volunteers “feel uncomfortable” (p. 438). Thus, volunteers in the studied case organization needed disadvantaged children and youths whom they could help (a fact which became ever-so evident when some project locations were temporarily lacking recipients)—but when helping some recipients might in fact entail providing them with substantial volunteer opportunities, the volunteer-recipient divide proved difficult to cross.

### *Formal exclusion*

*Formal exclusion* was the most straightforward example of social exclusion observed in the case organization, as volunteer applicants were dismissed from participation altogether when they were deemed *too* unfit for the role as volunteers. Though formal exclusion was not a common practice in the case organization, it did happen—and when it did, it usually spurred some controversy among volunteers and organizational staff. The rather intense debates following the rejection of two formally excluded aspirant volunteers seem to support the claim that it is no easy task to dismiss the contributions of willing would-be volunteers. Again, the ethos seemed to be that there should be “room for everyone;” but sometimes this roominess clashed with the social expectations associated with the notion of the ideal volunteer—notably the expectation that volunteers should supply projects with valued resources and not absorb those very resources themselves.

But not everyone was equally at risk of formal exclusion: the practice exclusively befell working-class aspirants. Younger volunteers were not necessarily accepted as full volunteers, but they could usually be included in the periphery of the projects to some degree, e.g. as service recipients or junior volunteers. Thus, those most at risk of formal exclusion were adults (25-30+ years old) with a working-class affiliation. The reasons for this difference in exclusion strategies affecting youths and working-class citizens appear to be twofold: First of all, as a youth organization, the case organization caters mostly to younger age groups. This means that the organization is more likely to be inclusive towards younger volunteers than other non-profit organizations in the voluntary sector are. Secondly, mainstream societal discourses on youth, particularly those rooted in developmental psychology and that emphasize *transition* and *growth* (i.e. maturing, development, “coming of age”) as the defining features of adolescence and early adulthood (Gabriel, 2013) contributed to an expectation of *developmental potential* for younger participants, but not equally of older ones, among

established volunteers and supervisors. They were thus willing to grant younger volunteers a chance to grow into common volunteer expectations—while older volunteers were more or less expected to walk through the door with all resources and qualifications ready at hand. Younger volunteers with a working-class background were more often provided the opportunity of time to at least partially “transform” their social class; the same opportunity was rarely afforded to older working-class volunteer applicants.

All in all, although the projects of the organization could accommodate all youth participation in some form, exclusion of older volunteers tended to be more final. Younger participants often served marginal roles (as junior volunteers, “interns,” or, most often, recipients) within projects, but were rarely barred from participation altogether. Young middle-class participants served roles as “volunteers-in-the-making,” while working-class adolescents found it hard to overcome the class divide and transcend the role of recipient. Relatively older middle-class individuals (20-25+ years old) served as models of ideal volunteerism, while older working-class volunteers were harder to include in projects in any role—they were too old to be service recipients, and too disadvantaged to supply valued volunteer resources.

In Table 1, the (ideal-type) social positions of participants in the organization are displayed.

### Summary and concluding remarks

In the preceding analysis I have sought to shed light on some of the social and organizational practices as well as the social logics and ethical dispositions that exclude some volunteers from voluntary social work, ultimately paving the way for social inequality in volunteerism.

As presented in the introductory sections to this paper, many quantitative studies have found a high degree of inequality in volunteerism based on features such as age, occupation, gender, education, ethnicity, race, and disability. Such inequalities have the potential to exacerbate existing societal divisions because volunteers tend to benefit personally from their civic engagement. Furthermore, social inequalities in volunteering are a problem when one considers the great political expectations to the ability of the voluntary sector to include diverse social groups, create community, and build “network bridges” across social boundaries. The sector might not be capable of meeting such expectations if the representation of certain societal groups in volunteerism is too low. Thus, it should be of political and academic interest to dissect the political, social, and organizational practices that exclude and include citizens in volunteer work. However, despite the fact that social inequalities in access to volunteering are well-known, for the most part, the literature on volunteerism has neglected to apply a process-perspective to the (re)production of social inequalities in volunteer

**Table 1.** *Intersectional social positions of participants in the organization*

		AGE GROUP	
		Young (~< 20 y.o.)	Older (~ 20-25+ y.o.)
SOCIAL CLASS	Working class	Low-status <u>service recipient</u> : <i>Legitimate claim to support.</i> Purpose: <i>Resource development.</i>	Low-status <u>non-volunteer</u> : <i>Illegitimate claim to support.</i> Purpose: <i>Resource absorption.</i>
	Middle class	Volunteer <u>apprentice</u> : <i>Peripheral volunteer.</i> Purpose: <i>Resource development.</i>	Attractive <u>volunteer</u> : <i>Core volunteer.</i> Purpose: <i>Resource provision.</i>

work. Establishing new knowledge on how social biases in volunteerism come to exist may present opportunities for organizations and policymakers who wish to support an inclusive approach to civic engagement.

In the present paper, I have followed a least-likely case for social exclusion, namely a Danish youth organization with institutional priorities grounded in visions of inclusivity. Based on interviews with volunteers, interviews with paid volunteer supervisors, and participatory observations at three project locations, I have identified three general types of exclusionary practices—non-recruitment, informal exclusion, and formal exclusion—that give rise to social inequality in voluntary organizations based on social class and age.

While these social practices are clearly also found in other types of organizations, for example in private companies, what is special about non-profit voluntary organizations, I argue, is the social reasoning that substantiates these exclusionary practices and guides their use. On the one hand, notions of the “ideal volunteer” entail expectations to labor market–relevant capabilities. Based on such abilities, young participants and working-class aspirants are often weighed and found wanting, thus creating ‘spill-over’ inequality from the traditional labor market into the realms of unpaid voluntary labor. On the other hand, the volunteer ideal requires that volunteers have altruistic motivations for participating. Thus, the social expectations connected to the ideal volunteer are double-edged. This double-edged quality of the volunteer role, I argue, reflects the intermediary position of formalized volunteer work: not quite at home in the private sphere, but not quite native to the conventional labor market either. Thus, ideals for volunteer work draw on logics found in both spheres, resulting in double-demands on volunteers.

Coupled with social assumptions based on social class and age—e.g. about the sorts of incentives that motivate working-class and middle-class volunteers—the notion of the ideal volunteer

steers organizational gatekeepers (notably both paid volunteer supervisors and unpaid core volunteers) towards social practices that enable different kinds of exclusion for different social groups. While, for example, young people were more likely to suffer informal kinds of exclusion in the studied case organization (being left in peripheral or powerless positions on volunteer projects), working-class adults were simply less likely to be recruited or formally accepted at all. Thus, to prevent certain forms of inequality in non-profit organizations from blossoming, one needs to pay close attention to the social logics and assumptions held in the organization, including assumptions about ideal participation and assumptions about the motivations and resource-affluence of different socio-ethnic groups. As the productive nature of the work performed in the case organization (aiding disadvantaged children with after-school activities) seemed to result in higher demands on the resources of volunteers, one might expect social organizations with a focus on peer-to-peer activities (i.e. where volunteers are part of the target group) to be somewhat more inclusive towards working-class volunteers. This might present an interesting hypothesis for future research to investigate.

Although policymakers and laymen may expect the voluntary sector to display benevolent qualities missing in the for-profit sector, patterns of inequality in volunteerism come to mirror those found within the traditional labor market. Previous research has confirmed the existence of a “civic core” of middle-class citizens who serve as the backbone of many voluntary organizations (Dean, 2016); the findings in the present study may contribute to explaining why this is the case.

For organizations with purely productive goals, social exclusion may not present problems at all. But for social organizations aiming to build community or bridge the class divide, or for policymakers eager to promote volunteerism as a road to social cohesion, exclusionary practices may present a real problem in need of careful reflection. One rather radical solution to inequality

in volunteerism might be to dismiss the discourse on volunteering altogether and focus on concepts like *participation* or *community-building* instead. This approach might present a rather different set of obstacles, and it might prove equally exclusionary. Nevertheless, as this research reveals, applying the discourse of volunteering invokes a specific set of notions about the “ideal volunteer” in which there may not always be room for the “unresourceful” or the “unlikely altruists.” In any case, it seems that social equality in civic participation doesn’t come for free—it requires systematic work at different levels of an organization. The identification of exclusionary practices within organizations presents a first step towards more inclusive volunteering.

## References

- Acker, J. (2006). Inequality regimes: Gender, class, and race in organizations. *Gender and Society*, 20(4), 441–464.
- Allman, D. (2013). The sociology of social inclusion. *SAGE Open*, 3(1), doi: 10.1177/2158244012471957
- Baines, S., & Hardill, I. (2008). ‘At least I can do something’: The work of volunteering in a community beset by worklessness. *Social Policy and Society*, 7(3), 307–317.
- Bak, C. K. (2012). Definitioner og målinger af social eksklusion: En kritisk begrebsmæssig og metodologisk gennemgang [Definitions and measurements of social exclusion: A critical and methodological review]. *Dansk Sociologi*, 23(3), 79–102.
- Bekkers, R. (2005). Participation in voluntary associations: Relations with resources, personality, and political values. *Political Psychology*, 26(3), 439–454.
- Bourdieu, P. (1984). *Distinction: A social critique of the judgement of taste*. (Richard Nice, Trans.) Cambridge, MA: Harvard University Press.
- Dean, J. (2013). Manufacturing citizens: The dichotomy between policy and practice in youth volunteering in the UK. *Administrative Theory & Praxis*, 35(1), 46–62.
- Dean, J. (2016). Class diversity and youth volunteering in the United Kingdom: Applying Bourdieu’s *habitus* and cultural capital. *Nonprofit and Voluntary Sector Quarterly*, 45(1), 95S–113S.
- Dekker, P., & Halman, L. (2003). Volunteering and values: An introduction. In P. Dekker & L. Halman (Ed.), *The values of volunteering: Cross-cultural perspectives*. New York, NY: Kluwer Academic.
- Fridberg, T. (2014). Udviklingen i frivilligt arbejde 2004–2012 [Trends in volunteer work 2004–2012]. SFI—Det Nationale Forskningscenter for Velfærd.
- Furlong, A. (2013). Youth and the life course. *Youth Studies: An introduction*. New York, NY: Routledge.
- Gabriel, F. (2013). *Deconstructing youth: Youth discourses at the limits of sense*. Hampshire, UK: Palgrave Macmillan.
- Gay, P., & Hatch, S. (1983). Voluntary work and unemployment. *Research and Development Series*, no. 15. Manpower Services Commission.
- Gerring, J. (2008). Case selection for case-study analysis: Qualitative and quantitative techniques. In J. M. Box-Steffensmeier, H. E. Brady & D. Collier (Ed.), *The Oxford Handbook of Political Methodology*. NY: Oxford University Press.
- Goffman, E. (1963). *Stigma. Notes on the management of spoiled identity*. NY: Simon & Schuster. s
- Hogg, E., & Baines, S. (2011). Changing responsibilities and roles of the voluntary and community sector in the welfare mix: A review. *Social Policy & Society*, 10(3), 341–352.
- Juul, J. S. (2012). *Det danske klassesamfund. Inddeling af befolkningen i sociale klasser. Arbejderbevægelsens Erhvervsråd [The Danish class society. The division of the population into social classes]*. The Economic Council of the Labour Movement.
- Koivunen, T., Ylöstalo, H., & Otonkorpi-Lehtoranta, K. (2015). Informal practices of inequality

- in recruitment in Finland. *Nordic Journal of Working Life Studies*, 5(3), 3–21.
- Korpi, T. (2001). Good friend in bad times? Social networks and job search among the unemployed in Sweden. *Acta Sociologica*, 44(2), 157–170.
- McCloughan, P., Batt, W. H., Costine, M., & Scully, D. (2011). *Participation in volunteering and unpaid work*. European Foundation for the Improvement of Living and Working Conditions.
- Musick, M. A., & Wilson, J. (2008). *Volunteers: A social profile*. Bloomington: Indiana University Press.
- Omoto, A. M., & Snyder, M. (1995). Sustained helping without obligation: Motivation, longevity of service, and perceived attitude change among AIDS volunteers. *Journal of Personality and Social Psychology*, 68(4), 671–686.
- Omoto, A. M., Snyder, M., & Hackett, J. D. (2010). Personality and motivational antecedents of activism and civic engagement. *Journal of Personality*, 78(6), 1703–1734.
- Overgaard, C., Petrovski, E., & Hermansen, J. (2015). Volunteer care workers: A case for challenging resource theories on volunteering. Conference paper for the Association for Research on Nonprofit Organizations and Voluntary Action's 44th annual conference.
- Rambøll (2017). *Frivillighedsundersøgelsen 2017 [The National Volunteerism Survey 2017]*. Report requisitioned by the Danish Ministry of Social Affairs. Retrieved from: [https://socialministeriet.dk/media/19009/rapport\\_frivillighedsundersogelsen\\_2017.pdf](https://socialministeriet.dk/media/19009/rapport_frivillighedsundersogelsen_2017.pdf)
- Smith, D. H. (1994). Determinants of voluntary association participation and volunteering: A literature review. *Nonprofit and Voluntary Sector Quarterly*, 23(3), 243–263.
- Snyder, M., & Omoto, A. M. (2008). Volunteerism: Social issues perspectives and social policy implications. *Social Issues and Policy Review*, 2(1), 1–36.
- Taket, A., Crisp, B. R., Nevill, A., Lamaro, G., Graham, M., & Barter-Godfrey, S. (2009). Introduction. *Theorising social exclusion*. Oxon, England: Routledge.
- Tang, F., Morrow-Howell, N., & Hong, S. (2009). Inclusion of diverse older populations in volunteering: The importance of institutional facilitation. *Nonprofit and Voluntary Sector Quarterly*, 38(5), 810–827.
- United States Department of Labor. (2016). *Volunteering in the United States, 2015*. Data report released by the Bureau of Labor Statistics. Retrieved from: <https://www.bls.gov/news.release/volun.nr0.htm>
- Weber, M. (1968). *Economy and society. An outline of interpretive sociology*. New York: Bedminster Press.
- Wilson, J. (2012). Volunteerism research: A review essay. *Nonprofit and Voluntary Sector Quarterly*, 41(2), 176–212.
- Wilson, J., & Musick, M. (1997). Who cares? Toward an integrated theory of volunteer work. *American Sociological Review*, 62(5), 694–713.
- Wuthnow, R. (1991). *Acts of compassion: Caring for others and helping ourselves*. Princeton: Princeton University Press.
- Yap, S. Y., Byrne, A., & Davidson, S. (2010). From refugee to good citizen: A discourse analysis of volunteering. *Journal of Refugee Studies*, 24(1), 157–170.

# Truth, Reconciliation, and Social Work: A Critical Pathway to Social Justice and Anti-oppressive Practice

Kirsten Havig  
University of Wyoming  
[khavig@uwyo.edu](mailto:khavig@uwyo.edu)

Lisa Byers  
University of Oklahoma  
[lbyers@ou.edu](mailto:lbyers@ou.edu)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

The truth and reconciliation movement has received little attention in the social work literature in the United States yet holds great value as a pathway to the realization of the social justice goals of the profession. Truth and reconciliation commissions have been utilized internationally and have more recently emerged in the United States relevant to issues of historical trauma and oppression of indigenous people. The truth and reconciliation model is well-aligned with social work values and aims connected to human rights, culturally-sensitive practice, and an anti-racist stance. Proactive engagement in a truth-telling process that examines the role of social work in past and present injustice is a social work imperative. A commitment to anti-oppressive social work practice requires self-examination and self-awareness from our own social location and positions of relative privilege, as individuals and as a profession. As a teaching tool, an area of empirical inquiry, a framework for action, and a lens for self-examination, truth and reconciliation is of great value to social work and holds much untapped potential in the United States. This article offers information about truth and reconciliation, and its aims, processes, and benefits. Implications for social work education, practice, research, and policy advocacy are discussed, along with a call for social work leadership on the path toward authentic truth-telling and reconciliation within and outside the profession.

*Keywords:* Truth and reconciliation; social justice; social work ethics; anti-oppressive practice; oppression

***Only the truth can put the past to rest...reconciliation means working together to correct the legacy of past injustice.***

—Nelson Mandela

The Truth and Reconciliation Movement has received little attention in social work literature in the United States yet holds great professional value as a pathway to the realization of social justice goals. Truth and reconciliation commissions (TRCs) have developed internationally in areas such as post-Apartheid South Africa, New Zealand, South Korea, and Canada over the last few decades (Chung, 2016; de Costa, 2017; Dong-Choon, 2010; Parker, 2017). The work of TRCs is frequently focused on indigenous and colonized groups (Parker, 2017), with the recent inclusion of those with mental illness (Spandler & McKeown, 2017) and populations impacted by criminal justice reform (Meyers, 2009; Norris, 2017). TRCs are formed in response to persistent oppressive systems marked by human rights violations aimed at targeting populations through forced assimilation, violence, and persistent discrimination.

Internationally, TRCs are generally supported by government policy mandates and financial allocations (Roper & Barria, 2009) with



major aims including the redress and restoration of relationships damaged by a history of violence and its consequences for both the privileged and the oppressed; building understanding and empathy; democratization, and the decolonization of both knowledge and action (Ben-Josef Hirsch, MacKenzie, & Sesay, 2012; Parker, 2017). TRCs utilize strategies such as investigation into past human rights violations, eliciting the voices of those impacted and recording testimony, facilitating community dialog, offering policy recommendations, and education and training to policymakers and professionals (Parker, 2017). Sharing foundational concepts with restorative justice, the aim is not punishment but healing (Androff, 2010; Beck, 2012). Similarly, transitional justice concepts suggest the importance of meaningful and full, cross-sectional community participation and truth-telling to socially-just change (Clark, 2011; Mollica, 2017).

TRCs have emerged more recently as a tool of social justice in the U.S., and the model is in line with social work values and aims connected to human rights, culturally-sensitive practice, and an anti-racist stance (Androff, 2010). U.S. examples exist in Detroit, MI and the State of Maine, along with the exemplar, which was organized by community members in Greensboro, N.C., and which operated without government support (Bermanzohn, 2007; Inwood, Alderman, & Barron, 2015). However, the international community has more fully developed and utilized the model to drive social work theory, policy, and practice (Schames, 2003). Also, in contrast to truth and reconciliation models internationally, state support via legislation and resource allocation is less common in the U.S. (Inwood, Alderman, & Barron, 2015). The lack of resources is clearly problematic in the face of the historically state-sanctioned violence and oppression that lies at the heart of the movement. A challenge to the TRC model is a lack of accountability on the part of the state and the resulting mistrust in communities seeking such healing (Inwood, 2016). The TRC model, objectives, and overall movement hold great value for social work practice, advocacy, education, and research and remains a

largely untapped tool for the U.S. in confronting and addressing the harms of the past.

### **Truth-telling in the Social Work Profession: Turning the Lens Inward**

*True reconciliation exposes the awfulness, the abuse, the hurt, the truth. It could even sometimes make things worse. It is a risky undertaking but in the end it is worthwhile, because in the end only an honest confrontation with reality can bring real healing. Superficial reconciliation can bring only superficial healing.*

—Desmond Tutu

A prerequisite to reconciliation is the process of truth-telling. Social work professional preparation places a strong emphasis on self-awareness at the micro level, challenging us as individuals to closely examine our own biases and experiences and their potential impact for our client relationships and decision-making (Urdang, 2010; Yan & Wong, 2005). Such self-awareness is frequently associated with concepts such as cultural competence, but rarely is it examined as a pathway for critical, anti-racist practice (Feize & Gonzalez 2018). The social work literature places less emphasis on turning the lens inward at the macro level and confronting the injustices inherent to the United States and the history of our profession. For social work, this includes participation in the oppression and social control of vulnerable people across time and space. Such examples in the profession, if unacknowledged, create barriers to the realization of our social justice mission, and we risk continued whitewashing of our own history. Attention to our role in past and present injustice, along with work toward reconciliation, is a social work imperative. Key to this process is the acknowledgement that the past is not just the past, and those harms are best understood as a continuum that exists and manifests in the present day, regardless of one's own

direct participation (Androff, 2010; de Costa, 2017; Jones, 2006). This consciousness-raising process is critical, in particular for social workers for whom social location provides advantage (Czyzewski & Tester, 2014).

Unfortunately, alongside our profession's legacy of activism is a history fraught with examples of social work as a tool of social control and social workers as the purveyors of oppression. Essential elements of this history include the forced assimilation and violence perpetrated on Native Americans in boarding schools as well as social workers' participation in the Indian Adoption Act, marked by efforts to eradicate Native cultures (Jacobs, 2013; Parker, 2017; Regan, 2010); public assistance caseworkers' enforcement of oppressive and punitive policies aimed at exerting state control of poor women utilizing public assistance (Abramovitz, 2018; Durbin, 1973); a mental health system rooted in inhuman practices (Spandler & McKeown, 2017); continued application of a pathology-medical model to services for people with disabilities (DePoy & Gilson, 2012); racial segregation in social work education and practice (Platt & Chandler, 1988), and alignment with the goals of eugenics (Kennedy, 2008). This historical knowledge is essential to professional awareness but is often missing in our texts.

Concepts such as race-related stress (Utsey, Chea, Brown, & Kelly, 2002) and historical trauma provide vehicles for better contextualizing and understanding the aggregate and longitudinal impact of mass and prolonged group-based trauma. Historical trauma refers to the generational pain for groups that have been targeted for systematic oppression through acts such as colonization and relocation, resulting in reports of "historical loss" and associated symptoms such as grief, alienation, loss of trust, and social marginalization (Braveheart, Chase, Elkins, & Altschul, 2011; Whitbeck, Adams, Hoyt, & Chen, 2004). Historical trauma is a concept that has also been utilized in tribal communities in the United States to contextualize the past and build on cultural strengths for shared healing. The concept of coloniality also helps to frame the impact

of the legacy of colonization and the oppression/suppression of Native cultures in the U.S. Coloniality is the systemic oppression of cultures and ways of being through suppression and control by the dominant, Western culture. While the colonization period is over, colonizers are still present, and this history is a continuum that connects to the present, the impact of colonization still a reality (Mignolo, 2005). Present day discrimination builds on this loss and manifests as inequities in health, mental health, socio-economic status, and violence. This legacy remains, often unspoken, as a barrier between social workers and the vulnerable or disadvantaged groups we aim to serve. These contexts must be considered in social work across levels and fields of practice, and engagement with colonial history and its impact is an ethical imperative (Czyzewski & Tester 2014).

A timely example will illustrate. The issue of sexual violence against women has come to the forefront recently across the globe, and that is best understood through an intersectional lens that accounts for collective historical trauma. Given the fact that American Indian and Alaskan Native (AI/AN) women (26.9%) have the highest percentage of sexual violence (attempted or completed rape) in comparison to other groups (non-Hispanic Blacks 22% and non-Hispanic Whites 14.6%), (Black, et al., 2011), we must account for those disparities and their roots in our efforts to prevent and respond. Not only are AI/AN women and girls disproportionately represented in reported statistics related to sexual violence, the dynamics of these offenses are different from those experienced by members of other populations. The connection to the use of sexual violence as a tool of warfare and genocide against Native people in the U.S. must be considered when working with current day survivors. This context is critical to both a true person-in-environment perspective and for culturally-informed therapeutic work. A social worker directing a Tribal Family Violence Prevention Program makes clear the connection between colonization and the experiences of Native women today:

In looking at violence against Native women, it's important to look at historical traumas and history. The legacy of colonization has had a tremendous impact on our people for generations... We have to look at the impact of colonization and the sexual violence perpetrated amongst native children at boarding schools. It's as though we've been conditioned to accept this kind of victimization (S. Partridge, as quoted in Nagle, 2015).

The lessons we can take from the Truth and Reconciliation Movement should not only be lessons of remediation, but insight into prevention. As we turn the lens inward on our own history, we are further implicated in the marginalization and oppression of less powerful others in the present day: for example, the treatment of sexual and gender minority people in social work educational and practice settings (Dentato, et al., 2016). As noted by Jeyapal (2017), the paradox for social workers committed to social justice is that we are frequently anchored within, and limited by, the very institutions and practices that have shaped injustice over time (e.g., the criminal justice system).

At the same time, contemporary practice also reveals policies and practices aimed at truth and reconciliation. In one of the only state-sponsored initiatives in the U.S., The Maine-Wabanaki-State Child Welfare TRC has mandated the process in statute. In a move beyond the protections set forth by the Indian Child Welfare Act of 1978, the Commission has created the structures and processes necessary to amplify and bring the voices of Native people to the forefront, including those directly impacted by harmful practices of the past such as the Indian Adoption Project (Attean, et al., 2012). The goals of the Maine-Wabanaki project are threefold: to uncover and acknowledge the truth about what happened to Wabanaki children and families; to create opportunities for healing; and to change the child welfare system through training and culturally-informed practices aimed at just

and sensitive treatment of Wabanaki families today. A major outcome has been a truth-telling process about the impact of past child welfare practices for generations of Native people, as well as a disruption to the accepted narrative about Native families that has tainted the system and its services for decades (Bjorum, 2014). Testimony, records, and stories are now available, and though the goals of the legal mandate have largely been met, the work of the TRC continues as a mechanism for healing and change in the community (Maine-Wabanaki Truth and Reconciliation Commission, 2018). Also available are guiding documents and information relevant to the process, making such resources accessible for others to utilize. Particularly in areas such as child welfare, social workers have a major role to play and the opportunity to bring the processes and goals of truth and reconciliation to their work across the U.S.

## **Moving Forward in Truth Toward Reconciliation**

***Reconciliation is a part of the healing process, but how can there be healing when the wounds are still being inflicted?***

—N. K. Jemisin

A commitment to anti-oppressive social work practice requires a commitment to self-examination and self-awareness (Feize & Gonzalez, 2018) from our own social location and positions of relative privilege. Self-understanding can impact change and offers a kind of empowerment in critical consciousness (Gutierrez, DeLois, & GlenMaye, 1995). We echo here Jeyapal's (2016) call to social work action and the need for social workers to intentionally confront racism and other oppressive structures through proactive efforts, leadership, and vigilance in the face of the violence and discrimination still so present in our society. An intersectional perspective is also required if we are to truly understand the complexity of privilege and oppression as it manifests for each of us according to our own unique social location.

We offer another example of the importance of truth and reconciliation currently unfolding in Oklahoma, the site of the 1921 Tulsa Race Massacre that occurred almost 100 years ago (Brown, 2018; Ellsworth, 1982), creating a legacy of segregation and racial inequality that persists in that community today. On May 31, 1921, a riot erupted in a racially and gender oppressive context where lynching of African American men and women was a common reality. It was against this backdrop that an interaction between Dick Roland and Sarah Page was interpreted as a sexual assault by the White population, resulting in his lynching. As news of the lynching spread, African American veterans from World War I gathered in front of the courthouse to protect him. A confrontation between the veterans and Whites escalated. The White mob grew, continuing to shoot and kill people as it marched into the thriving African American community of Greenwood, once known as Black Wall Street. Once in the community, the mob set fires leveling Greenwood (Ellsworth, 1982). Initial reactions within the dominant society were to deny the devastation. Greenwood residents' claims to replace property were denied by insurance companies. Suits brought against the City of Tulsa were dismissed. The African American community was blamed for the riot and a decades-long coverup began (Oklahoma Commission to Study the Race Riot of 1921 [OCSRR], 2001).

As the 100<sup>th</sup> anniversary of this horrific event approaches a Centennial Commission (CC) was formed in 2017 that is dedicated to education, remembrance, and economic development. The CC has state-level bipartisan backing and the support of the Tulsa Mayor (Centennial Commission, n.d.) with funding from a local community foundation. The CC has made significant contributions toward truth and reconciliation in the community, including: 1) the expansion of education specific to the massacre to discussion of the impact on the state and national level, 2) placing remembrance of victims and descendants as a prominent factor, and 3) attending to economic development within Greenwood. Most importantly the CC has been foundational in the renaming of the riot as the 1921 Tulsa Race Massacre

which represents an accurate portrayal of the horrific event. The pathway to the realization of the CC was lengthy and fraught with the previous attempts to seek justice that were denied.

In 1996, House Bill 1035 created the Oklahoma Commission to Study the Race Riot of 1921 [OCSTRR] which began research in 1997 (Gates, 2003) and produced a final report on February 5, 2001. Specific restorative actions were listed in the report, including reparations to survivors, listening to the voices of the descendants of survivors, a scholarship fund, economic growth in Greenwood, and a memorial for the reburial of victims found in mass graves (OCSTRR, 2001). When the state passed the 1921 Tulsa Race Riot Reconciliation Act, it included 300 college scholarships, a memorial, and economic development plan only. Over 10 years later, the Oklahoma Senate passed S.B. 1381 that would have required education regarding the Tulsa Race Riot in public schools, however, the bill failed in the House based on arguments that the Department of Education required this teaching. The argument for the sponsoring representatives was that it was still not being taught by many educators.

OCSTRR (2001) indicated that the American Association of Social Workers (AASW) studied the housing of African Americans in Tulsa not long before the massacre. The report noted that the majority lived in poor conditions, under segregation. These findings were shared at the 56<sup>th</sup> AASW national conference in 1929 and are no other known reports or studies exist from the profession. It is regrettable that there was no follow-up study conducted at that time, or since, that would have documented the devastation and continuing impact of this event on current biopsychosocial well-being of Black Americans in Tulsa. Collectively, those in power distorted the cause of the massacre, denied the extent of the injuries, the deaths, the property destruction, and placed the blame on the survivors themselves. The oppressed kept the stories alive and spoke truth in their community newspapers, agencies, and churches. This dedication was the foundation of the OCSTRR report that ultimately documented the horrors of that day and the subsequent coverup, and catalyzed efforts toward a

more complete process of truth-telling and creating pathways to reconciliation. Key to this process has been legislation supporting the aims of truth and reconciliation as well as community efforts toward truth-telling; however, missing in this process is a fiscal commitment by the State to devote funds to these efforts and much work is yet to be done in terms of broad education about this history as well as an accounting of the harms incurred by the community, paid in the currency of historical trauma. Social workers have a critical role to play in this process, as well as in similar efforts in the United States to confront and address past harms.

As a profession dedicated to social justice, social work can utilize this event as an example of extreme oppression and the need for truth and reconciliation toward thwarting the damage done by decades of denial. The above-described actions related to the Tulsa Race Massacre do reflect many of the key elements of truth and reconciliation, including investigation into past human rights violations, eliciting the voices of those impacted and recording testimony, facilitating community dialog, offering policy recommendations, and education and training to policymakers and professionals (Parker, 2017). While a missed opportunity for the profession of social work to take a justice stance immediately following the Tulsa Race Massacre, today social workers can assist in confronting that past and in translating the lessons learned to the social welfare issues of today through research and education.

In addition to the initiatives utilizing a TRC model at the community level, the spirit of the truth and reconciliation movement also calls upon us to tell hard truths and act on smaller scales, including a disruption of continuing oppression. Social work educators must teach about the past as they help create our future. Teachable moments abound for social work educators to offer concrete examples that connect history to the present and opportunities for reconciliation at the local level; examples from one of the authors' institutions will illustrate: Thirty-nine tribal nations exist today in Oklahoma; over 30 of those were forcibly relocated from traditional homelands (Hamill, 2000).

Perspectives such as critical race theory (Kolivoski, Weaver, & Constance-Huggins, 2014) and anti-oppressive practice (Burke & Harrison, 1998) provide additional platforms upon which to uncover the realities of our shared past (and present) and to critically examine the roles we may play in perpetuating injustice within the profession and should be included in social work curricula. A number of teaching tools and strategies also exist to aid the social work educator in these aims including: documentaries that represent the truths of history; case histories that illustrate historical trauma as a cultural context for practice; use of assessment and measurement tools that include an accounting of injustice experienced at the individual and collective levels; policy analysis through an anti-oppressive lens; advocacy and leadership around truth-telling (e.g., establishing October 10 as Indigenous Peoples Day in lieu of Columbus Day); and activities outside the classroom such student groups and community events.

In practice, education, and research, social workers can use foundational social work practice tools like adapted ecomaps and genograms as well as measurement scales to help promote both self-awareness and a deeper understanding of others. Examples include the Culturagram (Singer, 2008); the Color-Coded Timeline Trauma Genogram (Jordan, 2004); the Transgenerational Trauma and Resilience Genogram (Goodman, 2013); the Historical Loss and Associated Symptoms Scale (Whitbeck, Adams, Hoyt, and Chen, 2004); the Internalized Racial Oppression Scale (IROS) for Black individuals (Bailey, Chung, Williams, Singh & Terrell, 2011); the Index of Race-related Stress (Utsey & Ponterotto, 1996); and the Urban American Indian Identity Scale (Walters, 1999) which may aid in assessment with clients in practice; educators may also employ these in relation to case studies and researchers to guide inquiry.

An understanding of historical trauma and its impact today is critical when working with individuals and in communities impacted by collective past oppression. Further, efforts toward individual and cultural empowerment are supported by the process of truth and reconciliation. Members

of historically oppressed populations become empowered by acknowledgement of the harms of the past, as eloquently noted by author Maya Angelou: “There is no greater agony than bearing an untold story inside you”. Additionally, as we recognize past harms, we also come to understand the collective resilience and strength present in impacted populations. DeGruy, in her work on posttraumatic slave syndrome offers this perspective as key to healing. This lens allows us to:

...gain a greater understanding of the impact centuries of slavery and oppression has had on our lives. With this understanding we can explore the role our history has played in the evolution of our thoughts and feelings about who and what we are...While it is true that some of this evolution has resulted in behaviors that have become both destructive and maladaptive, it is also encouraging that in spite of the oppressive conditions our ancestors endured, they were able to pass on their phenomenal powers of resilience and adaptability” (DeGruy, 2005, p. 16).

For a strengths-based profession, this insight is invaluable to social work, helping allies to be better equipped to promote and support the empowerment of oppressed groups.

Strier and Breshtling (2016) offer the concept of professional resistance as an opportunity for social workers to confront and, when possible, refuse participation in oppressive practices, programs, and policies. This tension was noted as well by Jeyapal (2017) between the goals, ethics, and values of social work and the realities of practice places practitioners in a bind. Functioning as “translators of state power” (Strier & Breshtling, 2016, p.111), social workers are often called upon to enforce the very policies and procedures that run counter to the aims of anti-oppressive practice. Referencing moments in history such as the rank and file movement of the

early 20<sup>th</sup> century, the authors recognize a tradition of professional resistance. Resistance is defined not as noncompliance, but as an act informed by a critical and contextualized analysis of social control and oppressive forces aimed at supporting social justice goals (Fook, 1993; Singh & Cowden, 2009). Professional resistance to oppressive systems may manifest as: opposition to or offering alternatives to the application of Eurocentric interventions for diverse populations; focusing social work analysis and change efforts on the oppressors rather than the oppressed; empowering client populations to guide research and practice; and promoting strategies such as truth and reconciliation to expose the lived realities of oppressed people and spark change informed by those truths (Strier & Breshtling, 2016). Not without risks and challenges, professional resistance to historical amnesia/denial and the practices and policies that perpetuate human rights violations is a stance that social workers should consider, as they also consider reasons why clients may be labeled resistant to intervention that may further marginalize them.

There is a need for research aimed at further operationalizing TRCs and understanding their impact (Ben-Josef Hirsch, MacKenzie & Sesay, 2012) as well as in social work practice specifically (Androff, 2010). In addition to their potential roles in the work of TRCs, social workers’ use of records, testimony, and public events offer springboards to better understanding the impact of historical, collective civil and human rights violations for individuals and families. For example, Abdullah (2013) highlights the utility of South Africa’s TRC documentation of national trauma as “a guide for multicultural social work” (p. 46) that also provided accounts of gender-based and police violence and their community impacts, a true person-in-environment perspective inclusive of the collective past. Similar benefits can be cultivated from efforts such as the Centennial Commission’s work around the Tulsa Race Massacre as described above. Exploratory research into social workers’ knowledge of oppressive practices within the profession, of historical trauma, and anti-oppressive

practices is also needed. Historical trauma must be a primary element in culturally-sensitive, culturally-responsive research. Researchers should consider the history of funding streams, research design, data ownership and sharing, the interpretation and sharing of results when working with or on behalf of historically oppressed populations as efforts toward the decolonization of knowledge.

Participatory, qualitative methodologies are well-suited for work with historically oppressed populations. Such a contextualized, reflective, and reflexive approach is crucial, lest we risk perpetuating the same oppression we seek to alleviate: loss of voice, disempowerment, decontextualized knowledge and resulting exploitation or colonization of knowledge. Further, intervention with historically oppressed people must be rooted in the perspectives and lived experiences of those impacted. Trauma-informed research with a macro-level focus is imperative to the promotion of social justice for oppressed groups, and qualitative research offers an essential pathway. Exploratory research aimed at better understanding social workers' knowledge of and response to issues related to historical trauma is also needed to help guide social work education. Lastly, research to identify the short- and long-term impact of interventions aimed at historical trauma and loss is needed in order to support the development of culturally-informed practice and build the evidence base.

Social workers also have the professional skills, knowledge, and values to be instrumental in policymaking related to the formation of TRCs that include state participation/accountability, along with implementation of changes based on their work. Policy analysis through an anti-oppressive lens, advocacy for state-supported truth and reconciliation commissions, and the translation of policy into rules and procedures that reflect social justice goals provide opportunities for social workers to promote truth-telling, healing, and change. Related, truth and reconciliation may serve as both a goal and a process in community organizing work (Beck, 2012).

As a teaching tool, an area of empirical

inquiry, a framework for action, and a lens for self-examination, truth and reconciliation is of great value to social work and holds much untapped potential in the U.S. In our efforts to operationalize the value of social justice, we must start with the process of our own truth-telling. By engaging in the sometimes painful process of truth-telling about our own participation in the oppression of others, we empower ourselves and others for healing and reconciliation.

## References

- Abdullah, S. (2013). Multicultural social work and national trauma: Lessons from South Africa. *International Social Work, 58*(1), 43–54.
- Abramovitz, M. (2018). *Regulating the Lives of Women*. London, UK: Routledge.
- Androff, D. (2010). Truth and reconciliation commissions (TRCs): An international human rights intervention and its connection to social work. *British Journal of Social Work, 40*(6), 1960–1977.
- Attean, E., Burns, P., Proulx, M., Bissonette-Lewey, J., Williams, J., & Deserly, K. (2012). Truth, healing, and systems of change: The Maine Wabanaki-State child welfare truth and reconciliation commission process. *Child Welfare, 91*(3), 15–30.
- Bailey, T.K.; Chung, Y.B., Williams, W.S., Singh, A.A., & Terrell, H.K. (2011). Development and validation of the Internalized Racial Oppression Scale for Black individuals. *Journal of Counseling Psychology, 58*(4), 481–93.
- Beck, E. (2012) Transforming communities: Restorative justice as a community building strategy. *Journal of Community Practice, 20*(4), 380–401.
- Ben-Josef Hirsch, M., Mackenzie, M., & Sesay, M. (2012). Measuring the impacts of truth and reconciliation commissions: Placing the global 'success' of TRCs in local perspective. *Cooperation and Conflict, 47*(3), 386–403.
- Bermanzohn, S.A. (2007). A massacre survivor reflects on the Greensboro Truth and Reconciliation Commission. *Radical History Review, 97*, 102–110.

- Bjorum, E. (2014). "Those Are Our People and That's Our Family": Wabanaki perspectives on child welfare practice in their communities. *Journal of Public Child Welfare*, 8(3), 279–303.
- Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). *The national intimate partner and sexual violence survey (NISVS): 2010 summary report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Braveheart, M.Y.H., Chase, J., Elkins, J., & Altschul, D.B. (2011). Historical trauma among Indigenous Peoples of the Americas: Concepts, research, and clinical considerations. *Journal of Psychoactive Drugs*, 43(4), 282–290.
- Brown, D. L. (2018, 3 October). Tulsa mayor reopens investigation into possible mass graves from 1921 race massacre. *Washington Post*.
- Burke B., & Harrison P. (1998). Anti-oppressive practice. In R. Adams, L. Dominelli, M. Payne M, & J. Campling (Eds.) *Social Work* (131–138). London, UK: Palgrave.
- Chung, S. (2016). The morning after Canada's Truth and Reconciliation Commission report: Decolonisation through hybridity, ambivalence and alliance. *Intercultural Education*, 27(5), 399–408.
- Clark, J.N. (2011). Transitional justice, truth and reconciliation: An under-explored relationship. *International Criminal Law Review*, 11, 241–261.
- Czyzewski, K. & Tester, F. (2014). Social work, colonial history, and engaging indigenous self-determination. *Canadian Social Work Review*, 31(2), 211–226.
- Dentato, M. P., Craig, S. L., Lloyd, M. R., Kelly, B. L., Wright, C., & Austin, A. (2016). Homophobia within schools of social work: The critical need for affirming classroom settings and effective preparation for service with the LGBTQ community. *Social Work Education*, 35(6), 672–692.
- de Costa, R. (2017). Discursive institutions in non-transitional societies: The Truth and Reconciliation Commission of Canada. *International Political Science Review*, 38(2), 185–199.
- DeGruy, J. (2005). *Post traumatic slave syndrome: America's legacy of enduring injury and healing*. Portland, OR: Joy DeGruy Press.
- DePoy, E. & Gilson, S. (2012). Social work practice with disability: Moving from the perpetuation of a client category to local through global human rights and social justice. *Revista de Asisten Social*, 1(1), 11–22.
- Dong-Choon, K. (2010). The long road toward truth and reconciliation. *Critical Asian Studies*, 42(4), 525–552.
- Durbin, E. (1973). Work and welfare: The case of Aid to Families with Dependent Children. *The Journal of Human Resources*, 8, 103–125.
- Ellsworth, S. (1982). *Death in a Promised Land: The Tulsa Race Riot of 1921*. Baton Rouge, LA.: Louisiana State University Press
- Feize, L., & Gonzalez, J. (2018). A model of cultural competency in social work as seen through the lens of self-awareness. *Social Work Education*, 37(4), 472–489.
- Fook, J. (1993). *Radical casework: A theory of practice*. Sydney, AU: Allen and Unwin.
- Gates, E.F. (2003). *Riot on Greenwood: The total destruction of Black Wall Street*. Fort Worth, TX: Wild Horse Press.
- Goodman, R. D. (2013). The transgenerational trauma and resilience genogram. *Counselling Psychology Quarterly*, 26(3–4), 386–405.
- Hamill, J. (2000). Being Indian in Northeast Oklahoma. *Plains Anthropologist*, 45(173), 291–303.
- Inwood, J. (2016). How grassroots truth and reconciliation movements can further the fight for social justice in U.S. communities. *National Civic Review*, 105, 56–57.
- Inwood, J., Alderman, D., & Barron, M. (2015). Addressing structural violence through US reconciliation commissions: The case study of Greensboro, NC and Detroit, MI. *Political Geography*, 52, 57–64.
- Jacobs, M.D. (2013). Remembering the "Forgotten Child": The American Indian child welfare



- crisis of the 1960s and 1970s. *American Indian Quarterly*, 37(1–2), 136–159.
- Jeyapal, D. (2017). The evolving politics of race and social work activism: A call across borders. *Social Work*, 62(1), 45–52.
- Jones, J.M. (2006). From racial inequality to social justice: The legacy of *Brown v. Board* and lessons from South Africa. *Journal of Social Issues*, 62(4), 885–909.
- Jordan, K. (2004). The color-coded timeline trauma genogram. *Brief treatment and crisis intervention*, 4(1), 57–70.
- Kennedy, A. C. (2008). Eugenics, “degenerate girls,” and social workers during the Progressive Era. *Affilia: Journal of Women and Social Work*, 23(1), 22–37.
- Kolivoski, K.M., Weaver, A. & Constance-Huggins, M. (2014). Critical race theory: Opportunities for application in social work practice and policy. *Families in Society*, 95(4), 269–276.
- Maine-Wabanaki Truth and Reconciliation Commission, 2018. *Home Page*. Rockport, ME.
- Meyers, R. (2009). Truth and reconciliation commissions 101: What TRCs can teach the United States justice system about justice. *Revista Jurídica UPR*, 78, 95–128.
- Mignolo, W. (2005). *The idea of Latin America*. New York, NY: Blackwell Publishing.
- Mollica, C. (2017). The diversity of identity: Youth participation at the Solomon Islands Truth and Reconciliation Commission. *Australian Journal of International Affairs*, 71(4), 371–388.
- Nagle, R. (2015, 1 April). An interview with Shawn Partridge on violence against native women. *Huffington Post*.
- Norris, Z. (2017). Repairing harm from racial injustice: An analysis of the Justice Reinvestment Initiative and the Truth and Reconciliation Commission. *Denver Law Review*, 94(3), 515–536.
- Oklahoma Commission to Study the Race Riot of 1921 [OCSR]. (2001). *Tulsa race riot*. Oklahoma City, OK: Author.
- Parker, H. (2017). Truth and reconciliation commissions: A needed force in Alaska? *Alaska Law Review*, 34(1), 27–66.
- Platt, T., & Chandler, S. (1988). Constant struggle: E. Franklin Frazier and Black social work in the 1920s. *Social Work*, 33(4), 293–297.
- Regan, P. (2010). Unsettling the settler within: Indian residential schools, truth telling and reconciliation in Canada. *The Canadian Geographer*, 57(4), e38–e39.
- Roper, S.D., & Barria, L.A. (2009). Why do states commission the truth? Political considerations in the establishment of African truth and reconciliation commissions. *Human Rights Review*, 10, 373–391.
- Schamess, G. (2003). Addressing psychopolitical trauma: The complex relationship between healing individuals and rehabilitating nations [Editorial]. *Smith College Studies in Social Work*, 73(2), 169–174.
- Singh, G., & Cowden, S. (2009). The social worker as intellectual. *European Journal of Social Work*, 2, 479–493.
- Singer, J. (Producer). (2008, December 1). *Visual assessment tools: The Culturagram—interview with Dr. Elaine Congress* [audio podcast]. Retrieved from <http://socialworkpodcast.blogspot.com/2008/12/visual-assessment-tools-culturagram.html>.
- Spandler, H. & McKeown, M. (2017). Exploring the case for truth and reconciliation in mental health services. *Mental Health Review Journal*, 22(2), 83–94.
- Strier, R., & Breshtling, O. (2016). Professional resistance in social work: Counterpractice assemblages. *Social Work*, 61(2), 111–118.
- Urdang, E. (2010). Awareness of self—A critical tool. *Social Work Education*, 29(5), 523–538.
- Utsey, S. O., Chae, M. H., Brown, C. F., & Kelly, D. (2002). Effect of ethnic group membership on ethnic identity, race-related stress, and quality of life. *Cultural Diversity & Ethnic Minority Psychology*, 8(4), 367–377.
- Utsey, S. O., & Ponterotto, J. G. (1996). Development and validation of the Index

- of Race-Related Stress (IRRS). *Journal of Counseling Psychology*, 43(4), 490–501.
- Walters, K. L. (1999). Urban American Indian identity attitudes and acculturation styles. *Journal of Human Behavior in the Social Environment*, 2, 163–178.
- Whitbeck, L.B., Adams, G.W., Hoyt, D.R., & Chen, X. (2004). Conceptualizing and measuring historical trauma among American Indian people. *American Journal of Community Psychology*, 33(3/4), 119–130.
- Yan, M.C., & Wong, Y.R. (2005). Rethinking self-awareness in cultural competence: Toward a dialogic self in cross-cultural social work. *Families in Society: Journal of Contemporary Social Services*, 86(2), 181–188.

# The Ethics of Financial Social Work

Elena Delavega, Ph.D.  
University of Memphis  
[mdlavega@memphis.edu](mailto:mdlavega@memphis.edu)

Karina Reyes Cordero, Ph.D.  
Universidad de la Frontera, Chile  
[kreyesc@gmail.com](mailto:kreyesc@gmail.com)

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

## Abstract

The economy is the largest context in which social work operates, and thus social work has an ethical responsibility to assess and intervene in the larger economic context, particularly as we face the rise of capital in a globalized world. In this context, financial social work has arisen, but it lacks a comprehensive assessment of the ethics of financial social work from a real world understanding of macroeconomics and microeconomics, including the relationships between wealthy and poor countries and the role of power in such relationships. We propose an ethical framework to develop such an assessment with a balanced understanding of the role of debt, financial education, and power relations in the economic context presented from the perspective of the United States and Chile.

*Keywords:* financial social work, economics, globalization, neoliberalism, power

## Social Work in the Economic Context

The economy is the largest context in which social work operates, and thus social work has an ethical responsibility to assess and intervene in the larger economic context, particularly as we face the rise of capital in a globalized world. Economics is the science and art of meeting needs with limited resources; deciding what and how many is to be made

and how it is to be distributed. Microeconomics is to do with individuals, and macroeconomics deals with countries and economic systems. Both are important to our understanding and as areas of intervention in social work.

In the 21st century, the economy (at both the macro and micro levels) continues to be the central base for development in countries whose economic system is governed by market rules, a system that in turn increased social inequalities and systematically excludes those with lower incomes. It is reflected in the low, and even null **access** that these sectors have to financial services, thus preventing the development and prosperity of the most vulnerable families (Barahona, 2016; Stuart, 2013). It is in this context that in recent years that financial social work has been incorporated into the professional training of social workers in the United States, as a tool of professionals to develop financial literacy skills and models of financial behavior change (Wolfsohn & Michaeli, 2014) in order to obtain the necessary skills to help people modify their behavior in economic matters. Financial social work asserts that people need to understand the market economy and finances to thrive and to well financially. The accepted view on the market system is that it benefits everyone. This is based on the basic assumption that markets work by everyone's pursuit of their own self-interest, but that this is tempered by competition, which sets fair prices and

weeds bad actors out (Smith, 1937). This system will only work when the actors in the market, both buyers and sellers, have equivalent power, and no one buyer or seller has so much power as to control the market and must thus be a fair participant (Smith, 1937). There is shared risk and shared prosperity and maximizing individual interest can only go so far as to not hurt the group of others, insuring fairness (Smith, 1937). This system of fair exchange and shared risk is not true in the present day (Luce, 2017; Sachs, 2017). In fact, rather the opposite is true. While the few at the top make even larger fortunes, things have been gone rather badly for quite some time for the middle and lower classes (Sachs, 2017). Unemployment, low wages, and lack of opportunity for the common person belie the rise in the stock market (Sachs, 2017). American economic policy has focused almost exclusively on economic growth but ignored other crucial aspects of sustainable development (Sachs, 2017). Above all, sustainable development is fair development in which risk and prosperity are shared and can accrue equally to all people.

Solving our economic problems will require that American society and the world return to values and common decency (Sachs, 2017). The United States needs to implement its own sustainable development goals, and social workers are particularly important in social interventions to foster the public good and make these changes; however, social workers will not be able to do so if they do not understand both the macro as well as the microeconomy (Stuart, 2013), and . apply appropriate interventions. Instead, we have abandoned the social justice and solidarity causes and turned toward practicing what amounts to nothing more than ersatz psychology, as Specht and Courtney already pointed out in 1994 (This sentence is confusing).

### **The Failures of the Economic System**

Donald Trump is the symptom, but the problem is that economic growth is not equally shared among people. The old dictum of “what is

good for GM [General Motors] is good for America” no longer holds true (Luce, 2017, 31). The middle class is disappearing and increasing incomes for the working class (all people who work for a living are the working class) are a thing of the past (Luce, 2017). The fruits and gains are going to the top, and the people in the middle are left wondering what happened to the promise of the American dream (Luce, 2017; Piketty, 2014). Seeking and finding scapegoats is the natural result (Luce, 2017). The gains have all been going to the 1% and even to a smaller fraction of those at the top (Luce, 2017), with the result that these supremely rich elites have much to lose by any systemic change. Thus any question or threat to the system is seen as a threat to their wealth and power, and labeled as “communist” and stopped, with brutal force if necessary. Hence the persecution of Mexicans and Muslims. One needs to look no further than Chile to see the devastating effects of American interventionism and the rich protecting their interests.

The U.S. led globalization and world domination for most of the twentieth century (Luce, 2017), but this has not resulted in shared prosperity. The Washington Consensus, or the neoliberalist policies that defined the turn of the 21<sup>st</sup> century, has failed miserably in eliminating world poverty, but has wrought policies that have fostered American interventionism in the world (Luce, 2017). The World Bank and the International Monetary Fund, together with the CIA and other American organizations have practiced neoliberalist policies and fostered American interventionism since the time of the Bretton Woods Agreement. (Higgins, A., & Sanger, D.E. (2015, March 17).

The World Bank started with the goal of helping reconstruct Europe, which had been devastated during WWII, but the goal soon expanded to help countries in Latin America, Asia, and Africa, undeveloped areas of the world in need of funding and technical assistance for infrastructure projects (The World Bank, n.d.). Loans became more diverse and the number of recipient countries increased as well. This was particularly true from the 1970s when the World Bank started to specifically focus on

poverty and social issues became central in the 1980s. The view was that credit and loans were crucial to helping developing nations create the necessary infrastructure problem that they could not otherwise afford. Of course, the United States had enormous say in the actions of the World Bank, and promoted an interventionist policy that served the interests of the United States and not necessarily of the countries involved (Stiglitz, 2003, Stiglitz 2007).

## **Debt**

Let's consider credit and debt. Credit can be a very useful tool (Servon, 2017), or a terrible trap. It depends on what one uses the credit for; when credit is used for investment, it is a great thing, when it is used to support mere survival, not so much. For example, looking at the economic collapses of Mexico, Colombia, Argentina, and Brazil, it is clear to see that debt and high interest rates contributed to the falls, but when influxes of money existed, economic development followed (Delavega, 2010). How, then is one to assess debt? On one hand, credit is necessary for investment, but on the other hand, debt contributes to economic downfalls. The authors suggest that debt for the purposes of investment and with low interest rates is positive, but debt for the purpose of meeting needs and not investments, and/or high interest rates that interfere with the ability to pay of the debtor are detrimental (Bernasek, 2003). Here too we invoke John Maynard Keynes, who stated in 1936 that government intervention is necessary to address government failures and/or asymmetries. Credit is clearly a good thing, but excessive or usurious debt is not, and yet, lack of access to credit is lack of access to opportunity (Bernasek, 2003). This is what Mohammed Yunus, Nobel Peace Prize in 2006 understood when he developed the program of microloans for poor people in through Grameen Bank. Microloans, that is, credit in small amounts for poor people who would otherwise not have access to credit, are a very important tool in helping people make the investments they need to escape poverty (Bernasek, 2003; The Nobel Prize, 2006). Grameen Bank lends money to poor people who lack collateral under

reasonable conditions (Grameen Bank, 2018). The majority of those helped are poor women in rural villages (Grameen Bank, 2018), a group of people who are generally excluded from the mainstream economy (Bernasek, 2003). The Grameen Bank and other microcredit organizations allow poor people to access the market economy. The market is assumed to be natural and benign, in which perfect competition can occur (Lewis & Widerquist, 2002, Reich, 2016). However, this is not the case in reality as the market is a human invention like any other and is governed by rules that serve to protect the interests of one group over others, that is, the interests of the rich are protected (Piketty, 2014; Reich, 2015). Under such circumstances in which one actor (or group of actors) can set the rules of the game to advance its own interests as it is the case in the modern world (Baessens, 2014; Bianco & Zellner, 2003; Blau, 1986; Gray & Manasse, 2012; Hardstaff, 2003; Piketty, 2014; Reich, 2016; Schwartz, 2003), the market economy is inherently unfair and unethical. One needs to look no further than the bailout that large corporations received after the catastrophic economic crash of 2008 (Luce, 2017; Mack, 2011). Corporations received debt-relief in sums that boggle the mind, yet students who are saddled with enormous debt never find relief and are indebted into poverty even after they have attained an education (Stiglitz, 2013).

When it comes to debt, the asymmetrical relationship between the debtor and the creditor places the debtor squarely under the power of the creditor (Stiglitz, 2013). This is observed in the high interest rates and egregious fees usually charged by credit card companies Board, 2012; GAO, 2009; Papadimitriou, 2015). On the global level, the World Bank and the International Monetary Fund exemplify these abuses by placing conditions on credit that severely limit a debtor country's sovereignty and freedom to impose policies, particularly those that attempt to limit corporate power (Hardstaff, 2003). As a result, this leaves many developing countries at the mercy of corporations and capital interests (Hardstaff, 2003). At the same time, access to credit is fundamental to economic progress and/or

development (Servon, 2017; Stiglitz, 2013). It is a well known axiom in physics that nothing comes from nothing, and wealth is fundamental to the creation of more wealth. Without access to credit, many of the lowest-income people are simply cut off from investment opportunities, even education (Stiglitz, 2013). Because of rules that exclude poor people from the mainstream economy, many of the poorest borrowers have no choice but to place themselves at the mercy of predatory lenders (Karger, 2015, Stiglitz, 2013). The need for investment and credit is as true for countries as it is for families. Crucial investments in scientific research and development are needed and without these, we cannot build the world of the future (Sachs, 2017). The World Bank and the International Monetary Fund do have a role, but under the current rules of the game (Reich, 2016), the risk is placed squarely on the shoulders of the poorest people and nations.

We would like to emphasize that credit for investment is necessary and important. It is important that we do not lose sight of this important fact. Debt can be problematic to be sure, particularly when usurious relationships favor the wealthy and powerful. Nonetheless, debt is leveraging the resources of the future to meet the needs of the present. The best kind of debt, the most productive and positive is debt used to leverage the resources of the future to take advantage of investment opportunities in the present. When debt is seen like that, particularly if the return on the investment is greater than the interest paid, then debt is a good thing. The problem is when debt eats into the resources of the future simply to meet basic needs in the present and does not result in future benefits. All people should be able to leverage the resources of the future to create the investments of the present. Only then development is possible. That is what ethical social work practice should strive for.

### **The Specific Case of Chile**

There is full knowledge that social work emerged in Europe and the United States at the end of the 19th century, with its own characteristics and that are related to the socio-historical context, and

whose efforts were aimed at combating poverty and its consequences (Garcés, 2012). Of course, the social situation of Latin American countries was as, or more, complex than the social situation in Europe and the United States. This was expressed in the misery and poverty of the city, in the exploitation and lack of social rights towards workers, and in the “tyranny” of governments (Vidal, 2016). Thus, in 1925, the first School of Social Service in Chile will be created, recognized as the first specialized social training unit in Latin America (Castañeda & Salamé, 2015) and will be oriented to train women professionals to attend to the needs of the most vulnerable population, in order to prevent diseases and reduce the social problems that derived from the miseries of the population.

In this way, the professional training of social work in Chile has its origins in relation to medicine, where the first school of social service is opened under the National Charity Board of Santiago, responsible for ensuring the functioning of public hospitals (Morales, 2015). The professional training of social work in its early days included a curriculum composed of subjects such as civic instruction, hygiene, feeding, psychology, social economy, statistics, and accounting. (Cordemans, 1927) Professional practice included visits to health institutions to examine existing social problems, available resources, and the assistance and educational actions that could be developed (Castañeda & Salamé, 2015). Theoretical and practical contents were important components in the formation of social workers in Chile.

The trajectory with its continuities and discontinuities, of social work in Chile, has been circumscribed to the sociohistorical transformations of the nation. The economic model in each historical stage has marked the development of the discipline and professional work. The discipline of social work has gone from a welfare and functionalist perspective, to a renewed proposal of conditions of greater protagonism and social commitment (Castañeda & Salamé, 2014). From the sixties, the reconceptualization movement of social work that develops in Latin America reflects the struggles of

the popular movements of the region to advance in the construction of more just and solidary societies (Ruz, 2016). However, these advances in the reconceptualization of social work were abruptly interrupted by the military dictatorship in 1973. The fascist Chilean dictatorship came as a result of multiple factors, including interventionism by the United States government (Forsythe, 1992). In 1970, Salvador Allende, a socialist, was democratically elected president in Chile, and strongly supported “economic and social rights (Forsythe, 1992, 389) that were perceived as a threat to American interests. While it was the Chileans who violently overthrew the Allende regime, they did so in the knowledge that such action “had US support and that a new military government would be quickly rewarded” (Forsythe, 1992, 389). The censorship and brutal political persecution during this period forced the profession to establish a logic of survival in the university and work contexts (Castañeda & Salamé, 2012), and abandon the impetus toward social justice.

Even after the dictatorship ended, the discipline of social work was transformed by the implementation of the neoliberal economic model in Chile, and this in turn had consequences for the academic formation of the social workers, particularly as it related to ideas about welfare (Castañeda & Salamé, 2014). After the return to democracy in the nineties, the central themes in the reflection of social work in this initial period, would be aimed at overcoming poverty, and would involve the contribution of professional social work to economic development and social justice (Castañeda & Salamé, 2010). Even though the profession of social work was convulsed by the sociohistorical context in Chile, the discipline in this region has been able to transform and adapt to the different sociopolitical scenarios that have stressed the disciplinary development of Chilean social work. Social work in Chile has shown to be resilient, and the discipline has been able to develop diverse ideological, ethical, epistemological, theoretical and methodological perspectives that have focused on the current situation (Palma & Torres, 2013), and

this has been seen as an opportunity to promote change, development and the social welfare of the population

The economy has an important role in the common good; the economy can be used to foster the public good or to destroy public trust and the public good (Sachs, 2017). It is very true that “without a budget, there are no rights” (“*sin presupuesto no hay derechos*”) (UNICEF/Peru, 2016). Where is money going? Our values are dictated by our investments; that in which we spend money, that is what we really care about. This is true in our personal lives as well as in our collective existence. If the largest portion of the budget is dedicated to the military, then we, as a nation or as a world, cannot say we value human life. Where our money goes, there is our heart also. Numerous studies have found evidence for welfare stigma in the United States (Besley & Coate, 1992; Contini & Richiardi, 2012; Eichner & Weinreich, 2015), suggesting a rejection of spending in the common interest.

### **The Ethical Responsibility of Social Work**

In this context, financial social work has arisen, but it lacks a comprehensive assessment of the ethics of financial social work from a real world understanding of macroeconomics and microeconomics, including the relationships between wealthy and poor countries and the role of power in such relationships. It has been a little more than a century since social work was established as a profession, first in the United States and England and then spread to Latin American countries at the beginning of the 20th century. In this way, the discipline will emerge in a context marked by deep social problems derived mainly from the process of industrialization that will transform the family economy and will induce the population to migrate to the big cities in search of improving their living conditions. However, the effects produced in the West by this new socioeconomic order, implemented by liberal capitalism (Gómez, 2015) will reveal the very poor conditions of life, health, and work of the working class. The poor will be seen as a direct threat

to the social order (Garcés, 2012). This will lead the different states to take intervention measures, thus creating a system to address the “social question”.

It is in this context that the discipline of social work emerges as a way of responding to social problems derived from the miseries of the population. Thus, at the beginning and through individualized social casework, we will seek to (re) establish the social function of the person (Barahona, 2016) and in this way achieve their welfare and social order. From the 1920s, the discipline will be re-invented in response to the rapid economic and social changes (Tannenbaum & Reish, 2001), expanding its field of action from case management to the development of interventions in communities and social organizations with the purpose of achieving social transformation. Currently social work is defined as a “practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people” (IFSW, 2014). The principles and ethical values of social work are based in respect for equality, the value and dignity of all people, human rights, and social justice (IFSW, 2014; IFSW, 2018). Social Work is committed to social welfare (IFSW, 2018; NASW, 2018), at least on paper, and the ethics of the profession require a commitment to address the needs of the most deprived, however, it is also recognized that the profession has limited its ability to address structural changes to improve social conditions (Hopps & Lowe, 2013). In this way, the evolution of the discipline has failed to meet the challenges of the changing economic context of the 21<sup>st</sup> century. The traditional social work competencies are inadequate to meet the new competencies required by the emerging social order and the economic, political, and social transformations of the last decades (Castañeda & Salamé, 2013)

In general terms, the approach that has been given to the professional training of social work in the financial field, seems to allude mainly to the development of skills of professionals to work with individuals in relation to their financial behavior and seek that they can have a greater ability to control

their finances and thus avoid high indebtedness. Although this is an approximation to the knowledge about the financial formation of social workers in the United States, it is worth asking: to what extent do social workers understand the causes that cause poverty? How much knowledge do you have regarding the macro and microeconomics? What is the participation of the social worker in the formulation of public policies in the financial field? How committed are they to defending the rights of the most vulnerable population?

The professional training of the social worker should point to a transformation around the new requirements demanded by the era of globalization marked by political economy, so the specialized knowledge in economic matters should enable social workers to become effective change agents in the economic sphere (Castañeda & Salamé, 2013). It is necessary to expand the knowledge and development of the professional competencies of the social workers to respond to the new requirements of social action, addressing the inequities of the political economy. This raises the need to assess whether the current professional skills are in accordance with academic training and are responding to the economic and social needs of the population. The problems that we must confront as social workers, problems of mental health, substance abuse, violence, disease, and others, are the result of deepening economic inequalities and lack of opportunities (Luce, 2017). We have a responsibility to respond to the economic realities of the present, but if social workers do not understand economics, and if financial social work is a glorified version of “therapy”, then we are not going to solve these problems. These are enormous problems, much larger than any of us; however, the basic problem is that when social workers focus on “financial social work” is one that is almost exclusively focused on the micro economy and tends to blame the poor. The interventions are not the macro interventions we need for sustainable and equitable development. We aim to teach the poor how to manage the money they do not have, and we avert our eyes from the major macro-economic issues.



Economic well-being includes health, freedom, and the ability to fully exercise one's voice and control one's destiny (Perkins, Radelet, & Lindauer, 2006; Sachs, 2008; Todaro, 2000), and social work has a very important role to play in this well-being. Unfortunately, we social worker often intervene at the micro level, forgetting the importance of the macro economy. Worse, we address bits and pieces here and there, in fragmented and uncoordinated ways that leave some people unserved (Klitgaard, 2010; Piccicotto, 2007) and essentially leave the system unchanged. The biggest problem is that the interventions at the micro level do not address the concrete needs and realities of the population, but rather, these interventions are emotional in nature. According to the Financial Therapy Association (2018), "financial therapy . . . helps people feel, think and behave differently with money" as if the causes of financial stress weren't structural but simply behavioral. The journal stresses "attitudes and behaviors" This plays into the American ethos that blames people for "being unable to manage situations beyond their control" (Servon, 2017, p. 69), and is another way in which the poor are blamed for their poverty. People who are responsible but who have low incomes and opportunities often find themselves hit with multiple whammys of fees and high interest, creating a trap from which it is very difficult to emerge (Servon, 2017). Under these circumstances, financial therapy is just another way in which social worker becomes an agent of the oppressive system and hurts the very people it is supposed to help.

In contrast to the financial therapy offered in the United States, Chile has developed more comprehensive policies that address macroeconomics and microeconomics in more direct and practical ways. The poor need money, not platitudes. As a result, social work in Chile has expanded its field of action is in microeconomics, through participation in the labor field of various public and private initiatives associated with entrepreneurship and microfinance. Public policies have been implemented since the 1990s, such as the Solidarity and Social Investment Fund

(FOSIS), an entity founded to help overcome the country's high levels of poverty and support the development of microcredit in Chile (Coloma, 2009). From this moment, other funding programs will emerge in Chile for low-income sectors such as the Agricultural Development Institute (INDAP), the Technical Cooperation Service (SERCOTEC) and, in 2002, the Esperanza Fund (FE) social development that, through microfinance services, supports entrepreneurs in vulnerable sectors, with the objective of developing their businesses and, in this way, improving their living conditions, that of their families and communities (Fondo Esperanza, 2018). We have succinctly mentioned the programs that currently develop micro financing policies for the lower income sectors, which can not directly access financing in formal banking. In this way, what we wanted to highlight is the role played by the social worker in this matter, in most cases integrating multidisciplinary teams, their work being essential for achieving the objectives. Regarding competences, it should be pointed out that, in Chile, the theoretical and practical training of the social worker is based mainly on knowledge of the social sciences and humanities, where the economy in its different aspects is a fundamental part in professional training (Castañeda & Salamé, 2013). Thus the competences in the economic sphere, reveal the strategic nature of the profession, capable of generating flexible lines of action, dynamically adapted to the social reality (Castañeda & Salamé, 2013).

### **Ethical Framework for Financial Social Work Practice**

The relationship between economics and social work, in terms of role and professional skills are fundamental, being consistent with the values and ethical principles of social work. The profession is committed to defending the most dispossessed, who among their strategies of survival, seek to solve the daily reproduction of their existence (Dellacroce, Cuevas, & Rivas, 2015), that is, through their own efforts and supported in some cases by policies and programs of entrepreneurship and economy,

families and/or Communities develop diverse strategies to achieve their subsistence. In economic matters, social workers should be academically trained and professionally prepared to perform related functions in the economic arena on behalf of the most vulnerable population, professional skills that have been less developed in the United States than in other countries, for instance, Chile. Social work in the United States has much to learn from the rest of the world. Financial social work practice that is consistent with the social work values of inclusiveness, concern for the marginalized, and the promotion of rights for all people that is not only well informed and knowledgeable about macroeconomics as well as microeconomics, and the history and role of financial, social, and political institutions from the local to the global level, but specifically practice that seeks to apply this knowledge in a manner consistent with our values. Thus, ethical financial social work practice is practice that recognizes the vulnerability of the poor and marginalized and understands how credit and debt can potentially both help people out of poverty and trap them in a financial morass from which the poor can never extricate themselves.

Ethical financial social work practice is political; social workers understand and advocate for policies that protect the most vulnerable in society from predatory practices and lack of access to mainstream financial markets and institutions. Ethical financial social work practice is practice grounded in the knowledge that economic relationships are asymmetrical and unequal, and that the poor and vulnerable always have the most to lose with the fewest opportunities to win. As a result, ethical financial social work practice seeks to redress the inequalities inherent in global capitalism. Ethical financial social work practice understands the disparities inherent in the Washington Consensus and the exploitive nature of neoliberal policies, and works diligently to address these in concrete manners, intervening in the larger system. Finally, ethical financial social workers understand that poverty is the result of structural forces and refuse to blame the poor for their poverty, nor do

they become a tool of the system by convincing the poor that it is their personal failures that must be addressed, rather than an unequitable economy system that favors the rich and excludes the poor.

## References

- Baessens, B. (2014). *Analytics in a big data world: The essential guide to data science and its applications*. New York, NY: Wiley.
- Barahona, M. J. (2016). *El trabajo social: una disciplina y profesión a la luz de la historia* [Social work: A discipline and profession in history]. *Lección Inaugural Curso Académico 2016/2017* (págs. 1–38). Madrid, ES: Universidad Complutense de Madrid.
- Bernasek, (2003). Banking on social change: Grameen Bank lending to women. *International Journal of Politics, Culture and Society*, 16, 369–385.
- Besley, T., & Coate, S. (1992). Understanding welfare stigma: Taxpayer resentment and statistical discrimination. *Journal of Public Economics*, 48, 165–183.
- Bianco, A., & Zellner, W. (2003, Oct. 5). *Is Wal-Mart too powerful?* Retrieved from Bloomberg Business at <http://www.bloomberg.com/bw/stories/2003-10-05/is-wal-mart-too-powerful>
- Blau, P. M. (1986). *Exchange and power in social life*. Livingston, NJ: Transaction Publishers.
- Board of Governors of the Federal Reserve System. (2012, June). *Report to the Congress on the profitability of credit card operations of depository institutions*. Retrieved from <http://www.federalreserve.gov/publications/other-reports/files/ccprofit2012.pdf>
- Cabrera, P., & Gallardo, G. (2013). Trabajo social y economía. *Cuadernos de Trabajo Social*, 26(1), 13–17.
- Castañeda, P., & Salamé, A. (2010). Perspectiva histórica de la formación en trabajo social en Chile. *Revista Electrónica de Trabajo Social*, 8, 68–92.
- Castañeda, P., & Salamé, A. (2012). *Profesionalidad del Trabajo Social Chileno. Tradición y Transformación*. Temuco, CL: Ediciones Universidad de La Frontera.

- Castañeda, P., & Salamé, A. (2013). Transformaciones económicas y tecnológicas en Chile y las nuevas competencias profesionales para el trabajo social chileno: Período 1973–2010. *Revista Cuadernos de Trabajo Social*, *10*, 29–37.
- Castañeda, P., & Salamé, A. (2014). Trabajo social chileno y dictadura military: Memoria profesional predictatorial: Período 1960–1973: Agentes de cambio social y trauma profesional. *Rumbos* *9*, 8–25.
- Castañeda, P., & Salamé, A. (2015). A 90 años de la creación de la primera Escuela de trabajo social en Chile y Latinoamérica. *Rev Med Chile*, *143*, 403–404.
- Coloma, P. (2009). Instrumentos públicos para desarrollo de las microfinanzas. En C.P. Chile, *Las Microfinanzas Como Instrumento para la Superación de la Pobreza* (pág. 137). Santiago, CL: Dirección de Asuntos Públicos Pontificia Universidad Católica de Chile.
- Conitini, D., & Richiardi, M.G. (2012). Reconsidering the effect of welfare stigma on unemployment. *Journal of Economic Behavior & Organization*, *84*, 229–244.
- Cordemans, L. (1927). *Servicio Social*. Santiago, Chile: Escuela de Servicio Social de la Junta de Beneficiencia de Santiago.
- Delavega, E. (2010). *A global study of education-targeted cash transfer policies: Poverty reduction and development strategies*. (Unpublished doctoral dissertation). University of Houston, Houston, TX.
- Dellacroce, M. E., Cuevas, N. B., & Rivas, D. H. (2015). *Economía social vista desde el trabajo social*. Paper presented at the Jornadas de Investigadores de la Secretaría de Investigación y Postgrado. FHyCS-UNaM. Tucumán, Chile.
- Eichner, T., & Weinreich, D. (2015). Welfare stigma and risk taking in the welfare state. *Social Choice & Welfare*, *44*, 319–348.
- Financial Therapy Association (2018). Financial therapy. Retrieved from <https://www.financialtherapyassociation.org/>
- Fondo Esperanza. (2018, September 3). Sobre Fondo Esperanza. Retrieved from <https://www.fondoesperanza.cl/institucion/quienes-somos>
- Forsythe, D.P. (1992). Democracy, war, and covert action. *Journal of Peace Research*, *29*, 385–395.
- Garcés Carranza, C. (2012). Chronological history of social work in the United States . En C. Garcés Carranza, *Social Work Hospital Setting: Interventions* (pp. 1–24). Bloomington, IN: Trafford.
- Gómez, S. (2015). La cuestión social y su articulación con el trabajo social. *Tabula Rasa*, *22*, 285–305.
- Government Accountability Office (2009, Nov.). *Credit cards: Rising interchange fees have increased costs for merchants, but options for reducing fees pose challenges*. GAO-10-45.
- Grameen Bank. (2018). About. Retrieved from <http://www.grameen-info.org/about-us/>
- Gray, A., & Manasse, H. R. (2012). Shortages of medicines: A complex global challenge. *Bulletin of the World Health Organization*, *90*, 158–158A. Retrieved from <http://www.who.int/bulletin/volumes/90/3/11-101303/en/>
- Hardstaff, P. (2003). *Treacherous conditions: How IMF and World Bank policies tied to debt relief are undermining development*. World Development Movement. Retrieved from <https://www.globaljustice.org.uk/sites/default/files/files/resources/treacherousconditions07052003.pdf>
- Higgins, A., & Sanger, D.E. (2015, March 17). 3 European powers say they will join China-led bank. *The New York Times*. Retrieved from <https://www.nytimes.com/2015/03/18/business/france-germany-and-italy-join-asian-infrastructure-investment-bank.html?hp&action=click&pgtype=Homepage&module=second-column-region&region=top-news&WT.nav=top-news>
- Hopps, J., & Lowe, T. (2013). The social work profession: Overview. *Encyclopedia of Social Work*, 1–26.
- International Federation of Social Workers [IFSW]. (2018, September 3). *Global definition of social work*. Retrieved from <https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/>

- International Federation of Social Workers [IFSW]. (2018). Global social work statement of ethical principles. Retrieved from <https://www.ifsw.org/global-social-work-statement-of-ethical-principles/>
- Karger, H. K. (2005). *Shortchanged: Life and debt in the fringe economy*. Oakland, CA: Barrett-Koehler Publishers.
- Keynes, J. M. (1936). *The general theory of employment, interest, and money*. London, UK: Macmillan.
- Lewis, M., & Widerquist, K. (2002). *Economics for social workers: The application of economic Theory to social policy and the human services*. New York, NY: Columbia University Press.
- Luce, E. (2017). *The retreat of western liberalism*. London, UK: ABACUS.
- Mack, C. (2011). Risk externalization is moral hazard. Retrieved from <http://www.financialsense.com/contributors/chris-mack/risk-externalization-is-moral-hazard>
- Morales, P. (2015). Trabajo social en Chile:1925–2015: Noventa años de historia e impronta en latinoamérica. *Revista Internacional de Trabajo Social y Bienestar*, 4, 21–28.
- National Association of Social Workers [NASW]. (2018). The code of ethics. Retrieved from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>
- Palma, D., & Torres, M. (2013). Escenarios sociopolíticos y sus influencias en el trabajo social Chileno. *Rumbos TS*, 8, 100–117.
- Papadimitriou, O. (2015). *National credit card delinquency and charge-off rates*. Retrieved from <http://www.cardhub.com/edu/credit-card-charge-off-delinquency-statistics/>
- Piketty, T. (2014). *Capital in the twenty-first century*. Cambridge, MA: Harvard University Press.
- Reich, R.B. (2016). *Saving capitalism: For the many, not the few*. New York, NY: Vintage Books.
- Ruz, O. (2016). Reorientación y reconceptualización del trabajo social en Chile. En P. Vidal, *Trabajo Social en Chile. Un siglo de Trayectoria* (págs. 95–118). Santiago, CL: Ril Editores.
- Sachs, J. (2017). *Building the new American economy: Smart, fair, and sustainable*. New York, NY: Columbia University Press.
- Schwartz, B. (2003). *The paradox of choice: Why more is less*. New York, NY: HarperCollins.
- Servon, L. (2017). *The unbanking of America*. New York, NY: Houghton Mifflin Harcourt.
- Smith, A. (1937). *An inquiry into the nature and causes of the wealth of nations*. New York, NY: Modern Library.
- Specht, H., & Courtney, M. (1994). *Unfaithful angels: How social work has abandoned its mission*. New York, NY: The Free Press.
- Stiglitz, J. E. (2003). *Globalization and its discontents*. New York, NY: W. W. Norton & Company
- Stiglitz, J. E. (2007). *Making globalization work*. New York, NY: W. W. Norton & Company
- Stiglitz, J.E. (2013). *The price of inequality*. New York, NY: W.W. Norton.
- Stuart, P. (2013). Social workers and financial capability in the profession's first half century. In J. M. Birkenmaier, M. Sherraden, & J. Curley (Eds.), *Financial capability and asset development: Research, education, policy, and practice* (pp. 41–61). New York, NY: Oxford University Press.
- Stuber, J., & Schlesinger, M. (2006). Sources of stigma for means-tested government programs. *Social Science & Medicine*, 63, 933–945.
- Tannenbaum, N., & Reish, M. (2001). *From charitable volunteers to architects of social welfare: A brief history of social work*. Detroit, MI: University of Michigan.
- The Nobel Prize. (2006). The Nobel Peace Prize for 2006. Retrieved from <https://www.nobelprize.org/prizes/peace/2006/press-release/>
- The World Bank. (n.d.). History. Retrieved from <http://www.worldbank.org/en/about/archives/history>
- UNICEF/Peru. (2016, July 14). *Pronunciamento del colectivo interinstitucional por los derechos de la niñez y adolescencia*. Retrieved from [https://www.unicef.org/peru/spanish/PRONUNCIAMIENTO\\_SIN\\_PRESUPUESTO\\_NO\\_HAY\\_DERECHOS.pdf](https://www.unicef.org/peru/spanish/PRONUNCIAMIENTO_SIN_PRESUPUESTO_NO_HAY_DERECHOS.pdf)

Vidal Molina, P. (2016). Introducción. En P. Vidal Molina, *Trabajo Social en Chile. Un Siglo de Trayectoria* (pp. 11–26). Santiago, CL: RIL Editores.

Wolfsohn, R., & Michaeli, D. (2014). Financial Social Work. *Encyclopedia of Social Work*, 1–16.

## Book Review

Barsky, A. E. (2019). *Ethics and values in social work: An integrated approach for a comprehensive curriculum (2nd ed.)*. New York: Oxford University Press.

Reviewed by Lisa Reece, Ph.D.  
Brescia University

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

**FULL DISCLOSURE:** The author of the book being reviewed, Allan Barsky, is a member of the JSWVE editorial board.

Dr. Allan Barsky's expertise in social work, law, ethics and mediation is once again well demonstrated in this second edition of *Ethics and Values in Social Work: An Integrated Approach for a Comprehensive Curriculum*. For those unfamiliar with his work, among Dr. Barsky's credentials are his Ph.D. and MSW in social work and his Juris Doctorate. Currently a full professor at Florida Atlantic University, he has 30 years' teaching experience, having also taught at the University of Toronto, Ryerson University, the University of Calgary, and as a visiting professor at Bar Ilan University in Israel. His teaching experience includes courses on ethics as well as social work and the law. He has held various leadership positions within the National Association of Social Workers including serving as chair of NASW's National Ethics Committee. In 2015 he received NASW's "Excellence in Ethics Award." From 2015–2017 he served on the National Task Force on Social Work and Technology. He also chaired the NASW Code of Ethics Revision Task Force, leading to the 2018 revisions of the Code. In this edition he brings the later experience to bear, providing new material related to the revised standards on the use of technology in social work practice. Dr. Barsky has also authored several other texts, among them *Conflict Resolution for the Helping Professions* (2017), *Interprofessional Practice with Diverse Populations* (2010, co-edited) and *Clinicians in Court* (2013, 2nd ed.)

This book offers a comprehensive study of ethical issues related to social work practice at all levels—individual, family, group, organization, community, and social policy. Reflecting new and emerging ethical issues (e.g., duties to protect in relation to clients who may be affiliated with terrorist organizations, videoconferencing, electronic records, apps, and more) this second edition has been updated to connect both old and new concerns with new laws and ethical practice standards, including the 2018 revisions of the NASW Code of Ethics. Two new chapters on international social work and private clinical social work practice have also been added. This edition also further addresses the relational aspect of managing ethical issues as Dr. Barsky has expanded the content on narrative ethics, virtue ethics, and ethics of care.

Like the first edition published in 2010, the text is divided into two parts with Part I focusing on content for BSW and MSW foundation courses and Part II focusing on content for advanced or concentration courses in MSW programs. Barsky's recommendation that the book be used across the social work curriculum is practical and seems highly appropriate. Part I will help students learn to identify relevant values, morals and ethics to guide their interactions and decision-making for all levels of practice. Part II will provide students with a "Framework for Managing Ethical Issues" that is larger than most ethical decision-making models and

offers a range of tools and strategies for identifying, analyzing, and responding to ethical problems, dilemmas, and breaches. Part II covers ethics in supervision, administration, psychopathology and mental health, child welfare, elders, international social work and private practice.

Chapters are well-organized beginning with a clear statement of learning objectives followed by topical content interspersed with new practice vignettes. Each chapter ends with a summary of key points and updated discussion questions and exercises. The revised ethical standards of the NASW Code of Ethics are well-examined, and the author supports his points with additional NASW Practice Standards and Guidelines, as well as documents from other codes and professions.

The new chapter on international social work focuses on workers' ethical responsibilities to develop competence in cultural relativism, cultural self-awareness, global consciousness, cultural humility, intercultural caring, and enculturation. The importance of having a clear understanding of both legal and ethical obligations as defined in the country of practice is emphasized. A section on comparative ethics alerts the reader to significant differences that can exist in the codes of ethics in different countries. The International Federation of Social Workers' Statement of Ethical Principles is introduced, and examples of how codes can differ in terms of their scope, detail, enforceability and specific standards are delineated. The chapter ends with a discussion on ethical challenges related to promoting social justice.

The new chapter on private clinical social work explores the benefits of private practice as well as potential ethical challenges. Barsky encourages workers in private practice to follow social work's mission by devoting at least some of their practice to social justice, helping vulnerable populations, engaging in community organization or policy work, and identifying themselves as social workers. Ethical obligations regarding competence, confidentiality, accessibility, continuity of services, safety, informed

consent, and boundaries are addressed along with appropriate marketing strategies and careful use of technology. Social workers are encouraged to develop appropriate support systems for supervision and/or consultation and backup. Barsky introduces the professional will that stipulates a plan for the possibility of sudden incapacity or death of the worker.

An appendix with a Worksheet for Managing Ethical Issues has been added to this edition. As the first edition, a helpful glossary, extensive bibliography, and index are included. Lengthier than most similar books, the 505 pages of text are well worth the time and effort needed to read and reflect upon the content. Of benefit to professors is an Instructor's Manual available from the publisher providing suggestions and further teaching resources. A modest retail price (\$65 per the publisher's website) contributes to the book's practicality as well.

An authoritative text, this book will help students develop the knowledge, self-awareness, and critical thinking skills needed to address complex ethical obligations and issues. The examination of new and emerging ethical challenges will test the problem-solving skills of seasoned social workers. I have no major criticism of the book, having greatly appreciated the author's easy-to-read writing style and comprehensive treatment of values and ethics. While the primary use of this text is intended for students, I would also suggest its value for individual and study group use among established social workers.

# Book Review

Goldkind, L., Wolf, L., & Freddolino, P. P. (2019). *Digital social work: Tools for practice with individuals, organizations and communities*. New York, NY: Oxford University Press.

Reviewed by Ottis Murray, Ed.D.  
University of North Carolina at Pembroke

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Simplistically, technology's evolution and use represent a contentious, ongoing and generally dichotomous lineage; generally, it is either praise for the tremendous potential and promise or the distinction which proposes the horrific threat of its adoption and/or use (e.g. technophobia).

The debate continues today and impacts our social world (e.g., family, education, peers, government, organization, agencies, etc.), and this book specifically seeks to provide potential "evidence" regarding some of the promise that can be directly associated with social work practice.

In a series of fourteen essays, organized in three areas of attention (i.e., individual, organizations and communities), one is exposed to a variety of clear, practical and innovative approaches to social work challenges that may clearly be enhanced through the use of technology. While it is vibrant that these essays provide an optimistic assessment of the potential of the technology, additional critical evidence is needed to seriously assist in comprehensive assessment, adoption and advocacy.

These essays provide rich examples of promise, but they face tremendous challenges for a variety of reasons (e.g., comfort with technology, personal access, personal competence, ethical considerations, considerations regarding privacy, potential reduction of lack of face-to-face interaction). However, these challenges appear to be afterthoughts absent more inclusive examination and consideration. One completely understands this view when examples

of current practice appears to have promise or significantly addressed the problem(s). While one cannot help but to be euthanistic, concrete solutions require more evidence; the promise of this book is that it will perhaps inspire further inquiry.

This book provides a general overview of the potentiality of technology for social work practice which ranges from the virtual world, digital music, online support, digital storytelling, big data, GIS, twitter, mobile services, etc.

This text is definitely a "must read" for potential social workers; the future of and threat to the profession has, continues and will impact our potential to provide quality, personal and meaningful interactions and service. Like it or not, technology demands our ongoing constant attention, research and investigation; humanizing technology is critical to carefully capture the vision, mission, purpose and promise of social work practice.

***"Unless someone like you care a whole awful lot, nothing is going to get better. It's not."***

**—Dr. Seuss**

## Reference

Dr. Seuss. (1971). *The Lorax*. New York, NY: Random House. Retrieved 07.08.2019. [https://www.chrisrossarthur.com/uploads/3/8/5/9/38596187/dr.\\_seuss\\_the\\_loraxbokos-z1.pdf](https://www.chrisrossarthur.com/uploads/3/8/5/9/38596187/dr._seuss_the_loraxbokos-z1.pdf)



# Book Review

Øland, T. (2019). *Welfare work with immigrants and refugees in a social democratic welfare state*. New York, NY: Routledge.

Reviewed by Peter A. Kindle, Ph.D, CPA, LMSW  
The University of South Dakota

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Øland, an associate professor in educational research at the University of Copenhagen, has provided a postmodern, post-Enlightenment, qualitative study of welfare work in Denmark. In this context, welfare work is not a narrow field such as social work or charity work, but a very broad term that includes any and all professionals and volunteers who work with immigrants and refugees in Denmark, from medical professions to educators to police and even street volunteers (N = 48). The explicit aim of welfare work is the socialization and inclusion of newcomers in Danish society, but Øland argues that “welfare work in the margin of our societies [is] central to the reproduction of the state, since the state and the margin are continuously shaped in opposition to each other” (p. 3). This means that welfare work is part of the processes of Othering. She is not questioning the intentions of welfare workers, but how the desire to do good may reproduce marginality, keeping the immigrant/refugee ever on the outside, uncompleted, and unfulfilled. They are “projects in need of continuous amendment” (p. 10).

The twelve chapters form three sections. In the first section, Øland describes her understanding of a social democratic welfare state, her methodology (snowball, purposive sampling and interviews), and a historical sketch of the rise of immigration to Denmark. The second section contains four chapters in which Øland processes her sociological interviews. Each of these chapters approximates a reflective essay, providing considerable insight into the author’s understanding of the raw data collected in the sociological interviews. For clarity, the reader

is directed to her eighth chapter, a useful summary of her too brief conclusions in Chapters Four through Seven. In the last section, the thematic analysis continues as the seven topics reflected on in the second section are subsumed into three broader themes for additional consideration.

To Øland, the Danish welfare state is democratic, rational, universal, and perfectible. It assumes the superiority of the modern and post-racial Danish society and seeks to integrate immigrants and refugees through welfare work informed by technical analyses and evidence. In contrast, her postmodern approach to the interviews intentionally sought out the irrational, uncertain, and absurd underlying welfare work. She wanted to find the conflict and contradictions that are described as symbolic resources in the second section. These symbolic resources “presuppose inclusion of the desirable as well as exclusion of the repulsive or impure” (p. 16). By establishing boundaries, symbolic resources create value and legitimize welfare work. Presented in four pairings, the symbolic resources are a citizen’s right to social welfare presupposing conformity and individual human rights asserting autonomy; cultural modernization or normative integration in contrast to affirmation of immigrant group identity; externally required human development in contrast with human development motivated by economic stimulus; and national objectives in contrast with local community intentions. This section concludes with a summary chapter providing a useful overview to her symbolic resources.

The last section continues Øland's thematic development by reconsidering her symbolic resources in three societal forms. "Social forms are understood as patterns and structures abstracted from interactions and relations that make and remake the social myths of society and make and remake power relations in society" (p. 149). The three she identifies are benevolence, supremacy, and critique.

The problem with benevolence is that a compassionate response to one who is needy devalues the one who is needy and precludes her social right to welfare if change is obstructed or the neediness uncorrectable. Øland tries to explain how this is rectified by the needy one becoming subsumed into a needy class – the worthy immigrant and refugee. This places immigrants at a paternalistic distance and creates dependence. This approach maintains the status quo of racialized differentiation and society's power structures. "[T] ones who cannot give, but only receive, and who are not expected to give in the future are assigned the lowest status" (p 162).

As related to welfare work, supremacy is the attempt to act on or influence the immigrant toward a better way of life, presumably Danish. Welfare workers tend to view Denmark as modern and all other cultures as backward. This is likened to colonization. "Ideals such as freedom and equality were only applied to the colonized group internally, but not to the relation between the colonizers and the colonized" (p. 88). The Other is on the threshold of modernization, but held in transition. White supremacy becomes legitimated as objectivity in its privileged relationship to the immigrant who is also presumed to be inferior. The welfare worker exercises authority over the immigrant as an agent of state or institution, but supremacy is maintained as well in less overt ways. The presumption that whites speak for humanity or the depiction of immigrants as animalistic or infantile carry the same flaws. To Øland's dismay, there is a racial quality to this othering.

Most welfare worker interviews contained a critique of society, the welfare system, or professional groups/competencies. She attributes this to Foucault's suggestion that positivistic science and the development of a rationalized state and economy gave rise to refined techniques of state-like powers that were obstacles in meeting the needs of immigrants and refugees. Critiques oppose what these powers are creating or have created. Øland sees this playing out in two ways: a modern critique that uses the technology (science, EBP) to maximize welfare, and a postmodern critique that questions the foundation for the standards governing maximization and optimization. The latter is often done by welfare workers from within, challenging the official guidelines or refusing to devalue or Other the immigrants.

For those unfamiliar with postmodern thought and writing, this book is heavy lifting. Understanding what Øland is trying to communicate is difficult and probably requires more than one reading. What may be even more problematic for the American reader is that one must assume a Danish mindset to understand Øland's near shock at discovering racial undertones in welfare work in Denmark. As the single European nation to refuse to participate in Hitler's pogrom of the Jews and other marginalized peoples during World War II, the Danish self-image appears to reject racial explanations of difference. What Øland found was quite the opposite. The presumption of Danish superiority, immigrant and refugee inferiority, and the marginalizing effects associated with welfare work could only be described by her as racializing. The moral is not difficult to understand: National values and professional values alone are insufficient to accept difference and diversity. Those receiving immigrants and refugees have to be capable of embracing the change that difference and diversity will bring to their society and nation. Only in this way can the ideals of a social democratic welfare state be realized.

## Book Review

Pyles, L. (2018). *Healing justice: Holistic self-care for change makers*. New York, NY: Oxford University Press.

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

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

This text straddles an interesting line between self-care texts for practitioners and a call to arms for the social justice minded who are also interested in individual self-care. The theme of healing justice is the driving force throughout. Practitioners do not live and practice in a vacuum – they are both a part of and transformers of the societies and communities they serve. Healing and making changes outside of ourselves cannot happen fully unless we are also working to heal and to make necessary changes within ourselves, is the driving message.

The 302-page text is broken down into three sections, each with multiple chapters. Each chapter in each section begins with a case study, a thorough review of the literature and comprehensive introduction to the concept and full explorations of the topic under review. The author “...attend[s] other ways of knowing, such as practice wisdom and the insights from contemplative mind-body practices, particularly modern Buddhism, modern postural yoga, and contemporary Ayurveda” (p. xx). Each chapter ends with a “Putting it Into Practice” section

that includes “Inquiry,” a chance for reflection and contemplation, a “Self-Care Practice Skill,” and an “Experiment for the Day.”

This is a wonderful combination of old and new, lost and found lessons about how we can only be as good to those communities we serve as we are to ourselves. Ranging from teachings of the Buddha to modern neuroscience, from meditation to movement, this is a wonderful new step in helping to understand that taking the time and energy to know and care for ourselves is vitally important if we are to care for others. Emphasized throughout is that we are not silos, but citizens. The notions to some may be new worldly, but there is no “woo woo” metaphysical treatise here – there is a compelling and very well researched collection of approaches to appreciate and see the different aspects of our lives, and practices and techniques to help ourselves so that we can help others.

## Book Review

Sangiovanni, A. (2017). *Humanity without dignity: Moral equality, respect, and human rights*. Cambridge, MA: Harvard University Press.

Reviewed by Peter A. Kindle, Ph.D, CPA, LMSW  
The University of South Dakota, Vermillion, South Dakota

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Sangiovanni, a philosopher at King's College, London, when this volume was published, does not address those opposed to moral equality. Instead, he addresses those, like social work professionals, who support it. He sets out to argue that arguments for moral equality that are rooted in the idea of human dignity are not logically consistent. His alternative argues that moral equality rests more firmly on a rejection of forms of inferiority that violate our common humanity and sociability. In this manner, he provides a stronger base for the assertion of human rights, one that is completely free of any taint of merit-based criticism. Organized into two sections of three chapters each, Sangiovanni addresses the foundational philosophical issues in the first section that are probably most relevant to social work professionals desiring a deeper insight into our values related to human dignity and the importance of human relationships. The second section reflects on how Sangiovanni's philosophy would influence our understanding of international human rights, the international legal human rights system, and our understanding of basic rights, fundamental rights, and hierarchies of human rights.

The arguments against basing moral equality on human dignity are uprooted by Sangiovanni. If dignity is the base of moral equality, then our explanation of what dignity means must justify the claim that all persons warrant equal treatment, regardless of capacities or conduct, and that equal treatment is reasonable or rationally defensible. The argument for human dignity that social workers are most likely to relate to is the Christian argument that everyone is created in the image of God, but

Sangiovanni also addresses the Aristocratic and Kantian arguments as well.

He describes the contemporary Catholic understanding of human dignity, "man's rational and volitional capacities are manifestations of the special bond that connects him to God, with whom he shares an image and likeness shared by no other creature" (p. 28). This argument cannot explain moral equality without appeal to a soul that is an organizing principle prior to bodily form. To Sangiovanni, this argument is persuasive only to those holding this belief system because non-instrumental, unconditional, and absolute value and dignity cannot be justified from bodily form alone. Accordingly, this argument fails the reasonableness test in his view.

The Aristocratic (e.g., Aristotle, Cicero) and Kantian perspectives, respectively, argue that human dignity is rooted in greatness of soul understood as honor and decorum or in our capacity for rational choice. Generalization of these characteristics to all humanity is a weak argument for human dignity in that these characteristics are not universally and equitably distributed. Accordingly, they fail the equal treatment test.

Dignity-first arguments in which the dignity of the person precedes respect for the person dominates moral equality arguments historically, but Sangiovanni disagrees. The basis of respect for the person is better rooted in an understanding of what it means to treat someone as a moral unequal and as inferior – and why such treatment is wrong.

The consequences of treating someone as a moral equal are not based on inherent value and dignity, but on social relations of mutual concern that develops from that treatment. Social relations are valuable in their own right as they are essential to the development of a sense of self. Sense of self requires (a) partial control over what is inner and what is outer, (b) a sustaining social environment or place where one fits, and (c) partial control over how our sense of self presents through our body.

Treating another as a moral unequal or inferior takes five forms: (a) dehumanizing (treating as an animal), (b) infantilizing (treating as a child), (c) objectifying (lacking subjectivity or interiority), (d) instrumentalizing (treating like a tool), and (e) stigmatizing (treating as if polluted or spoiled). None are necessarily wrong as each form has examples of when they are appropriate; however, “It strikes me that the most salient feature shared by all instances of treating as an inferior in the relevant sense is the cruelty” (p. 75). “Social cruelty involves the unauthorized, harmful, and wrongful use of another’s vulnerability to attack or obliterate their capacity to develop and maintain an integral sense of self” (p. 76). Treating another as inferior is not wrong due to equal worth or dignity, or due to inherent flaws in hierarchies of status, but it is wrong due to the wrongness of social cruelty and the related right against inferiorizing treatment.

Accordingly, each person is worthy of respect, not that owed by virtue of achievements, character, or office, but in a way that reflects commitment to moral equality. This form of respect allows the other space to maintain a sense of self, a degree of opacity from full exposure of the inner self by treating the external self with respect. It is cruel to both denigrate the inner based on external station and to reinforce the self-denunciation of the fractured self. “Respect . . . is a response to our vulnerability rather than our worth as sociable beings” (p. 104). Sangiovanni is essentially arguing that it is not worth or value that justifies moral equality, but our vulnerability and the fragility of our sense of self. He terms this the Negative Argument.

Therefore, the wrongness in discrimination is not in the downstream social consequences or in the animus of the perpetrator, but in the social meaning of the act which harms not only the group but also the particular individuals effected. The explanation for the wrongfulness of stigmatization as it relates to racial discrimination does not rely on the harmful actions, but on the social-relational aspect. “Objectification is wrong when and because it uses our vulnerability to attack our capacity to develop and maintain an integral sense of self” (p. 158).

When applied to international human rights, Sangiovanni argues for the contextualization of the human rights discourse. The right to education in Somalia is different than the right to education in Baltimore, and should be. What is common between the two is human vulnerability and the intrinsic need for the development of an integral sense of self through social relationships. International legal human rights, he argues, should be grounded in a duty of reciprocal protection. In this way, he rejects the indivisibility of human rights as enunciated in United Nations documents in favor of a potential hierarchy of human rights based on empirical grounds. The empirical necessity of a right is determined by noting that its absence suggests that it is likely that other rights will be violated, or that violations of any basic right will impede individual opportunity to enjoy other rights. The most predominant way to diminish opportunities to enjoy rights is through fear. “Fear of deprivation . . . makes it very difficult to focus on anything other than the fear” (p. 241).

Social work values embrace human dignity and the importance of human relationships, but may do so within an unstated framework that requires a Christian worldview. Many will not be dissuaded from their value commitments due to this perceived flaw, but I take comfort in the atheocentric arguments of Sangiovanni who establishes moral equality in something that all humanity shares – our mutual vulnerability and need for others.

# Book Review

Shapira, O. (2018). *A theory of mediators' ethics: Foundation, rationale, and application*. Cambridge, UK: Cambridge University Press.

Reviewed by Peggy Proudfoot Harman, Ph.D., MSW  
Marshall University Department of Social Work

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Shapira provides an extensive overview of issues regarding the under-regulation of mediators performing in a variety of contexts, from courts to corporations. Readers are provided with a view into the world of professional mediation and quickly realize that there is little oversight of the conduct of mediators. According to Shapira, only “mediation programs and voluntary associations of mediators have developed codes of conduct for their members” (p. 7). Shapira points out that professional codes of conduct often do not provide ethical norms and guidelines and are in general, vaguely written. Other professional codes of conduct are not appropriate for mediators as the tasks of mediators is to promote mutual understanding, dialogue, and harmony which is very different from the goals of the legal or medical profession (p.7). Shapira looks at the moral duties of mediators and provides an overview of various perspectives and conceptual meanings, to include the study of ethics as a “discipline or study of morality” (p.3). Additionally, moral norms and ethics are discussed in detail, providing the reader with an understanding of how they apply to professional activities, expectations and behaviors.

Throughout 16 chapters and 3 parts, Shapira methodically develops a model of mediator ethics based on a professional ethics perspective (p. 81). Chapter 2 considers ethical relationships and begins with the creation of a general theory of professional that includes the ethical obligations of a variety of professions that occupy trust-based roles (p. 37). A proposed model of conduct for mediators is introduced (p. 151) as well as a standard of rights and responsibilities with regard to professional

behaviors and client rights (p. 159). Mediator competence (p. 163) is addressed in Chapter 5, providing an extensive overview of qualifications and skills required to engage in professional mediation. An overview of the standards of competence required by mediators provides the reader with an understanding of the knowledge and skills required by mediators to provide needed and competent mitigation.

The author applies the philosophical context of critical morality (p. 12) to his model development and explores all possible realms of ethical issues including conflicts of interest, impartiality, and confidentiality. Shapira discusses ethical issues in detail and establishes proposed standards in the development of the model of mediator ethics. Beginning with a “proposed standard of control of actual and potential conflicts of interest” (p. 204) as a guide for ethical behavior, Shapiro builds the model chapter by chapter, providing the foundation for each proposed standard leading to an integrated model. Ethical issues in the field of mediation are painstakingly presented prior to the explanation of the proposed standards. Shapira proposes standards for

- impartiality (p. 229);
- professional integrity (p. 252);
- respect and dignity (p. 263);
- confidentiality (p. 300);
- fairness (p. 310);
- advancement for the profession (p. 319);
- advertising and solicitation (p. 324);
- mediator fees (p.329); and
- obligations to employers and principals (p. 339).

Shapira provides case illustrations to demonstrate these proposed standards and the theory of mediator ethics” (p.364) highlighting five cases with discussions and a guide to the application of the “proposed standard of conduct for mediators” (p. 397-411).

Logically, Shapira ends the text with an explanation of the process of mediation using his proposed model as a guide. Shapira shows how the material presented can be utilized in ethical decision making and describes ethical decision making as a process that rests on external ethical standards that must be met to provide competent professional mediation (p. 343).

*A Theory of Mediators' Ethics* on the outset seems to be enormous and at times philosophically heavy and technical. With nearly 500 pages of information, the reader becomes increasingly aware that the field

of mediation worldwide is growing rapidly and ethical standards to guide professional practice are lagging. Shapira provides a very detailed overview of present guidelines and codes, highlighting the lack of specificity of the codes and the inability to enforce them (p. xxiii). Shapira provides an excellent alternative to the vaguely written codes by providing a model of mediator ethics which serves as a foundation and can be adjusted and adapted to current issues, providing a sound guide for mediators in all aspects of the profession.

This would be an excellent text for all mediators and students of mediation.

## Book Review

Sumser, B., Leimena, M., & Altilio, T. (Eds.). (2019). *Palliative care: A guide for health social workers*. New York, NY: Oxford University Press.

Reviewed by Ann M. Callahan, Ph.D., LCSW  
Eastern Kentucky University

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Social workers in health care settings are particularly positioned to support the life quality of persons facing serious illness through interventions that include their families and communities. *Palliative Care: A Guide for Health Social Workers* is a book that can assist in this process. Drawing from the eight domains of quality palliative care established by the National Coalition for Hospice and Palliative Care (2018), and based on a systematic review of the evidence, the authors assert that palliative care can be a natural extension of health social work. These domains include the process of care, physical, psychological, social, spiritual, cultural, end of life, and ethics. Book chapters are based on each domain where the authors apply the ecological-systems theory to demonstrate assessment and intervention across micro-meso-macro levels.

The book begins by describing the need for palliative care principles and practices in health social work. The emergence of palliative care and relationship of health social workers to palliative care teams is addressed in Chapter 1. The authors focus on opportunities to promote quality of life across systems and through transitions when a patient has a serious illness. Chapter 2 addresses the process of care, the first domain of quality palliative care. The meaning of whole-person care is explained with directions for assessment, psycho education, and documentation that is empowerment-based. Chapters 3 through 7 focus on the physical, psychological, social, spiritual, and cultural domains of quality palliative care. The authors demonstrate how to apply a palliative care approach with directions for intervention across systemic levels.

The next two chapters address the remaining domains, the end of life and ethics. Chapter 8 reviews what is involved in the delivery of hospice care, including preparations for death. This includes addressing a patient's care preferences as they inform a "good death" and how the end of life is shaped by disease trajectory and prognosis. Specific suggestions with examples are provided to help health social workers support a patient's strengths. Chapter 9 addresses legal and ethical aspects of care. The authors provide model questions to help health social workers assess patient capacity. They also provide resources and suggestions for other interventions. This includes a review of Western biomedical ethical principles, advanced planning documents, and landmark cases and policies that shape decision-making and autonomy in health care.

The last chapter focuses on special issues in working with children and older adults. Developmental changes are discussed with additional suggestions for interventions that are person-centered and collaborative in approach. Communication is presented as an important way to process complex emotions and to offset social isolation and distress. Following the last chapter, there is a synopsis of client cases cited in the book, including clinical focus and corresponding page numbers to go back for more information. General resources including technical reports and issue briefs, training opportunities, domestic resources and organizations, international resources and organizations, hospice eligibility and benefits information, multimedia, and additional readings are listed for reference.



*Palliative Care: A Guide for Health Social Workers* is a practitioner-friendly resource that is clearly written and well organized for immediate application. It helps demystify palliative care and delineate common ground for application by social workers across health care settings. Although not the focus of this book, it presents palliative care principles in an accessible manner that could extend to other social work settings. For example, the authors describe the concept of intersectionality and how this necessitates cultural humility as well as efforts to create a culturally sensitive, therapeutic space for intervention. This approach is modeled throughout the book with the use of inclusive language and range of examples of client cases that give voice to historically marginalized populations.

A review of health social work positions and responsibilities would have helped the reader connect with how this work departs from palliative social work. This recognition is necessary given the potential for boundary crossing and need to convey respect for colleagues when collaborating on patient care. If available, research on the consequences of missed opportunities for collaboration would have supported the ethical mandate for this work. Chapters 3 through 7 address the biopsychosocialspiritual and cultural domains. The rationale for this approach is justified, however, these domains are closely related. For example, the social domain and cultural domain are both defined by social interactions. This resulted in some repetition across chapters, so the authors could have made the narrative more succinct or added depth to the analysis by addressing this overlap. A final chapter on how to evaluate success would have been helpful as well given the need for practitioner-friendly models for evidence-based practice.

Nevertheless, *Palliative Care: A Guide for Health Social Workers* is a succinct resource for social workers to better understand and support the delivery of palliative care. Each chapter includes tables that summarize mass amounts of information, prompts that help the reader pause and reflect on content, case scenarios that demonstrate social

work application, and learning exercises that reinforce key points. The case scenarios can help social work students explore how ecological-systems theory informs practice. This book also demonstrates a number of other important concepts, such as intersectionality, as well as social work values, respect for diversity, and attention to the needs of historically marginalized populations. The knowledge palliative social workers bring to the table and applicability of this knowledge across settings and populations is a valuable resource for current and future social workers.

## Reference

National Coalition for Hospice and Palliative Care (2018). Clinical practice guidelines for quality palliative care (4th ed.) [PDF file]. Retrieved from [https://www.nationalcoalitionhpc.org/wp-content/uploads/2018/10/NCHPC-NCPGuidelines\\_4thED\\_web\\_FINAL.pdf](https://www.nationalcoalitionhpc.org/wp-content/uploads/2018/10/NCHPC-NCPGuidelines_4thED_web_FINAL.pdf)

## Book Review

Ukockis, G. (2019). *Misogyny: The new activism*. New York, NY: Oxford University Press.

Reviewed by MaryAnn Thrush, Ph.D., MSW  
Lincoln Memorial University

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Misogyny is about rage, disgust, and hatred, according to Dr. Ukockis. As I read this book, I was reminded of Carl Jung's idea of the shadow, the hidden part of the self. One might equate misogyny with society's shadow. *Misogyny: The New Activism* describes this phenomenon, bringing its characteristics into the light of consciousness. Dr. Ukockis not only describes aspects of the shadow, she also offers corrective 'action steps' at the end of each chapter. *Misogyny: The New Activism* allows the reader to understand how subtle and deeply ingrained misogyny has become in today's society.

Chapter 1 sets the stage for the remainder of the book by comparing examples of misogyny from the not-so-distant past to the current cultural conversation. For example, the author tells the story of a woman who worked as a secretary in the early 1960s. She was invited to dinner by her married boss. He expected her to say yes; after all, he was the boss. When she said no, he turned the tables by saying "it's only dinner" (p. 5), implying that she thought the invitation was something more than that, which was very plausible! The woman said she felt very small, but her boss's behavior made a lasting impact. She remembered the situation in vivid detail for fifty years, so it obviously had an impact on her life.

Current media efforts have begun to turn around expectations and clichés that objectify women by turning the clichés into slogans that empower women. Examples such as 'a woman's place is in the house...and the senate', and 'the best man for the job . . . may be a woman,' expand the role of women beyond traditional stereotypes (Chapter 1).

Chapter 2 describes misogyny on three levels: gender violence, hate speech, and in mainstream communication. Gender violence is not only sexual assault, rape, and sex trafficking but, it is also the objectification of women and girls that can lead to gender violence. Mainstream idioms subtly put women in their 'place' as sex objects, by labeling assertiveness as bad behavior, and by reinforcing social conventions such as "don't be pushy; don't 'cop' an attitude, and pretend to like sex" which, in effect, supports the stereotype of women as passive and inadequate (p. 35).

Chapter 3, "A Closer Look at Misogyny," focuses on the mainstream ways of silencing women through disrespect. For example, Hillary Clinton experienced a plethora of insults, both personal and professional, during her time as first lady and as a presidential candidate.

Chapter 4 continues to look more closely at the ways the objectification of women is intensified when other identities, such as race, age or gender preference, are present. The intersectionality of biases increases the force of misogynistic attitudes of hatred and disgust. Chapter 4 concludes by suggesting that solidarity amongst small groups of people who support each other's causes can initiate significant changes in society.

One of the important changes that the feminist movement initiated was the exposure of toxic masculinity; toxic masculinity begins with hyper-masculinity that eventually becomes toxic. Holding hypermasculinity as the ideal to which a male must aim fosters objectification and dehumanization

of women. By minimizing women, the ideal man, at least theoretically, becomes better, bigger, and more capable of leadership and success in the eyes of society. The divide between women and men therefore widens, and the idea that men are good, and women are bad, is perpetuated.

The idea that man is good and woman is bad, can be seen in the myths around rape. Our political system minimizes the harm inflicted on the victim, thereby diminishing women by perpetuating the illusion of consent. No woman ever consents to be raped. One of the cases Dr. Ukockis relates is the trial of Brock Turner. He was convicted of rape and portrayed by the defense attorneys and the media as a Stanford swimming star. The judge sentenced him to 6 months in jail after the jury's recommendation of six years in prison.

While minimizing the harm to the young woman, the Turner case illustrates the idea that men should make decisions about a woman's body. Reproductive rights of women, which include access to feminine hygiene products, menstrual leave, and abortion are all politicalized topics. Dr. Ukockis writes in detail about the controversy around whether women who have abortions experience post abortion

syndrome, a syndrome defined as “. . . agonizing mental condition caused by guilt and sadness” (pp. 192–193). Longitudinal studies show that 95% of women who have had abortions have no regrets.

How do we stop perpetuating the hatred in today's cultural currents? According to Dr. Ukockis it is both an inside and outside job. We, as social workers and concerned citizens, need to identify our own biases through self-reflection; and at the same time, we need to develop the ability to respectfully communicate with people who are different from us.

*Misogyny: The New Activism* alerts us to the sometimes hidden behaviors and attitudes that encourage hatred, rage, and disgust in our society. I highly recommend this book for all who are concerned about creating a better, kinder, and more accepting society for both men and women.

## Book Review

Zeiger, S. J. (2019). *Alive after academia: Post-career reflections of social work educators*. New York, NY: Oxford University Press.

Reviewed by Mo Cuevas, Ph.D., LCSW  
Our Lady of the Lake University

*Journal of Social Work Values and Ethics*, Volume 16, Number 2 (2019)  
Copyright 2019, ASWB

This text may be freely shared among individuals, but it may not be republished in any medium without express written consent from the authors and advance notification of ASWB.

Dr. Spencer James Zeiger served as President of the Association of Baccalaureate Program Directors from 2001 to 2003 and has held social work leadership roles in six states. Dr. Zeiger writes this as a follow up to his previous work *Career Reflections of Social Work Educators*, which was the result of interviewing 66 social work educators in 2010. Having recently departed from 28 years in academia, and subsequent to a qualitative study he completed between 2015 and 2018, he now provides a place for the voices of those social work educators who have resigned or are about to resign. He explores the transition from academia to life after leaving academia and adds his own commentary on what life it is like in “The Next Chapter,” as he refers to retirement.

Questions ranged from asking how a career in social work education prepared them for the next phase of their lives, to what advice they would give to “younger in the job” social work educators. He also asked about life changing events in their career and how does one know when to leave the academy. The responses are thoughtful, open, inspiring and honest. Reading this as a social work educator who is in the “twilight years at the academy” the questions asked prompted some good career reflection and ideas for other things to do before retiring.

Interestingly, during the process, Zeiger was also in the process of retiring and through the encouragement of the interviewees, he decided to be the 39th interview with one of the other interviewees asking the questions. This gives a very intimate feel to the work as he adds his comments at the end of

each chapter, making them feel very personal. This helps to connect the reader to the material and to think about what preparation is needed before it is time to leave the academy.

The intended audience is very specifically social work educators in varying stages of their careers. Zeiger focuses on how when we move to “The Next Chapter” we move from “living life for a purpose” to “living life for meaning.” He sees this as freeing and giving folks the chance to be more fully themselves and to express themselves more readily in new and different ways. “Living life for meaning” seems like the strongest connection to social work values and ethics as it speaks to the ways we put those values and ethics into our lives even after our career in the field.

This is a strong work. There are other questions that could have been asked that might have made the interviews even richer. Seeing if the responses were different based on the type of social work originally practiced would be interesting, or by the type of courses taught, or even by the type of college or university where the interviewees spent most of their career. There is so much left to ask and the work leaves the reader with a sense of wonder about the coming years and a sense of hope for what that time can look like. It might be an interesting book to use on a pedagogy class at the doctoral level as new graduate students contemplate and prepare to enter the academic world. It could give them a sense of what lies ahead and how they need to prepare for their future.