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**AN ANALYSIS OF ETHICAL PRACTICE AMONG FIELD INSTRUCTORS IN
SOCIAL WORK EDUCATION**

City University of New York

D.S.W. 1986

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AN ANALYSIS OF ETHICAL PRACTICE
AMONG
FIELD INSTRUCTORS IN SOCIAL WORK EDUCATION

by

ELAINE PILLER CONGRESS

A dissertation submitted to the Graduate
Faculty in Social Welfare in partial
fulfillment of the requirements for the
degree of Doctor of Social Welfare, the
City University of New York

1986

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This manuscript has been read and accepted for Graduate Faculty
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Abstract

An Analysis of Ethical Practice Among Field Instructors in Social Work Education

by

Elaine Piller Congress

Adviser: Dean Harold Lewis

Although the teaching of social work values and ethics has always played a significant role in the professional development of social workers, social work education in recent years has witnessed the inclusion of learning material on social work values and ethics in all aspects of academic curriculum. While the social work student may learn conceptual knowledge of social work values and ethical reasoning in the classroom, the field experience still provides the major training and testing ground for the student to apply social work values to practice. These students frequently encounter ethical dilemmas and put into practice social work values through ethical decision-making. Yet the knowledge and ethical decision-making in practice for field instructors who are very important social work educators has not been addressed at all.

This research project focuses on field instructors in order to better understand their knowledge of social work ethics and its application to practice. Beginning field instructors at

Hunter College School of Social Work were studied through their responses to case vignette questionnaires and follow-up interviews.

Most field instructors seemed to be very knowledgeable about ethical issues in practice and usually selected social work interventions which maximized the client's right to self determination, although acknowledging some concern for the client's safety. There seemed, however, some reluctance to advocate for the client's interest, when the latter seemed contrary to agency policy.

The role of the agency in affecting ethical practice seemed significant in field instructors' responses to both the questionnaires and interviews. Multi-discipline complex agencies seemed less conducive to ethical decision-making in practice, in contrast to social work agencies in which administrators and supervisors were more supportive in ethical decision-making dilemmas. There was a positive reaction to the development of an ethical review board within agencies, but there was fear that it might be coopted by administrative powers within the agency.

Different responses to ethical issues were noted as related to gender, age, job title, and experience. Women were more likely to focus on client issues, while men emphasized multiple issues. This may be related to basic differences in ethical decision-making among men and women. Older field instructors

were more likely to concentrate on multiple issues, while they were less inclined to advocate for clients. Administrators, as contrasted to practitioners, more frequently advocated for clients against agency policy, possibly because they were in a position to change agency policy if necessary. There is some indication that social workers may become more aware of client issues with increased experience, which is positive for the profession as a whole.

All in all, the quality of ethical decision-making among field instructors seems high, which is important for both social work practice and education. Specific recommendations for social work education include the use of the case vignette and NASW Code of Ethics in teaching about ethics, utilization of differing educators and students within the social work educational experience, and finally acknowledgement and further study of the significant role of agency in the ethical decision-making of social work practice.

ACKNOWLEDGEMENTS

My doctoral committee has been most supportive and helpful in the development, modifications, and completion of this doctoral project. First, I would like to acknowledge Dean Harold Lewis, my advisor and chair of my doctoral committee, whose educational and emotional support has guided me throughout my years in the doctoral program, from my early days as a beginning doctoral student enrolled in his class on the Intellectual Base of Social Work Practice, through an independent study project with him on Ethical Issues in Social Work, and finally to proposal development, acceptance, and project completion this year. His intelligence and insight as an educator, researcher, and practitioner, as well as his continued encouragement, interest, patience, and humor were most crucial in enabling me to formulate and develop this project on ethical decision-making in social work. Despite the many demands on his time and energy as Dean of Hunter College School of Social Work, he was always available for consultation and advice for which I am most appreciative. He more than anyone else has made this project possible and I am very grateful for his continual guidance throughout this educational endeavor.

In addition, I would like to thank the two other members of my doctoral committee, Dr. Michael J. Smith and Dr. Elaine Marshack.

I first met Michael Smith early in my doctoral career as a student in his research course in which he made research interesting, comprehensible, and valuable to a non-researcher practitioner/administrator. I am grateful for the attention and advice he gave during the different phases of this project. Especially I am appreciative of his reading of an early version of the research results and his suggestions for change in terms of a more substantive analysis of data.

Dr. Elaine Marshack I met many years ago when as a beginning field instructor I was enrolled in the same course for new field instructors from which this project sample was drawn. Her knowledge about and dedication to the role of field instruction in professional social work education has always impressed and inspired me. I thank her for suggestions as to proposal and then project development, sharing with me useful materials on field instruction, and finally for making available to me the resources of the field instruction department at Hunter College School of Social Work and her class for new field instructors.

Two other social work educators, Dr. Reva Fine Holtzman and Dr. Kay Davidson were also most helpful and cooperative in allowing me time to administer my questionnaire within their field instruction classes for which they already had a very full course outline. Furthermore, I am appreciative that they did permit me to conduct interviews with selected social workers

from their field instruction classes.

Finally, I would like to thank all the social workers who participated in this study by completing the questionnaire or taking part in an interview. Included are the pre-test participants - the experienced field instructors who returned the questionnaires by mail last summer, the students enrolled in Dean Lewis' ethics class, and the professional social work staff at Lutheran Medical Center Mental Health Program. Special thanks is extended to the field instructors enrolled in classes for beginning field instructors at Hunter College School of Social Work who completed the questionnaire within their classes and the interviewed field instructors who took time from their busy agency schedule to participate in an in-depth interview during the final phase of this project.

E.P.C.

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CHAPTER I
INTRODUCTION

Social work has always been a normative profession and the integration of knowledge and values is usually viewed as essential to skilled social work practice. Social work values have been described as stressing the uniqueness and worth of the individual, self-determination, the existence and value of freedom, and a belief in social justice.¹

Social work education provides the means by which knowledge of social work values is transmitted to student social workers. The teaching of social work values and ethics has long been considered an important aspect of social work education.²

Training in social work values and ethics takes place both within the school as well as the agency. Yet even though students may learn conceptual knowledge of social work values and ethics in the classroom, field work still provides the major training and testing ground for the application of social work values. There students witness and learn to integrate into their professional practice the operationalization of social work values in ethical

¹ Shankar Yelaya, Ethical Issues in Social Work (Springfield, Illinois: Charles Thomas, 1982), p. 9

² Muriel Pumphrey, The Teaching of Values and Ethics in Social Work (New York: Council on Social Work Education, 1959), p. 12

decision-making.

In social work school students are very influenced by their field placements and learn much about professional social work practice from their field instructors. Students often look to their field instructors for guidance in helping them understand and resolve the complex, challenging ethical issues and dilemmas they encounter in field placements. Also social work students learn much about ethical issues in practice by observing the example of field instructors, how the latter analyze and resolve ethical conflicts in practice.

Yet field instructors' understanding and resolution of ethical dilemmas in practice are largely unknown and unstudied. Many field instructors who attended social work school before the teaching of social work ethics was stressed as much in social work education may not be emphasizing social work ethics to student social workers. Furthermore, years of viewing discrepancies between social work values and agency practice may have made field instructors reluctant to teach students about ethical issues and decisions which the former feel are unrealizable in actual practice. Finally, there is some evidence that the values of field instructors may be conservatively disparate from the values of faculty which would certainly contribute to

3
conflicted student learning.

Since field instructors are significant teachers and role models for future professional social workers, it becomes important to study field instructors' understanding of ethical issues and conflicts in the field and how this affects ethical decision-making in practice. If field instructors become more aware of and sensitive to ethical issues and conflicts in their practice, one would expect that both the quantity and quality of ethical teaching to social work students in their field placements would be augmented.

The subject for this study grew out of two major concerns in the field of professional social work. First, the knowledge of social work values and their application in ethical practice seems fundamental to professional social work practice. Although the significance of ethical decision-making is learned as a student, years of professional agency practice emphasize even more the importance of social work values and ethics in skilled practice. Secondly, the importance of the field work experience as an essential part of the student's social work education became even more evident after years as a field instructor. The field seemed like the most appropriate place where the student

3

Eleanor Judah. "Values: The Uncertain Component in Social Work," Journal of Education for Social Work (Spring, 1979), p. 86.

could learn about social work values and ethical issues in practice. These students could increase their skills in ethical decision-making as an essential part of their growth and development into professional social workers. Yet the role of field instructors seems to have been minimized and consequently so little is known about who they are, much less about their knowledge and application of social work values and ethics in practice.

The identified problem and unmet need in social work can be summarized as follows:

1. Teaching values and ethics is an important component in social work education.
2. Field placements provide the training and testing ground for social work values and ethics learned in the classroom.
3. Field instructors are crucial teachers and mentors in educating social work students about social work values and ethics and how to apply ethical decision-making to practice examples.
4. The values and ethical practice of field instructors is unknown and unstudied and even may be discrepant from accepted social work values and ethical practice.

The main purpose of this study was to learn more about the understanding of ethical issues which field instructors had and how they applied this understanding to ethical decision-making in practice. The subjects for this study were the new field instructors enrolled in supervisor seminars at Hunter College School of Social Work for the 1985-86 academic year. It seemed important to know more about the understanding of ethical issues in practice for this group, as they were just beginning their careers as professional social work educators. Two measurement instruments were used to ascertain what was the field instructors' knowledge of social work issues, how they would apply this information to ethical decision-making, what social work interventions they would select, which ethical dilemmas in their particular agency they had identified as most difficult, and finally what means they would utilize to help them resolve and receive support for ethical decision-making within the agency context.

Fifty-nine field instructors completed the questionnaire which consisted of ten case vignettes. Case vignettes were used as they presented case situations which were similar to actual practice. The case vignettes focused on social work clients such as homeless people, battered women, elderly clients, suicidal and homicidal patients, and welfare mothers who are familiar to all social workers. Each field instructor who completed the

questionnaire was asked what were the ethical issues raised by the case vignette, how they would intervene, and why they chose a specific intervention based on their understanding of the ethical issues involved.

Ten of the field instructors who completed the questionnaire in the supervision seminar were asked to participate in a 45-minute in-depth interview in their agencies. The interview focused on their reactions to the questionnaire, if they felt it had increased their sensitivity to ethical issues in practice, what difficult ethical dilemmas they had encountered in their agency practice, had they been able to resolve these dilemmas, and if they had or believed that an ethical review committee would be helpful in resolving and supporting ethical decision-making within agencies.

In summary the researcher wanted to learn from the field instructors through questionnaires and interviews:

1. Given a specific case example, involving an ethical dilemma, which intervention would field instructors select?
2. What ethical issues would field instructors identify as pertinent to a specific case?
3. How would the field instructors explain the reasons for their chosen intervention?
4. What ethical dilemmas had they found most difficult to resolve in their professional practice?

5. How were field instructors able to resolve the conflict? What if anything, impeded them from pursuing their ethical choice?
6. Did they have an ethical review board in their agency? Did they believe that such a board would be useful in helping them resolve ethical conflicts in practice?
7. Had the exposure to ethical issues and conflicts during the research procedures of questionnaires and interviews increased the sensitivity of field instructors to ethical issues in practice?

This information was then related to identifying data which the field instructor had furnished on the questionnaire to ascertain if gender, age, ethnic background, social work method, job title, years of experience post-MSW, or years in the agency affected knowledge and intervention choice of ethical issues in practice.

While the purpose of this study is primarily descriptive in that it proposes to study the knowledge which field instructors have of ethical issues in practice and their choice of intervention with ethical dilemmas, there is also a social action component in this research project. Rokeach who has written extensively about value formulation and change indicates that individuals who are made more aware of their values and possible discrepancies between their values and actual behavior are likely to change their behavior so as to be more consistent with their values.

⁴

Milton Rokeach, The Nature of Human Values (New York: The Free Press, 1973), p. 225.

It is suggested that the questionnaire and interview exposure may increase the awareness and sensitivity of field instructors to ethical issues in their practice. If field instructors become more sensitive to ethical issues in their practice, their own practice, as well as the quality and quantity of field instruction on ethical issues and decision-making in practice, will be improved. Through sensitizing field instructors to ethical issues in their practice, field placements will assume a more significant role in teaching social work students about professional ethics in application to real case situations.

This research study is organized into five main chapters. The first chapter describes the problem. It focused on the importance of values and ethics in professional social work, as well as the field as the most significant place in which knowledge of this type is transmitted to students. The dearth of literature and research on field instructors especially in terms of ethical issues is noted. The research methods as well as the general outline of the research study are delineated. In conclusion, the overall goals and objectives of the project are described.

Chapter II consists of the literature review of conceptual theory and empirical research pertinent to a study of social work ethics and field instruction. First, the concept of professional ethics in general and then social work ethics in

particular are explored. Attempts to integrate the teaching of social work values and ethics into social work education are discussed, but the lack of empirical research on social work values noted. What few research studies have been made usually focus on students or professional workers, not field instructors. The importance of field placement, the role of the field instructor, and methods of student supervision are all addressed.

The second part of the literature review focuses on definitions of concepts like value and ethics, specifically as it relates to the social work profession. Different theories of applied ethics are delineated and two models of ethical assessment in social work decision-making are discussed, as well as the role of the NASW Code of Ethics delineated. Finally, key concepts such as self-determination, paternalism, confidentiality, conflict between interests, and truth-telling which are very relevant to the construction, responses, and interpretation of the questionnaire are analyzed.

Chapter III describes the methodology which was used in this research study. The pretest phase in which the first version of the questionnaire was pretested with three different groups at varying professional levels is discussed in detail. The main research phase in which the revised questionnaire is administered to new field instructors is described and followed by a discussion of the final third phase in which field instructors

were interviewed about ethical issues and dilemmas in their agencies. Also included in this chapter is an analysis of the sample composition in terms of sex, age, ethnic background, method, job title, years of experience, and length of time in agency.

The fourth chapter focuses on an analysis of the data. Each case vignette is examined in terms of the specific responses of field instructors as to choice of intervention. Also content analysis is reported from the essay questions and data categorized as to multiple issues, client issues, safety/paternalism issues, other interests, and alternative issues. Responses to the questionnaire are analyzed in terms of gender, age, job title, and years of experience post-MSW. Finally, the context of the interviews with field instructors is studied especially in terms of differences between agencies, types of impediments to ethical decision-making, and suggested remedies.

The final chapter includes a summary and conclusions based on the research findings. The knowledge of ethical issues and decision-making which field instructors demonstrated through interviews and the questionnaire are discussed. Also differences related to gender, age, job title, and years of experience are delineated. Significant issues such as the effect of agency on ethical decision-making and methods to improve ethical decision-making in agency practice formulated. Finally, implications for

future research are suggested.

Before continuing with a discussion of this research project, it is useful to summarize the primary goals and objectives. In general, the overall goal of this project is to improve the quality of social work education. General goals can be outlined as follows:

1. Achieve deeper understanding of the place of values in practice.
2. Enrich the educational context of values in the field work experience.
3. Promote the integration of ethical learning in social work curriculum.

The objectives to be addressed in obtaining these goals are:

1. Ascertain what ethical issues and dilemmas are of greatest concern to field instructors.
2. Study conceptualization and application of ethical issues in practice.
3. Increase sensitivity of field instructors to ethical issues in practice.

Currently little is known about field instructors, although all acknowledge their important role in teaching student social workers. This research project represents an early attempt in relatively uncharted waters to explore the values and ethics of field instructors and thus increase our knowledge base about these most significant and essential actors in social work education.

CHAPTER II

REVIEW OF THEORY, PRACTICE AND RESEARCH

Although the study of values and ethics began with the ancients, more recently these philosophical concerns have become the focus of renewed interest because of the complicated life and death questions created by advanced technological developments. The Hastings Center was established in 1969 to address the ethical problems of rapid developments in medicine, biology, and the behavioral sciences. In addition to these areas, the Center has become increasingly concerned with the problems of professional ethics and with the teaching of ethics in undergraduate and professional schools.

Professional Ethics

Professional ethics have received increasing attention in recent years, because of the relative vulnerability and powerlessness of the client who seeks the services of the professional.

As Bayles relates:

The fiduciary model presents the best ethical ideal for the professional-client relationship. It recognizes the superior knowledge that professionals have and imposes special obligations upon them in virtue of that superior knowledge, yet it permits clients to make the decisions that importantly affect their lives.¹

¹ Michael Bayles, Professional Ethics (New York: Wadsworth, 1981, p. 86.

While this model applies to all professions, it is especially relevant for social workers whose clients are frequently the poor, the sick, the old, the uneducated, and the very young who are in a position to be very influenced by the greater knowledge and power of the social work professional. The social worker's appropriate ethical role given this unequal power relationship has been described as follows:

The worker should seek to enlarge on choices available to the recipient, including those proposed by the recipient and those newly developed in the course of rendering the service...Choice is as essential for trust as opportunity is for self-realization. Choice increases opportunities for error. When there is no possibility of error, there is no basis for trust.²

If professional ethics is so essential in guiding the work of professionals with vulnerable clients, it should be studied in institutions of higher learning as a preparation for entering professional fields. The Hastings Center when they undertook the study of the teaching of ethics in higher education found that ethics instruction differed sharply from institution to institution.³ While they noted that specific ethics courses had been introduced especially in professional schools, many

²

Harold Lewis, "Morality and the Politics of Practice," Social Casework 53 (July, 1972), p. 409.

³

The Teaching of Ethics in Higher Education: A Report by the Hastings Center (Hastings on the Hudson, N.Y.: Institute of Society, Ethics and the Life Sciences, 1980), p. 76.

schools still utilize a pervasive method in teaching ethics on the higher education level. The pervasive method argues that ethics should not be taught in a discrete course, but rather integrated throughout the curriculum. Hastings Center argues rather successfully that "no other serious subject is taught in that fashion; that is, considered so important that it is taught in all courses in general, but in none in particular."⁴ An even more convincing argument against the pervasive method is that schools which supposedly integrate ethics throughout the curriculum end up teaching very little ethics at all.

Ethics in Social Work Education

Similarly Reamer who studied the teaching of ethics specifically in social work professional education found that schools which did not offer a specific course on ethics rarely integrated ethical teaching in any organized or studied manner throughout the curriculum.⁵ If individual teachers in the practice, the human behavior, and social policy sequences make

⁴

ibid., p. 74

⁵

Frederic Reamer and Marcia Abramson, The Teaching of Ethics XI: The Teaching of Social Work Ethics (Hastings on the Hudson, N.Y.: Hastings Center, Institute of Society, Ethics and the Life Sciences, 1982), pp. 47-48.

decisions about the amount and type of teaching on ethics which transpires in their courses, the results are very erratic and vary widely from instructor to instructor, department to department, and school to school.

There has been some empirical research to support the use of the discrete course as compared to the pervasive approach. A study was conducted to compare students from two different social work schools, one of which had a discrete course in ethics while the other utilized a pervasive method for integrating teaching about ethics throughout the curriculum.⁶ The students who took the specific course seemed more knowledgeable of ethical content and decision-making than students who attended social work schools with a more integrated approach. Ultimately, the researchers advocate both a discrete course, as well as a pervasive method as the most effective way to teach the social work student about ethical issues and decision-making in practice.

But how should social work educators teach ethics in the social work curriculum? Pumphrey who has written on the teaching of values and ethics in social work education focuses

6

M. Vincentia Joseph and Ann P. Conrad, "Teaching Social Work Ethics for Contemporary Practice: An Effectiveness Evaluation," Journal of Education for Social Work 19:3 (Fall, 1983), pps. 59-68.

on the vagueness about the teaching of values and ethics necessary to skilled social work practice.⁷ She formulates the following educational objectives to utilize in developing curriculum around values and ethics:

Comprehension of values, disvalues, and ethical judgments as human phenomenon -- understanding of the philosophic-spiritual component in every life situation

Appreciation of different value systems, including one's own

Awareness of typical professional positions with respect to values and ethics

Ability to interpret social work value positions

Ability to withstand pressures to change value positions and ethical judgments

Recognition of classic conflict positions in a social work situation

Ability to use professional procedures and channels in solving conflicts

Appreciation of common ultimate goals of many branches of the profession and recognition of unity of purpose in these diverse efforts.

Ability to use one's own value system in a helping relationship

Use of common professional goals as motivation for professional creativity.⁸

⁷ Muriel Pumphrey, The Teaching of Values and Ethics in Social Work Education, p. 4.

⁸ Ibid, p. 6

While Pumphrey emphasizes the theoretical teaching of values to social work students in the classroom, she seems to minimize their practical application. At one point, she relates that "we do not know what values and ethical norms are of practical use."⁹ Yet in reinforcing learning about values and ethics she acknowledges field practice as "testing the student's level of value formation and learning patterns; practice in identifying values in operation; exposure to values not previously experienced at least in the same form."¹⁰

In 1982 the Council on Social Work Education stressed the inclusion of social work values and ethics in all aspects of social work education.¹¹ This has led social work schools to either the development of new required or elective courses in ethics or the integration of ethical teaching into all the required sequences in social work education. While faculty has been strongly influenced by this greater emphasis on teaching

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ibid., p. 14

10

ibid., p. 134

11

"Curriculum Policy for the Master's Degree and Baccalaureate Degree Programs in Social Work Education" (New York: Council on Social Work Education, 1982), pp. 8-9.

about ethics to social work students, there is some question¹² about whether field instructors, often called partners in providing professional social work education to students, have included teaching about ethical issues and decision-making in student field placements. Yet this application of values to practice is essential as Helen Harris Perlman relates:

A value has small worth except as it is moved or is movable from believing into doing, from verbal affirmation into action. If values are to serve as action guides, they must be drawn down to earth. They must be operationalized, changed into instruments that fashion and direct our doing.¹³

Empirical Research on Social Work Values and Ethics

While there has been recent emphasis on the inclusion of social work values and ethics in social work education, the number of empirical studies in these areas has been very limited. "The use of values in practice has been neglected as a target for¹⁴ research." One explanation may be the difficulty of studying

¹²

Betty Jones, ed., Current Problems in Field Instruction in Graduate Social Work Education (New York: Council on Social Work Education, 1969), p. XI.

¹³

Helen Harris Perlman, "Believing and Doing: Values in Social Work Education," Social Casework 57:6 (June, 1976), p. 381.

¹⁴

J. Vigilante, "Between Values and Science: Education for Professionals During a Moral Crisis or Is Proof Truth," Journal of Education for Social Work 10:3 (1974), p. 108.

values in relation to practice behaviors. Researchers may have found it difficult to transpose the most abstract aspects of social work education into concrete research designs.

What limited studies which researched social work ethics usually focused on students and changes in their values and ethics as a result of their social work education. Barbara Varley measured four value dimensions including:

1. service (being primarily other, rather than self oriented)
2. universalism (limiting the relationship to the technical task rather than to subjectivity and personal involvement)
3. equal rights (being impartial to all regardless of personal sentiment)
4. psychodynamic-mindedness (systematically applying a body of knowledge relevant to the client's problems)¹⁵

Initially no differences at varying points of social work education were discovered. When the study was duplicated, similar results were found which led to the conclusion that "social work education has relatively little effect on a student's social work values."¹⁶

¹⁵

Barbara Varley, "Socialization in Social Work Education," Social Work 8:3 (July, 1963), pp. 102-109.

¹⁶

Malcolm J. Brown, "Social Work Values in a Developing Country," Social Work 15:1 (January, 1970), p. 112.

Five years later when the initial study was repeated, there was indication of a positive change in the equal rights value¹⁷ only. One can speculate that there were some problems with the identification of key variables or the methodology in these studies, as practice 'wisdom' tells us that socializing social work students into the profession by teaching them about professional social work values and ethics would produce some changes. In contrast to the previous studies which indicated no change as a result of social work education, one researcher found that graduate education did contribute to social workers¹⁸ developing a positive orientation toward public dependency.

There has been much controversy about whether and, if so, what core values social workers share. One study which focused on the values of professional social workers identified ten value dimensions placing them on a continuum. They were as follows with the first representing the preferred value:

1. Individual worth versus system goals
2. Personal liberty versus social control

¹⁷ Barbara Varley, "Social Work Values: Changes in Value Commitments of Students from Admission to MSW Graduation," Journal of Education for Social Work 41:2 (Fall, 1968), p. 76.

¹⁸ George Sharwell, "Can Values be Taught? A Study of Two Variables Related to Orientation of Social Work Graduate Students Toward Public Dependency," Journal of Education for Social Work 10:2 (Spring, 1974), pp. 99-105.

3. Group responsibility versus individual responsibility
4. Security/satisfaction versus struggle, suffering and denial
5. Relative pragmatism versus absolutism/sacredness
6. Innovation/change versus traditionalism
7. Diversity versus individual autonomy
8. Cultural determinism versus inherent human nature
9. Interdependence versus individual autonomy¹⁹
10. Individualization versus stereotyping

Although he never specifically studied professional social workers, Rokeach researched at great length the nature of human values worldwide. Two key values were identified as equality and freedom with varying orientation toward these values related to political ideology.²⁰ Those on the extreme left, Communists, were found to be high on equality and low on freedom, the moderate left Socialists-Liberals, high on equality and high on freedom; the moderate right Capitalists-Conservatives, low on equality and high on freedom; and the extreme right Fascists,²¹ low on equality and low on freedom. With the social work

¹⁹
Donna McLeod and Henry Meyer, "A Study of Values in Social Work" in Behavioral Science for Social Work, ed. Edwin Thomas (New York: The Free Press, 1967), pp. 402-405.

²⁰
Milton Rokeach, The Nature of Human Values, pp. 165-189.

²¹
Ibid., p. 184.

focus on maximizing the freedom of each individual client we might expect that social workers would demonstrate a high equality, high freedom, or liberal Socialist political ideology.

Yet as social workers move from direct practice to supervisory and administrative roles, they often become more conservative and less accepting of the social justice value in social work.²²

The values of students, faculty, and field instructors have been compared. Using Varley's four values - service, universalism, equal rights, and psychodynamic-mindedness Judah found that there were differences in the way that faculty as compared to field instructors responded along key value dimensions.²³ Field instructors and faculty members were in sharp contrast on the equal rights dimension, with field instructors scoring low and faculty high. Equal rights were defined as impartiality in giving service to all clients irrespective of personal sentiment. With a low score on equal rights field instructors are presented

22

Irwin Epstein, "Organizational Careers, Professionalism, Social Work Radicalism," Social Service Review 44 (1970)

Rino Patti and Michael Austin, "Socializing the Direct Service Manager to the Ways of Supervisory Management," Administration in Social Work (Fall, 1970)

23

Judah, "Values: The Uncertain Component in Social Work," p. 86.

as questionable transmitters of what we would consider to be essential social work values. Also the contradictory model of social work values presented to students by field instructors as compared to faculty is of concern, since consistent teaching by both field instructors and faculty is considered essential for effective learning.

Other research which compared faculty, beginning and advanced students, and field advisors studied the value orientation of these four groups in terms of three categories, analytic-therapeutic, bureaucratic, and environmental. Neikrug found that beginning students and faculty members are more oriented toward the environmental-active approach, whereas field advisors and advanced students lean more toward the analytic-therapeutic and bureaucratic approaches.²⁴ He concludes that, at least as far as value orientations are concerned, "the impact of field instruction may be more powerful than that of class instruction."²⁵ Again the different value orientations presented to students is of some concern.

²⁴

Shimshan M. Neikrug, "Approaches to Social Work Practice: Values of Students, Faculty and Field Advisors," Social Work Research and Abstracts 14:2 (1978) pp. 36-43.

²⁵

ibid., p. 42

A yet unpublished study at Rutgers University School of Social Work measured ethical decision-making among students and faculty at Rutgers School of Social Work, practitioners and supervisors at nine hospital social work departments, and direct service workers and supervisors at three offices of the child welfare state agency.²⁶ Respondents' choices on the case vignette questionnaire was grouped according to system oriented decisions, client oriented decision, combined client/system responses, and deferred decisions or non-intervention. While the researchers had believed that students would select the more client-centered responses this did not actually occur, as students tended to prefer compromise positions with combined client/system responses. Furthermore, initial data analysis indicated that hospital workers as compared to child care workers were more likely to make client centered decisions. Yet both types of social workers were more likely to make judgmental decisions about clients' behavior than colleagues' behavior. Finally, no demographic characteristic such as age, gender, or length of time in agency seemed significant.

26

T. Walden, I. Wolock, H.W. Demone, Jr., and F. Guy, "Ethical Decision Making: A Comparative Study," Unpublished Study conducted at Rutgers University School of Social Work and presented at NASW Professional Symposium, November, 1985.

In the Rutgers study supervisors and faculty were asked how they would advise a student to resolve the ethical dilemma presented by each case vignette. It was believed that the subjects' responses to this question might be different than if they were asked more directly how they would intervene in a specific case example.²⁷ In contrast this study asked field instructors directly how they would intervene in specific cases, as the actual behavior and role model set by the field instructor was considered crucial for student learning. Unfortunately, information about how the faculty differed from supervisors in terms of their responses to case vignettes is not yet available.

Important Role of Field Instructor in Social Work Education

While social work students, professional social workers, and to a lesser extent faculty have been the subjects of empirical studies on values and ethical decision-making, no research has focused on the values and ethics of field instructors. Yet it is known that social work was born "in the field."²⁸

27

ibid.

28

Sandra L. Kahn, "An Analysis of the Relationship Between Social Work Schools and Field Placement Agencies in Their Joint Task of Educating Social Works," Doctoral Dissertation completed at Columbia University, 1981, p. 1.

While social work education has always included classroom instruction and agency placement, the main focus of attention has been on classroom curriculum rather than field work instruction. Often field instruction is perceived as being on a "lower" level than classroom teaching and field instructors as seen as less skilled than faculty in the task of educating social work students.²⁹

There has been frequent concern about the lack of training of field instructors. Charlotte Towle, Bertha Reynolds, and more recently, Florence Kaslow have all indicated that field instructors are usually selected because of their experience as direct service practitioners and may have little or no education in supervising.³⁰ For this reason in New York City, all beginning supervisors are required to take a field instructor seminar to introduce them to supervising students. Yet the new field instructors' understanding and application of ethical issues in practice, a crucial concern in social work education has been largely unknown and unstudied up to this present time.

29

ibid., p. 7

30

ibid., pp. 316-317.

Field work instruction has always been considered as crucial in professional education. In fact, students and alumni often consider their field work experience as having had the most value.³¹ Field work should provide an opportunity for students to increase their level of commitment to the values of the profession. In field placements students discover consistencies and inconsistencies between agency practices and professional values. A significant part of students' field education experience should be to help students sort through the dilemmas raised by these realities and decide what interventions they will choose as each situation arises.³²

While social work students can study social work values and ethics in the classroom, the real testing ground for ethical decision-making is in student field placements. Twenty-five years ago Muriel Pumphrey stressed that the practitioner at the direct service level was in the most crucial position in transmitting social work values and ethics. She noted that the social work

31

Herman D. Stein, Social Work Curriculum Study. (New York: Columbia University Press, 1960), pp. 54-58.

32

Nina Hamilton and John Else, Designing Field Education: Philosophy Structure and Process (Springfield, Illinois: Charles Thomas, 1983), p. 23.

field had failed to link philosophical ideals with concrete practice situations.³³ Supervised field work should provide students with an opportunity to verify the actual impact of our stated values and ethics on social work relationships.³⁴

There are three main models of student supervision which have been described, the apprentice, growth, and the role system model.³⁵ All three can be identified in the way that field instructors teach students about ethical issues in practice. With the apprentice model the student observes and models behavior of the experienced field instructor. Students often look to their supervisors for identifying and resolving ethical dilemmas in practice. With the growth model students often learn to understand their own values as well as significant social work values in practice. The newest, but frequently most practiced model of student supervision, role system model focuses

33

Muriel Pumphrey, "Transmitting Values and Ethics Through Social Work Practice," Social Work 6:3 (July, 1961), pp. 68-69.

34

Dorinda Noble and John King, "Values: Passing on the Torch Without Burning the Runner," Social Casework 62:10 (December 1981), pp. 579-584.

35

Wijnberg, M.H. and Schwarz, M.C., "Models of Student Supervision: The Apprentice, Growth and Role System Model," Journal of Education for Social Work 13:3 (1977), pp. 107-13

on the interaction between student and supervisor. Using this model of supervision the supervisor asks the student to contribute direct practice input which then becomes the subject for discussion. This supervision model provides an excellent opportunity for the field instructor to discuss with the students ethical issues encountered in practice and ways to resolve ethical dilemmas.

The role of field instructor has frequently been compared to that of mentor. As mentor, the field supervisor serves as an object of identification for the beginning social work student who observes closely how the former analyses and decides the appropriate intervention in difficult ethical situations. Not only does the field instructor teach through identification, but also attempts to change the behavior of the novice student. Supervisees learn how to reflect upon and improve their performance as social workers in order to carry out a professional mandate. Supervisors are expected to teach the optimal way to do this.

36

Louis Lowry, "Social Work Supervision From Model Toward Theory," Journal of Education for Social Work 19:2 (Spring, 1983), pp. 58.

Use of Case Example in Social Work Education

Frequently the optimal way to teach is through the case example. While social work students may learn about social work values and ethical practice in the classroom and supervisory sessions, the real testing ground is practice applications in the field. Levy stressed that the social worker's ethical responsibility is strongly defined in the real life situation.³⁷ It appears most profitable to study social work ethics not so much in terms of the values that social workers verbalize, but in terms of what they actually do when faced with a choice between valued courses of action.³⁸ This suggests the use of the case vignette as a teaching tool for social work students, as well as a measurement instrument to ascertain how field instructors conceptualize and intervene with difficult ethical dilemmas.

Concepts of Social Work Values and Ethics in Social Work Education

But what does the field instructor teach social work students about ethical issues in practice? What should students learn about social work values and ethics in the course of their

³⁷

Charles Levy, "Context of Social Work Ethics," Social Work 17:2 (1972), p. 95.

³⁸

Timms, Noel, Social Work Values: An Enquiry (Boston: Roulledge and Kegan Paul, 1983)

education in order to become professional social workers?

Social Work Values

First, it is important to differentiate between values and ethics. Values have been defined as those "enduring beliefs we hold as to what is to be preferred as good and right in our conduct and in our existence as human beings."³⁹ Individuals, groups, and countries all have different value systems which affect their choice of means, ends, and conditions of life. Individuals will often modify their behavior to be more consistent with their values.⁴⁰ Furthermore, a value system is "a learned organization of principles and rules to help one choose between alternatives, resolve conflicts, and make decisions."⁴¹ The preceding Rokeach statements are essential in understanding the relationship between values and ethical decision-making. More specifically, they describe how professional social work values influence ethical decision-making.

39

Harold Lewis, The Intellectual Base of Social Work Practice (New York: The Haworth Press, 1982), p. 12

40

Rokeach, The Nature of Human Values, pp. 232-233.

41

Ibid., p. 14

Each profession has a set of values which students learn and come to accept as their own in the process of their socialization into the profession. Social work values stress the uniqueness and worth of the individual, self-determination, the existence and value of freedom, and a belief in social justice.⁴² Social work values are not without conflict especially with their emphasis on the individual as well as society. To minimize the value conflicts between the individuals and others (society), Pumphrey proposes that values be studied in interrelated pairs as follows:

- | | |
|---|---|
| Importance of the individual | - Interdependence of all individuals at all times |
| Self-determination | - Consideration for self-determining needs and desires of others |
| Common needs of man | - Recognition of differences |
| Acceptance of every person | - No condoning of behavior which hurts others |
| Right to protection of body and intellect | - Obligation not to injure or deprive others |
| Freedom | - Limits |
| Change, progress, growth | - Preservation of the effective stability, security, social direction through accepted norms." 43 |

42

Shankar Yelaya, Ethical Issues in Social Work, p. 9.

43

Muriel Pumphrey, The Teaching of Values and Ethics in Social Work Education, p. 45.

Applied Ethics

Ethics has been defined as "those rules of conduct that direct us to act in a manner consistent with the values we profess."⁴⁴ Ethical behavior is an operationalization of values an individual, group, or society has. Behavior is selected according to an understanding of what is considered ideal or good, following approved principles or priorities by which selection among different good behavior is made.

The two major modes of reasoning in applied ethics are consequentialism and formalism. The former is most evident in the works of the utilitarians and the latter in the works of those who reason deontologically. Utilitarianism can be considered a teleological theory in which choices are made by an analysis of consequences. This theory focuses on the greatest good for the greatest number. Associated with this theory is an extreme libertarian position which was initially proposed by John Stuart Mill.⁴⁵

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Harold Lewis, The Intellectual Base of Social Work Practice, (New York: The Haworth Press, 1982), p. 12

⁴⁵

John Stuart Mill, Utilitarianism (Indianapolis: Bobbs-Merrill, 1971.)

In contrast to a utilitarian theory is the formalist or deontological position which maintains that ethical decisions are made in accordance with certain absolute rules or principles, rather than because of their consequences. Examples of absolute principles would include: "always tell the truth" and "each person has freedom to do as he chooses with his life." Kant formulated the categorical imperative principle which emphasized universalizability and that people should not be used as means.⁴⁶

Social Work Ethics

The recent writings of John Rawls, whose work is associated with Locke's contract theory and Kant, seem particularly akin to the social work position.⁴⁷ Harold Lewis notes that John Rawls "has provided an essential framework for an instrumentalization of the values of social work, although he does not address the profession's concerns directly."⁴⁸ With his theory of justice Rawls proposes that all free and rational people when placed in a veil of ignorance would operate by principles which favor the

⁴⁶ Frederick G. Reamer, Ethical Dilemmas in Social Service (New York: Columbia University Press, 1982), p. 18.

⁴⁷ Frederick G. Reamer, Ethical Dilemmas in Social Service (New York: Columbia University Press, 1982), p. 60.

⁴⁸ Harold Lewis, "Review of A Theory of Justice by John Rawls, Social Work (July 1973), p. 113.

most disadvantaged. Rawls relates two principles which he prioritizes so that the first must be satisfied before the second:

1. Each person is to have an equal right to the most extensive total system of equal basic liberties compatible with a similar liberty for all.
2. Social and economic inequalities are to be arranged so that they are both (a) to the greatest benefit of the least advantaged and (b) attached to offices and positions open to all under conditions of fair equality of opportunity.⁴⁹

In contrast to Rawls but also very compatible with a social work ethic is Alan Gewirth's theory of human rights based on reason. In his principle of Generic Consistency, Gewirth maintains that certain generic rights such as the right to well-being and the right to liberty are the necessary goods of human action and the universal entitlements of all people. Because of man's rationality, these rights are formal and inherent in all. Gewirth suggests an hierarchy of rights, basic rights such as the right to well-being, then non-subtractive rights such as the right not to be lied to, and finally additive rights such as the right to self esteem.⁵⁰ Gewirth's formulation of prioritizing rights seems

49

John Rawls, A Theory of Justice (Cambridge: Harvard University Press, 1971), p. 75.

50

Alan Gewirth, Reason and Morality (Chicago: University of Chicago Press, 1978), pp. 55-56.

particularly relevant to a social work profession which often is faced with the ethical dilemma of two conflicting rights.

NASW Code of Ethics

While John Rawls' theory of distributive justice and Alan Gewirth's principle of generic consistency seem appropriate to the development of a social work ethic, neither of them address social work as a profession specifically. The professional organization of social workers, the National Association of Social Workers developed a Code of Ethics in 1980, the preamble of which states:

Is intended to serve as a guide to the every-day conduct of members of the social work profession and as a basis for the adjudication of issues in ethics when the conduct of social workers is alleged to deviate from the standards expressed or implied in this code. It represents standards of ethical behavior for social workers in professional relationships with those served, with colleagues, with employers, with other individuals and professions, and with the community and society as a whole.⁵¹

The Code of Ethics describes the social worker's ethical behavior in terms of six major areas:

1. The social worker's conduct and comportment as a social worker

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NASW Code of Ethics (Adapted by 1979 Delegate Assembly, effective July 1, 1980.

- A. Property
 - B. Competence and professional development
 - C. Service
 - D. Integrity,
 - E. Scholarship and research
2. The social worker's ethical responsibility to clients
 - A. Primacy of client's interests
 - B. Rights and prerogatives of clients
 - C. Confidentiality and privacy
 - D. Fees
 3. The social worker's ethical responsibility to colleagues
 - A. Respect, fairness, and courtesy
 - B. Dealing with colleagues' clients
 4. The Social worker's ethical responsibility to employers and employing organizations
 - A. Commitments to Employing organizations
 5. The social worker's ethical responsibility to the social work profession
 - A. Maintaining the integrity of the profession
 - B. Community service
 - C. Development of knowledge
 6. The social worker's ethical responsibility to society
 - A. Promoting the general welfare.⁵²

Although more specific than the earlier code (1967), the 1980 NASW Code of Ethics, like other professional codes, lists only general principles, not specific rules for making ethical decisions.⁵³ Good-bad decisions which involve a choice between

52

Frank Lowenberg and Ralph Dolgoff, Ethical Decisions for Social Work Practice (Itasca, Illinois: F.E. Peacock Publishers, 1982) pp. 113-114.

53

ibid., p. 15.

one course of action that is good, moral or correct and another that is the opposite is the only kind of ethical decision that can be controlled to any extent by a code of ethics. Even then, conflicting values are sometimes present and few if any of them can be considered absolutes.⁵⁴

Ethical Assessment in Social Work

Most ethical decisions in social work, however, involve a choice between two courses of action that are potentially good, although in different circumstances. A decision must be made between two contradictory goods, both of which can not be attained. The social worker must decide on a greater and lesser good.⁵⁵

How is the social worker to be guided in making ethical decisions? First, a professional social worker should try to apply the Code of Ethics in the following way:

1. What guideline in the Code of Ethics can be used?
2. If more than one guideline seems to be applicable, are the guidelines in conflict?
3. If several guidelines are in conflict, what should receive priority?

54

Alan Keith-Lucas, "Ethics in Social Work," Encyclopedia of Social Work (Washington, D.C.: NASW, 1977), p. 350.

55

ibid., p. 350

4. If the act is not covered by the Code of Ethics, what are the implications of using informal guidelines (unofficial mores of the profession) or criteria based upon the tenets of one of society's variant religious, philosophical, and/or value orientations (including the worker's or the client's) as the basis for action?⁵⁶

In making an ethical assessment a social worker might ask the following questions:

1. Who are the actors involved? What are their history and involvement in the situation?
2. What is the proposed action or actions?
3. What is the setting or context of the proposed action?
4. What is the intention or purpose of the proposed action?
5. What are the probable implications or consequences of the proposed actions?
6. Decision ...Who should decide?
7. For whom is the decision being made?
8. What criteria should be used?
9. What degree of consent by the client is needed?
10. What moral principles are enhanced or negated by the proposed course of action?(self-determination, truthfulness, justice, fairness)⁵⁷

⁵⁶

Harold Lewis, "Ethical Assessment," p. 22 of manuscript credited to Callahan, Bok, and Levy (Footnote #11)

⁵⁷

M. Aroskar, "Anatomy of an Ethical Dilemma: The Theor," American Journal of Nursing 80:4 (1980), p. 660.

Two main methods of ethical assessments have been developed which social workers can use as guides in ethical decision-making. The more recent ethical assessment outline uses a consequential as well as a formalist analysis for difficult ethical dilemmas. A consequential analysis involves utilitarian, teleological reasoning in which actions are considered good because of their consequences. On the other hand, a formalist position favors deontological resolution in which certain kinds of action are assessed as inherently right or good as a matter of principle. Dean Lewis proposes the following schema for analyzing difficult ethical questions:

1. A consequential analysis should be carried out.
2. A formalist analysis should be carried out.
3. Where both analyses - the consequentialist and the formalist - suggest the identical choice to be preferred, act on the suggestion.
4. If the consequential analysis directly contradicts the formalist analysis, the formalist analysis should prevail, and provisions made to work at eliminating the influence producing the consequences.⁵⁸

While a social worker should thoroughly apply a consequential and a formalist analysis to ethical questions, ultimately the formalist analysis should take precedence. The social work principles which take precedence stem from Rawls' principle of distributive

58

Harold Lewis, "Ethical Assessment," Social Casework (April, 1984) pp. 209-210.

justice in which the needs of the most disadvantaged are stressed, as well as Gewirth's basic human rights of freedom and well-being.

Another approach to analyzing difficult ethical questions is to apply Gewirth's Principle of Generic Consistency which emphasizes basic human rights to well-being and freedom. Reamer suggests the following guidelines to making ethical decisions:

1. Rules against basic harms to life, health, food and shelter take precedence over rules against harms such as lying or revealing confidential information, or threats to additive goods, such as recreation, education and wealth.
2. An individual's right to basic well-being takes precedence over another individual's right to freedom.
3. An individual's right to freedom takes precedence over his right to basic well-being.
4. Individuals' rights to well-being may override laws and rules of voluntary associations in case of conflict.⁵⁹

It is noted that #2 must be applied only if the client's actions are voluntary and the client has knowledge of the consequences of the actions.

What is the nature of ethical conflicts which social workers frequently encounter in their professional practice? These conflicts can be described as either a conflict between two rights

⁵⁹

Frederic Reamer, Ethical Dilemmas in Social Service, pp. 76-79.

such as the client's right to confidentiality versus the rights of others for well-being; a right and a good, such as the client's right to self determination versus the good of his continued well-being; and two goods such as a client's interest versus that of a child or a client's needs versus that of society's.

Self Determinism versus Paternalism

Throughout social work education and practice, the client's right of self-determination has received the greatest emphasis. The NASW Code of Ethics delineates quite clearly under the social worker's ethical responsibility to clients that "the social worker should make every effort to foster maximum self-determination on the part of clients." Every beginning social worker in class-⁶⁰room and the field quickly learns the importance of self-determination as the primary right of the clients they service. Yet many ethical dilemmas in social work arise when the client's right to self-determination is questioned. When and under what circumstances will the professional social worker have to intervene for the client's own good, to protect the client from doing harm to himself or others? When is it appropriate to supercede the client's right to self-determination and made a paternalistic decision to promote the client's interest?

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NASW Code of Ethics, p. 2

It should be remembered that:

Paternalism, at its best, is a protective act helpful and necessary, but only when it represents the exercise of sanctioned authority... Most often paternalism is invoked as a protective measure, to assure those unable to exercise their liberty and rights that their interests will not be abandoned. Minors, the frail elderly, the severely handicapped, the mentally limited, the poverty stricken, these are typically the recipients of social services who evidence attributes that suggest possible vulnerability if left to their own judgments. Without guidance in making rational and reasonable choices, their own interests would be placed in jeopardy.⁶¹

The social worker frequently makes a paternalistic intervention in working with a client that is judged to be not competent to make decisions in his own behalf. Social work decisions which counteract the client's right to self determination should only be made after it is ascertained that 1) the client does not understand the possible consequences of his actions and 2) his behavior is life-threatening either to himself or to others.

Right to Confidentiality

Another basic right in social work is the right of confidentiality. This right relates to the vulnerability of the client in relationship to the more powerful professional.

⁶¹

Charles Levy, "Paternalism and the Social Work Practitioner," (October, 1984), p. 5.

As Levy notes:

Confidentiality, the responsibility of keeping within the relationship between social worker and client the secrets and confidences that the client shares with the social worker, is an ethical and at times a legal duty that is enforced to protect the client in view of the position he is placed in by his need for and recourse to the social worker's service.⁶²

The issues of client confidentiality have become more complicated with modern technology which allows many case records to be computerized and within easy access of a variety of people. Students are frequently instructed to advise clients that they will try to preserve confidentiality, but that they can not guarantee it. Also, as Reamer points out, "while clients generally have a right to confidentiality, there are instances when the rights other individuals have to freedom and basic well-being must take precedence."⁶³

The client's right to confidentiality is protected in legal proceedings. Licensed social workers in many states have the right to refuse to give testimony under the statute of Privileged Communication. If a client does not want confidential material to be disclosed in court proceedings, then the social worker

⁶²

Charles Levy, Social Work Ethics (New York: Human Service Press, 1978), pp. 97-110.

⁶³

Frederick Reamer, Ethical Dilemmas in Social Service, p. 120

is protected by the statute. In some cases, however, the court⁶⁴ may determine on its own what communication must be disclosed.

While the client has the right to confidentiality for most communications, this right may be superceded when the disclosure includes life-threatening material. If a client discusses with his therapist homicidal intent to harm another, the social worker is under legal obligation to warn the threatened party. In the Tarasoff case in California the psychologist was found guilty for not breaking the confidentiality of his homicidal patient and⁶⁵ warning the intended victim.

Conflict of Interests

A major area of current ethical conflict involves an ethical choice between two goods, that of the client's interest and another party. The child welfare system presents the most controversial example of this ethical issue in practice today as professional social workers often come into conflict with each other in advocating for what they perceive as the interests of their client who may be either the natural mother or her child in foster care. In clarifying these issues it is helpful to

⁶⁴

Suanna Wilson, Confidentiality in Social Work (New York: The Free Press, 1978), pp. 97-110.

⁶⁵

ibid., p. 116.

remember that client's issues are not static over time. As Dean Lewis indicates,

Clients' interests are the negotiated identification of clients' needs and desires, and are not a given, to be stated by clients or determined by workers. Through a process of helpful exchange, wherein clients needs and desires and available resources are considered, both parties, clients and workers, reach a practical and meaningful definition of clients' interests.⁶⁶

Thus, the social worker would want to carefully assess the needs, interests and competency of the natural mother. If ultimately the natural mother is not able to take care of her child, the social worker should be guided by the principle that "an individual's right to basic well-being takes precedence over another individual's right to freedom."⁶⁷ The child's right to an appropriate environment can supplant the mother's right to raise her own child if the latter appears not to be able to bring up a child.

Truth Telling versus Obligation to Agency

Truth-telling is usually considered an important ethical imperative and the client's right to the truth essential in developing a professional relationship built on trust. Gewirth considered not being lied to a non-subtractive good secondary to

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Harold Lewis, "The Client's Interest" (August, 1980), p. 4

⁶⁷

Frederick Reamer, Ethical Dilemmas in Social Service, p. 77

the basic good of well-being. There may be circumstances when lying is necessary, yet they must be very compelling, life-and freedom-threatening reasons. Using this analysis, most lies to the terminally ill become unethical acts.

Yet many hospitals have policies as to which professional is to share the diagnosis with client. This raises a familiar ethical dilemma as to what is a social worker's obligation to her client and what is her obligation to her agency. The Code of Ethics cites both duties which frequently compete with each other:

The social worker's primary responsibility is to clients.

The social worker should adhere to commitments made to employing organizations.

Using Gewirth's formulation of basic goods as primary to rules against harms such as violating agency guidelines, Reamer proposes that the individual's right to well-being takes precedence over rules of an agency. When faced with an ethical dilemma involving a social worker's responsibility to clients versus that of agencies, the first duty should take precedence.

Summary of Literature Review

In summary, a review of the literature indicates that professional ethics in general and social work ethics in

particular has always emphasized the professional's responsibility toward the vulnerable and relatively powerless client. Schools of higher education have included more frequently courses on ethics in recent years, and graduate social work schools are no exception. There is some theoretical works on the teaching of ethics, but little empirical research. Much diversity exists about the core values which social workers share which may partially explain the paucity of research in this area. There has been some research which has compared the values of students, field instructors, and faculty. This has suggested a division between faculty and field instructors which may lead to conflicted student education.

Even though field instructors are considered important partners in social work education, nevertheless no research has focused specifically on the values of these educators. The important role of field instructors in transmitting knowledge to social work students has been discussed in this literature review.

The concepts of values and ethics were defined and distinguished. Theories of applied ethics such as utilitarianism and formalism were also presented. The works of John Rawls with his theory of justice and Gewirth's theory of human rights were considered as particularly pertinent to a social work ethic. In 1980 NASW revised its Code of Ethics to govern the ethical decisions of social workers and different applications of this

Code were studied in this chapter.

Important ethical concepts for the social work field in general and this study in particular are self-determination, paternalism, confidentiality, conflict between interests, truth-telling, and responsibility to agency. It is generally accepted in social work practice that social worker should maximize self-determination for the client and minimize paternalistic intervention. Also, the professional's responsibility to her client takes precedence over her responsibility to the agency. This study focuses on how field instructors apply these ethical concepts to their professional practice.

CHAPTER III

METHODOLOGY

The purpose of this research project was primarily a descriptive one, to study field instructors' knowledge and application of ethical issues in their social work practice. It was hoped, however, that the research process in itself would increase the sensitivity of field instructors to ethical issues in their practice and enable them to convey better this important information to students they supervised.

The research design included three phases which were carried out from June, 1985 through December, 1985. The three phases can be described as:

Pretest	June-August, 1985
Questionnaires	October-November, 1985
Interviews	November-December, 1985

Pretest

During the pretest phase a questionnaire consisting of case vignettes about ethical issues and dilemmas in practice was distributed to three different social work populations. Case vignettes were used as this seemed the best method to study how field instructors actually understood and applied ethical concepts in their practice. For the pretest an objective multiple choice version of the questionnaire was utilized in order to provide more specific information about ethical decision-making among

social workers and insure that results could be tabulated with greater ease and accuracy. A copy of this questionnaire appears in Appendix 1.

This questionnaire was designed to include the variety of client populations and problem areas which social workers service. Battered women, homeless people, the dying, adolescents, the elderly, foster children, and mental health patients were all included as representative of client groups which social workers frequently encounter in their practice. Each case vignette presented an ethical dilemma in which the respondent was asked to choose between the rights of the client versus the rights of others or between the rights of the client versus a good such as the well-being of the client. A scale based upon the most commonly accepted social work ethic was also developed to use in the rating of completed questionnaires (Appendix 2)

A decision was made to use written case vignettes as case examples most closely resembles the actual practice situation. The method which even more closely replicates the actual practice reality that of videotapes was not feasible because of prohibitive expense and time involved in administration of this type of measurement instrument.

Yet there are definite research limitations to the validity of the case vignette method. First, subjects' responses may not

accurately reflect how they would actually behave when faced with a specific ethical dilemma. Their answers may reflect how field instructors believe they should act, not what they would actually do. The former emerges as even more of a possibility in a study of this type which measured new field instructors who might be particularly concerned about demonstrating their competency as field instructors at Hunter College School of Social Work.

A second limitation of the case vignette method is that with case vignettes it is not possible to include all details in a specific case example. The ethical decision-making of the field instructor is limited by the judgment of the researcher as to pertinent information in helping the subject arrive at his decision. Despite the disadvantages of the case vignette method, the utilization of this research method seemed the most feasible in ascertaining information about ethical decision-making among field instructors.

The three social work groups selected for the pre-test of ethical issues in practice were 1) social work students enrolled in a class on social work ethics taught by Dean Lewis at Hunter College School of Social Work, 2) professional social workers at Lutheran Medical Center Mental Health Program, and 3) a selected group of field instructors at Hunter College School of Social Workers.

Of the first group, 22 students out of a class of 25 completed the pretest questionnaire. This group was also given a follow-up instrument to ascertain identifying information and response to the questionnaire. Twenty students completed this follow-up instrument which is included in Appendix 3.

The second group selected to receive the questionnaire was the social work department at Lutheran Medical Center Mental Health Program. The total staff of seven professional social workers completed this questionnaire. All the seven social workers had M.S.W's, five were C.S.W's, and the total sample had from one to fifteen years post-Masters experience in the social work field. None of them had been or were field instructors.

The third group selected for the pretest were field instructors from Hunter College School of Social Work. Questionnaires were mailed out to 26 field instructors who would not be returning as field instructors for the next academic year. The decision was made to use retiring field instructors as 1) they had all had prior experience as field instructors and 2) this group would not be included in the project sample of 1985-1986 field instructors thus avoiding contamination of results. Of the 26 questionnaires mailed, eight completed ones were returned. The low return rate of 31 per cent might be accounted for by the low response rate to mailed questionnaires,

the fact that these field instructors were severing their connection with Hunter College School of Social Work field instruction department and also might be leaving their agencies, and that this study took place over the summer months, the peak time for vacations. The covering letter which accompanied this questionnaire can be found in Appendix 4.

The results for the three populations in terms of their responses to the questionnaire (Appendix 1) were summarized in the following table. For the first population of social work students, the highest agreement were for questions 5, 6, and 10 with 21, 18 and 18 respondents respectively selecting the same alternative. The highest D score (which meant writing in an alternative response) were for questions 4, 7, and 9 (15, 11, and 9 respondents respectively).

For the second population of practicing social workers there was highest agreement in response to questions 1, 5, 8, and 10 with the total sample selecting the same alternative. One can see that questions 5 and 10 also indicated high agreement among the social work student respondents. The D response from social work staff was minimal compared to social work students which may be related to differences between student role expectations and staff role time demands and expectations, as well as the circumstances under which the pretest was administered.

Table 1 - Responses to Pretest Questionnaire

	Social Work Students						Agency Social Workers						Field Instructors						
	a	b	c	d	Bl.*	bc	a	b	c	d	cd	ab	Bl.	a	b	c	d	cd	bd
Question 1	2	14	0	6	0	0	0	7	0	0	0	0	0	0	5	0	3	0	0
Question 2	1	0	14	6	1	0	1	0	5	1	0	0	0	0	0	5	2	1	0
Question 3	7	0	7	6	2	0	2	0	4	1	0	0	0	2	0	3	2	1	0
Question 4	0	1	6	15	0	0	1	0	4	1	1	0	0	0	0	4	3	1	0
Question 5	0	21	0	1	0	0	0	7	0	0	0	0	0	0	7	1	0	0	0
Question 6	1	18	0	3	0	0	1	3	2	1	0	0	0	1	6	0	0	0	0
Question 7	7	3	0	11	1	0	2	4	0	1	0	0	0	3	2	0	3	0	0
Question 8	0	14	0	6	2	0	0	7	0	0	0	0	0	0	6	0	2	0	0
Question 9	5	7	0	9	1	0	0	4	0	1	0	1	1	1	4	0	3	0	0
Question 10	0	18	0	2	1	1	0	7	0	0	0	0	0	0	6	0	1	0	1

*Bl. - blank

For the third group (field instructors) questions 5, 6, 8 and 10 indicated the highest agreement among respondents. (7, 6, and 6 responded similarly.) This was similar to the responses of social work students and agency professional social workers. (High agreement in answering questions 5, 6, and 10 for social work students and questions 1, 5, 8, and 10 for agency social workers.) The D factor was highest for questions 1, 4, 7 and 9. This was similar to the response to social work students in which the D factor was highest for questions 4, 7, and 9.

Collapsing the three populations yields the following table in terms of responses to specific questions:

Table 2 - Responses to Pretest Questionnaire

	a	b	c	d	Bl.	ab	bc	cd	bd
Question 1	2	26	0	9	0	0	0	0	0
Question 2	2	0	24	9	1	0	0	1	0
Question 3	11	0	14	9	2	0	0	1	0
Question 4	1	1	14	19	0	0	0	1	0
Question 5	0	35	1	1	0	0	0	0	0
Question 6	3	27	2	4	0	0	0	0	1
Question 7	12	9	0	15	1	0	0	0	0
Question 8	0	27	0	8	2	0	0	0	0
Question 9	6	15	0	13	2	1	0	0	0
Question 10	0	31	0	3	1	0	1	0	1

The 37 respondents were most likely to write in an alternative d response for questions 4, 7, and 9 (51%, 41%, and 35% respectively.) Prior to the administration of this questionnaire a scale for identifying high ethical practice was developed. (Appendix 2). High ethical practice was defined as the most appropriate social work ethical response and received a score of 10 on this scale. Excluding the d alternative from analysis and only examining choices selected by applying this table, 93% of the respondents answered Question 1 in accordance with high ethical practice, 50% answered Question 3 with high ethical practice, 82% answered Question 4 with high ethical practice, 97% answered Question 5 with high ethical practice, 82% answered Question 6 with high ethical practice, 55% answered Question 7 with high ethical practice, 93% answered Question 8 with high ethical practice, 63% answered Question 9 with high ethical practice, and 91% answered Question 10 with high ethical practice. Only questions 3, 7, and 9 provides sufficient spread in responses to allocate respondents into distinctive categories. The almost unanimous agreement of respondents on all other questions does not permit a similar use of responses to categorize the respondents. Given the responses to the pre-test, the researcher believed that the population to be studied in the project would respond similarly thus making it impossible to differentiate a high ethical, medium ethical, and low ethical

group in social work practice. Then it was decided to modify the research instrument by making the questionnaire more open-ended.

A major question emerged, did the respondents know and understand the ethical concepts which motivated their choice of a particular alternative. It might be possible to choose the correct social work intervention without much understanding of the ethical issues involved. While social work students often look to casework teachers and field instructors for concrete answers as to how to intervene appropriately in various social work situations, these teachers as educators aim to teach conceptually so that the student can learn guiding principles that can be applied to new, not previously experienced, case examples. In studying the ethical awareness of field instructors, one would want them to be able to choose appropriate interventions, and in addition, to understand conceptually the ethical issues and dilemmas surrounding their choices so as to convey better guiding principles to their students.

Furthermore, the comments from the questionnaire indicated that social workers had frequently encountered ethical issues and dilemmas in their practice. Yet the nature of these conflicts which perplex social workers remain somewhat obscure. What ethical conflicts have social workers found most difficult in their practice? Did these conflicts involve a good versus a right, a right versus another right, a good versus another good,

or two different interests? Were the social workers able to resolve these dilemmas or did they find them irresolvable? Even though social workers may know the appropriate action to take and be able to explain the reasons for their choice, they may not be able to follow through on their decision because of an external factor such as agency control. To ascertain more clearly what were specific issues and dilemmas which field instructors encountered in their practice and what if anything preventing them from acting on their ethical choices it was decided to introduce an in-depth interview phase as the final step of the research project.

As a result of the pretest phase, the questionnaire was modified into an open-ended format and a third phase which included in-depth interviews was introduced. While originally it was intended to have all research subjects complete Rokeach value and attitude scales, after the pretest results, a decision was made to eliminate these measurement instruments from the study. First, since the questionnaire was modified to an open-ended format which necessitated a longer time to complete, there was concern that subjects would not finish an additional two Rokeach measurement instruments. Secondly, the questionnaire in a multiple choice format did not distinguish between high, medium, and low sensitivity to ethical issues in practice, thus the use of a Rokeach measurement to ascertain where subjects were on a

conservative-liberal continuum to contrast with high, medium, and low sensitivity to ethical issues seemed superfluous to study. Nevertheless Rokeach's theoretical formulation of change occurring as a result of greater exposure and sensitization to problematic situations in which the respondent is conflicted, is still very pertinent to the overall purpose of this study.

Research Questionnaire Phase

The revised questionnaire which is included in Appendix 5 was distributed to the three classes for beginning field instructors at Hunter College School of Social Work. Each new field instructor is required to take this seminar in student supervision in conjunction with supervising students. These classes meet for two hours on a biweekly basis for a minimum of twelve sessions. This population was selected as a focus for study as 1) since they were beginning field instructors, it seemed most important to ascertain their understanding of ethical issues in practice and increase their sensitivity to these issues and 2) since the questionnaire was to be administered within the classroom, 100% response rate could be anticipated. The questionnaires were distributed in class and student field instructors were given approximately 30 minutes to complete the questionnaires. The three faculty members Dr. Reva Holtzman, Dr. Kay Davidson, and Dr. Elaine Marshack administered these questionnaires to their field instruction seminars in late October-early November 1985.

Twenty-one new field instructors completed the questionnaire in Dr. Holtzman's class, 20 in Dr. Davidson's class, and 18 in Dr. Marshack's. Thus, there are 59 subjects whose questionnaires were analyzed as part of this research project. One student, however, did not finish the section on identifying information thus the subject analysis only included 58 subjects, while the content analysis of the questionnaire is based on a sample of 59.

Sample Analysis

The subjects who completed this questionnaire were asked identifying information as to gender, age, ethnicity, social work method while in graduate social work school, current job title, years of professional practice post M.S.W., and years in present agency. (Page 7 of Appendix V) Fifty-eight instructors completed the identifying information section.

The distribution of the sample by gender is as follows:

Table 3

Gender of Field Instructor Sample

N = 58		
<u>Gender</u>	<u>Number</u>	<u>Percentage</u>
Male	17	29%
Female	41	71%

This is similar to the gender distribution of field instructor in general at Hunter College School of Social Work.

The age distribution can be described as:

Table 4

Age Breakdown of Field Instructor Sample

N = 58

Age	Number	Percentage
Under 30	15	26%
31-40	28	48%
41-50	10	17%
51-60	3	5%
Over 60	2	3%
Total	<u>58</u>	<u>100%</u>

The modal field instructor is between 31-40 with almost half of the sample (48%) falling within this range. In general, new field instructors tended to be young with the largest majority (92%) under the age of 50.

Examining the sample in terms of ethnic background indicated:

Table 5

Ethnic Background

N = 58

Ethnicity	Number	Percentage
White	46	79%
Black	5	9%
Hispanic	5	9%
Oriental	0	3%
Other	<u>2</u>	<u>3%</u>
Total	<u>58</u>	<u>100%</u>

Table 6Social Work Method

N = 58

Method	Number	Percentage
Casework	50	86%
Groupwork	3	5%
Administration	2	3%
Community Organ.	2	2%
Casework/Groupwk.	<u>1</u>	<u>2%</u>
Total	58	100%

The largest majority of field instructors in this sample (86%) were caseworkers. Most field instructors are involved in supervising casework students and the questionnaire as designed addressed primarily ethical issues and dilemmas in casework practice.

The field instructors who took part in this study described themselves in the following way:

Table 7Current Job Title

N = 58

Title	Number	Percentage
Practitioner	34	58%
Supervisor	10	17%
Administrator	4	7%
Combined	9	16%
Other (Private)	<u>1</u>	<u>2%</u>
Total	58	100%

It is interesting to note that the majority of field instructors in this sample (58%) describe themselves still as practitioners even though in their role as field instructors, they are functioning in a supervisory capacity. Sixteen percent of the sample or 9 field instructors described their employment as combining different roles such as practitioner and supervisor or supervisor and administrator.

Field instructors listed their post-Masters experience as follows:

Table 8

Years Experience Post M.S.W.

N = 58

Years experience	Number	Percentage
3-5 years	34	59%
6-10 years	21	36%
11-15 years	1	2%
Over 15	<u>2</u>	<u>3%</u>
Total	58	100%

Three years of post-M.S.W. experience is necessary before a social worker can take the field instruction seminar at Hunter and assume responsibility for supervising a student. The majority of field instructors in this sample (59%) have the minimal or slightly above the minimal required experience (3-5 years). Ninety-five percent of the sample have 10 years or

less experience. It appears that most field instructors sampled, begin to supervise students within ten years of receiving their M.S.W.'s.

An examination of years spent in the agency indicated the following:

Table 9
Years in Agency
N = 58

Years	Number	Percentage
Under 3 years	26	45%
6-10 years	19	33%
Over 10 years	3	5%
Total	58	100%

Almost half of the sample (45%) had spent less than three years in the agency in which they had now taken on supervisory experience. Many of them listed only 6 months or a year in the current agency which suggests that they may have changed jobs in part because of the opportunity it provided for a new student supervisory experience and the possibility offered for advancing one's career. Very few field instructors (only 3%) have had over 10 years experience in the agency in which they are currently employed.

The typical field instructor in this sample is a white female between the ages of 31-40 whose method is casework, job

title is practitioner, and who has had only 3-5 years post M.S.W. experience and has been at the current agency less than 3 years. The field instructor in this study has had minimal social work experience post M.S.W. which may affect their understanding of ethical issues in the field and consequently their transmittal of this information to their students.

The final question in the identifying information section asked the respondents if they felt that the questionnaire had increased their sensitivity to ethical issues in social work practice. If the questionnaire had, they were asked to describe how? If not, they were asked to specify why not. The majority of the respondents (50 or 86%) gave positive responses to this question. Those who responded in the negative related that they were already familiar with the issues the questionnaire raised or they felt the vignettes were too simplistic while cases from their actual practice had more extenuating circumstances.

Research Design

As discussed previously, the questionnaire (Appendix IV) was distributed to all three classes for new field instructors at the Hunter College School of Social Work. Fifty-nine subjects completed and returned the questionnaires. The responses were analyzed in terms of specific answers to questions. Also a content analysis was done on the open-ended questions as to ethical issues

In practice and explanations as to specific interventions. The multiple choice responses and the categories identified in the content analysis were then compared. Finally, the multiple choice and the discussion questions were analyzed in terms of the identifying information variables of the sample. Further discussion of the research findings for the multiple-choice interventions, ethical issues identified, comparison between the two, and relationship between this data and identifying information can be found in the following chapter.

Interview Phase

The final phase of this project consisted of in-depth 45-minute interviews with ten of the field instructors who had been surveyed in the second stage of the project. The sample of field instructors selected for interviews was a purposive one. The intention was to interview field instructors from a variety of agencies about specific ethical issues and dilemmas they had encountered in their practice, how they had been resolved, if their ethical choice had been impeded, and what could have helped them resolve these dilemmas.

The field instructors were selected from lists of field instructors in the three supervisor seminars. All had completed questionnaire in phase 2 of the study, but their specific questionnaire responses were unknown to the researcher. Each

interviewee was told that he/she had been selected for an in-depth interview about ethical issues and dilemmas they had encountered in their specific practice and agency. The confidentiality of these interviews was stressed, in order to permit the field instructor as much freedom as possible in discussing controversial, difficult ethical dilemmas. The autonomy of the interviewer was emphasized, as there was concern that respondents would be inhibited in their discussion if they felt the researcher was affiliated with the Hunter College School of Social Work. This was especially crucial as those interviewed were all first time supervisors who were most concerned about succeeding as field instructors at Hunter College School of Social Work.

The sample of field instructors interviewed was as follows:

<u>Gender</u>	<u>Ethnicity</u>	<u>Method</u>
Male 2	White 8	Casework 8
Female 8	Black 1	Administration 1
	Hispanic 1	Comm. Organ. 1

Four of the field instructors interviewed had over 5 years post-MSW experience; six had less than five years. The interviewed field instructors had similar characteristics to the larger sample.

The field instructors interviewed worked in a variety of settings including an outpatient mental health center affiliated with a general hospital, a free-standing mental health clinic, an

inpatient adolescent unit, two agencies which provide social services for the elderly, a foster care agency, community organization department of the state mental health system, a New York City public relations government agency, a parochial school, and an inpatient neurology ward in a general medical hospital. All but one of the interviews were conducted at the field instructors' agency. Those interviewed were generally cooperative and seemed cognizant of and prepared to discuss ethical issues and dilemmas which had arisen in their agency practice.

Those interviewed were asked the following questions:

1. What were their reactions to the questionnaire?
2. Did it increase their sensitivity to ethical issues in practice? If so, how? If not, why not?
3. What was the most difficult ethical issue and dilemma that they had encountered in their practice?
4. How was it resolved? Did they feel that their supervisor/agency was supportive?
5. What other ethical issues and dilemmas had they had in their practice?
6. How was it resolved? Did they feel that the supervisor/agency was supportive?
7. Were they ever impeded in acting according to their ethical decision? By what and how were they impeded?
8. Did their agency have an ethical review board? Did they feel that a committee of this type would be helpful in resolving ethical issues?
9. What were their reactions to supervising students?
10. How long had they been professional social workers?

The ten interviews are outlined in Appendix 6. Those interviewed seemed prepared with ethical issues and dilemmas they had thought about prior to the researcher's visit. In the initial phone conversation all interviewees had been told that they would be questioned about specific ethical issues and dilemmas they had encountered in their practice. The two non-caseworkers in the interview sample both commented on the casework orientation of the questionnaire. Although the interviewees spoke fairly readily and candidly about ethical issues they had encountered in practice, the researchers thought that those interviewed were somewhat guarded, possibly because they felt that the interview was to be utilized to make a judgment about their competency as field supervisors. (This occurred despite the researcher's discussion of her independence from the school.) Even if the interviewees felt that the researcher was separate from Hunter Field Instruction Department, there may have been some reluctance as beginning field supervisors to share completely their ethical dilemmas with a more experienced clinician and supervisor. The findings from these in-depth interviews are discussed in great detail in the next chapter.

CHAPTER IV
DATA ANALYSIS

Analysis of Questionnaires

Fifty-nine field instructors enrolled in three classes for new field instructors completed the ten case vignette questionnaire. For each case vignette, the respondents were asked to select the specific intervention which they would utilize, as well as describe the ethical issues which the example presented.

The first case vignette with the numbers and percentages of each response is as follows:

1. Mrs. S. who has been your client for the last two years confides that she has decided to return to her estranged spouse and try once more to save her marriage. The client has been physically abused on several occasions once even requiring emergency treatment for a broken arm. Last month she separated from her abusive, alcoholic husband and moved into a shelter for battered women.
 1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved, which of the following interventions would you utilize?
 - a. Advise Mrs. S. to remain in the shelter as her life is in danger if she returns to her spouse
 - b. Discuss consequences of returning to her spouse versus remaining in the shelter and allow Mrs. S. to make her own decision.
 - c. Tell the client that she should return to her husband if this is her wish.
 3. Explain the reasons for your choice based on the ethical issues you have identified.

	<u>Number</u>	<u>Percentage</u>
Response a	5	8%
Response b	54	92%
Response c	0	0

The first case vignette demonstrated a conflict between a right and a good, between the client's right to self-determination versus a paternalistic intervention to promote the good of her own safety and well-being. The client, battered woman, represents a population of increasing social work concern in recent years.

Of the three responses the a response represents the extreme paternalism point of view, that concern for the client's safety should take precedence over the client's right to self-determination. With a paternalistic intervention there is always the implicit assumption that the client is not competent to make her own decision, thus the social worker must exercise her authority based upon her professional expertise. Only five field instructors or 8% of the total sample selected this paternalistic response.

The second or b response illustrates an understanding of both the paternalistic and self-determination issues involved in this case vignette, but an ultimate choice of self-determination. By discussing the consequences of returning to her spouse, the social worker would raise the paternalistic concern for the

client's safety, yet as this option was not life-threatening (given what information there is in this case vignette) the final decision would be for self-determination. The most widely accepted social work ethic is that the right to self-determination should take precedence over a paternalistic intervention except if to exercise the former right would be life-threatening.¹ Fifty-four field instructors or 92% of the sample selected this option.

The third or c response "tell the client that she should return to her husband if this is her wish" represents the ultimate self-determination, the response which extreme libertarians such as John Stuart Mill and Thomas Szasz would no doubt select.² It is interesting to note that none of the field instructors chose this option which suggests that for this sample all social workers studied, believed that a paternalistic concern for a client's well-being must be considered in resolving an ethical conflict between a right and a good.

While most (92%) of the sampled field instructors selected the intervention which seemed most appropriate to the widely accepted social work ethic that the right to self-determination

¹ Frederick Reamer, Ethical Dilemmas in Social Service (New York: Columbia University Press, 1982), p. 78.

² See John Stuart Mill, "On Liberty" in Utilitarianism, Liberty and Representative Government. London: Dutton, 1948.
Thomas Szasz, Law, Liberty, and Psychiatry (New York: Collier Books, 1963).

should take precedence over a paternalistic concern for safety except if to exercise the former would be life-threatening, their ultimate understanding of the ethical issues involved could not be fully ascertained by a multiple choice format. Field instructors should not only be able to suggest to their students appropriate interventions in ethical dilemmas, but also be able to explain to their students' ethical concepts which influenced their decision about appropriate interventions. This transmittal of ethical concepts is most important in social work field instruction as we want our students to be able to apply ethical concepts to new and different case examples.

Toward this goal the questionnaire was modified after the pretest to include open-ended questions which asked the field instructors to identify which ethical issues were pertinent for the case vignette and how these issues influenced their choice of intervention. The answers supplied to questions 1 and 3 for each case vignette were analyzed and divided into the following categories: Multiple, Client Right, Paternalistic Good, Other Interest, and Alternative Response. The field instructors who identified multiple, often conflicting ethical issues in a specific case vignette such as right to self-determination versus concern for safety, interest of client versus interest of another party, or right to confidentiality versus well-being of other were categorized as understanding multiple issues. Those field

Instructors who described the ethical issues only in terms of a client's right to self-determination, confidentiality, right to know, client interest in terms of well-being or as parent, were classified as being aware of client issues. Respondents who described ethical issues in terms of paternalistic concern for client's safety and questions in regard to client's competency were placed in the "paternalistic good" category. Those who discussed ethical issues in terms of the interests of others than the client, the well-being of children, parents, threatened parties, agencies, or society were characterized as providing "other interest" responses. The "alternative response" category was used when the field instructor's answer did not cite the ethical issues involved but rather rephrased the case vignette or suggested only the appropriate concrete intervention.

An analysis of Question 1 in terms of these categories yielded the following table:

Table 10 - Question 1 - Issues

	Number	Percentage
Multiple Issues	21	36%
Client Issues	19	32%
Patern./Safety Issues	9	15%
Alternative Issues	10	17%

Twenty-one or 36% of the respondents identified multiple issues, the client's right to self-determination versus the paternalistic concern for client's safety in the first case vignette. Examples

of responses classified as understanding multiple issues are as follows:

The right to make her own decision (self-determination) vs. the welfare of the client in terms of safety - If the client is fully aware of the decision she is making and the consequences of that decision, it is her right to determine the course of her life.

Client self-determination vs. temptation to dictate that she not return for her own safety - It would be unethical (and probably impossible anyway) to dictate to the client that she should not follow a course of action on which she has decided. It also, however, would be unethical not to discuss with her the physical dangers involved in her decision.

Nineteen or 32% of the respondents identified the ethical issue primarily in terms of the client's right of self determination.

Examples of client self-determination responses are as follows:

Client can/should ultimately make own decision - Client has decision-making power

Whether the worker should interfere with client's right of self-determination by strongly advising the person not to go home - Since in the end it is patient's decision, worker should not advise one way or the other but one should help the person to look at the whole situation.

Nine or 15% of the respondents identified the issue as a paternalistic concern for client's safety. Typical responses in this category were:

Value of physical well-being - If it seems client can't separate and is in danger would then insist she not return.

Mrs. S. being physically abused - placing her life in danger - worker's responsibility to the client

None of the respondents identified interests of others such as the estranged husband as significant ethical issues in this case example. This may be attributable to the client rather than family centered focus of most social work practice or the profession's propensity for advocating primarily for the identified victim.

Ten of the respondents or 17% of the sample did not identify the ethical concepts involved but rather rephrased the vignette or suggested a concrete intervention. Typical alternative responses are as follows:

Should she go back with alcoholic husband or should she struggle in the shelter and try to improve herself from there

How forceful to be in counseling against her moving back

For Question 1 the responses to the multiple choice question was then analyzed in terms of the categories previously discussed and the following table developed:

Table 11 - Question 1 - Responses/Issues

	Multiple		Client		Paternal		Alt.	
	#	%	#	%	#	%	#	%
Response a	1	2	1	2	2	3	1	2
Response b	20	34	18	31	7	12	9	15

Five respondents selected response a which was the extreme paternalistic choice in terms of safety, "advise the client to remain in the shelter, as her life is in danger if she returns." Yet only two respondents described the issue in terms of a paternalistic concern for client's safety and well-being. Most

respondents (54) had chosen the b response, "discuss consequences of remaining in the shelter versus returning to her spouse and allow Mrs. S to make her own decision," an intervention choice which indicates a consideration of both self-determination and paternalist issues, but an ultimate self-determination decision. In describing the issues which influenced their decision, only 20 or 34% of the sample discuss multiple issues, while 43% (31% client and 12% paternal.) only relate unilateral issues. There is some indication that although field teachers may select the appropriate intervention (Response b - 92%), most of them may not be able to articulate the multiple ethical issues influencing their decision. (Only 36% discussed multiple issues in their response.) Of particular concern is the 10 respondents or 17% who had an alternative response and did not discuss even one ethical issue influencing their intervention decision.

Homeless Client: Self-Determination versus Paternalistic Well-Being

Like the first case vignette, the second case example also raised the ethical issues of client self-determination versus paternalistic concern for well-being. The client now, however, is homeless, a client population of great public concern in recent years. In contrast to the battered woman of the first case vignette, there may be greater question as to the second client's competency to make judgments for herself. The second case vignette with the numbers and percentages for each response is

as follows:

11. A homeless woman known only as Sally lives on a street across from your agency. Sometimes staff members buy her coffee and bring her food. It is now summer, but she has multiple levels of clothing which she wears or discards, depending on weather conditions. You have spoken to her about the possibility of entering a shelter, but she appears very resistant to leaving her street corner.

1. What are the ethical issues involved in this case example?
2. Given the ethical issues which of the following course of action would you take?
 - a. Advise the police to bring Sally to a shelter or psychiatric hospital as her life is in danger
 - b. Tell Sally that she must go into a shelter
 - c. Inform Sally about housing alternatives, but ultimately allow her to make her own decision about whether she wants to remain homeless.
3. Explain the reason for your choice based on the ethical issues involved which you have identified.

	<u>Number</u>	<u>Percentage</u>
Response a	8	14%
Response b	2	3%
Response c	48	81%

The large majority of the field instructors, 48 or 81% of those who answered the questionnaires, chose an intervention which demonstrated concern for her safety, but ultimately opted for client self-determination (c). According to the widely accepted social work value, individuals should be permitted as much freedom as possible unless the exercise of this freedom would be

life threatening. Most of the respondents in the study seemed to be influenced by this value in selecting response 3 which supports self-determination of the client. One notes that it is summer; thus to permit the homeless person to remain outdoors is not life-threatening. Also no specific medical problems are cited in the case example which would require immediate medical attention because they were life-threatening.

One respondent or 2% of the total wrote in an alternative response other than the three delineated choices. Eight field instructors or 14% of the total selected the extreme paternalistic choice (a) which abrogated their role for direct contact with this client. These respondents may have been influenced in their choice by recent news coverage about the Mayor's policy of taking homeless people against their will to appropriate shelter facilities. A smaller number, two respondents or 3% of the total sample, believed that the social worker should assume an authoritarian, paternalistic role toward the client and insist that the latter go into a shelter. (b)

The responses to Question 2 (Part 1 and 3) were then analyzed and divided into different categories including multiple issues, client issue, safety-paternalism issue, and alternative issues. Responses in terms of client right to self-determination versus concern for safety were classified as multiple issues. Responses which described the issue as one of self-determination

were designated client issue. The responses which listed concern for safety of client were designated as safety-paternalism issues. Finally, the subjects who rephrased the question or suggested interventions were relegated to the alternative category. The following table for Question 2 was developed:

Table 12 - Question 2 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	16	27%
Client Issues	24	41%
Patern./Safety Issues	7	12%
Alternative Issues	10	17%
Blank	1	2%

Sixteen respondents or only 27% perceived the multiple issues of the homeless woman's right of self-determination, as well as a paternalistic concern for her safety. Typical responses of those who discussed multiple ethical issues were:

Her freedom of choice versus her health and well-being - need to be direct with her about advocating a shelter, but she should choose unless her life is in danger and she is incapable of making decision.

Unless in danger to self or others, Sally must make the decision herself - no information indicating serious psychopathology which is life-threatening, thus she must make the decision herself as informed as possible.

A larger number of field instructors (24 or 41%) interpreted the ethical issue primarily in terms of client's right to self-determination. Example of responses which stressed self-determination were:

Do you have the right to interfere with a life-style she seems to choose? - Sally may be severely limited in psychiatric or intellectual areas, but still she has a right to choose for herself

Do I have the right to convince or coerce her to go into a shelter as she has been functioning as she is?

A small number of respondents (7 or 12%) of the total identified the main issue as that of the client safety. The following respondents discussed the ethical issue in terms of paternalistic concern for safety:

It is my responsibility to determine, or ask for assistance in determining if she is capable of making sound judgments for her safety.

Deciding for an incompetent individual re safety - If she's incompetent and in danger, arrange for provision of housing.

Some field instructors answered this question by rephrasing alternatives or introducing a different type of ethical issue.

Examples of an alternative choice for Question 2 were:

Whether to force the woman into a shelter or allow her to remain on street

Whose responsibility, hers versus society values - society's responsibility for protecting the "helpless."

All in all, field instructors in responding to Question 2 stressed self-determination (41% as unilateral issue) as compared to multiple issues (27%) or safety issues (12%). It is interesting to note that field instructors stress self-determination for the homeless even given the current political and media context which favors a paternalistic point of view.

The responses to Question 2 were then compared to the ethical issues cited by the field instructors and the following table developed:

Table 13 - Question 2 - Responses/Issues

	Multiple Issues		Client Issues		Pater. Issues		Alt. Issues		Bla. Issues	
	#	%	#	%	#	%	#	%	#	%
Response a	2	3%	2	3%	2	3%	2	3%		
Response b	1	2%	1	2%	0	0	0	0	0	0
Response c	12	20%	20	34%	6	10%	8	14%	2	3%
Alternative	1	2%	1	2%	0	0	0	0	0	0

One might expect that those respondents who selected a or b responses which expressed a severe paternalistic approach and a moderate paternalistic approach respectively (a, have the police take client to shelter against her will and b, tell the client she must go into a shelter) would also have discussed paternalistic safety issues in their written answers. This did not occur, however, as the number of paternalistic issues discussed with response a (2) was similar to the number of respondents who raised multiple issues (2) or identified self-determination client issues (2). For response b the two field instructors who made this choice did not discuss paternalistic issues at all.

Forty-eight respondents or 81% of the sample selected the multiple choice response most in accordance with a client self-determination issue. In their answers to the discussion question

these field instructors also stressed unilaterally self-determination issues (34%) more than either multiple (20%) or safety paternalism issues (10%). Client self-determination appears as the most significant issue in working with the homeless for this sample of field instructors.

Right of Suicidal Patient - Self-Determination Versus Well-Being

The third case vignette indicated a conflict between the client's right to confidentiality and self-determination versus a paternalistic concern for safety and protection of life. Here the identified client is a potentially suicidal adolescent and the social worker is faced with the dilemma of how to intervene appropriately after hearing about suicidal intent. The case example with the numbers and percentage of each response are as follows:

- III. Your patient in a mental health clinic is very depressed after breaking up with his girl friend. John T. has not been attending college classes and has not been attending able to continue with his part-time job. He confides to you that he sees no reason to continue living and has bought a bottle of sleeping pills which he plans to take tonight.
1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved which of the following interventions would you recommend? Please circle your choice.
 - a. Inform the patient that he must go into a psychiatric hospital as he is acutely suicidal
 - b. Allow the patient to make his own decision about taking his own life.

- c. Discuss with the patient the possibility of voluntary psychiatry hospitalization.
3. Explain the reasons for your choice based on the ethical issues you have previously identified.

	Number	Percentage
Response a	22	37%
Response b	0	0
Response c	35	59%
(Those who selected none of the responses and wrote in an alternative)	2	3%

Each response can be viewed as a different choice along a self-determination versus paternalism continuum. The first response a indicates a choice which favors paternalism over self-determination. The assumption is that the client is unable to make his own decision and that the social worker must directly intervene for his own protection and safety. Twenty-two of the respondents or 37% of the total sample selected this intervention. The second choice "allow the patient to make his own decision about taking his life" indicates an extreme self-determination position. None of the respondents made this selection which would have been advocated by extreme civil libertarians in the mental health field. In contrast, all of the social work field instructors in this sample believed that the appropriate social work intervention must indicate at least some paternalistic concern for the client's safety.

The majority of the respondents (35 or 59%) selected

response c "discuss with the patient the possibility of voluntary hospitalization." This choice allows for the maximum of client self-determination, as the client will make a choice as to hospital admission. Concern for the client's protection and safety is also indicated in that the social worker is advocating voluntary hospitalization for the client's well-being. This choice represents the most commonly accepted social work position, that the social worker should permit as much self-determination as is possible, yet indicate a paternalism concern for the client's safety and protection, especially when the client's continued well-being or existence in general is threatened.

The responses to Question 3 (Part 1 and 3) were then analyzed and divided into different categories including multiple issues, client issues, safety-paternalism issues, and alternative issues. Multiple issue responses were those which indicated concern for the client's right of self-determination and confidentiality, as well as paternalistic concern for client's protection and well-being. Those responses stressing self-determination and/or confidentiality rights of the client were categorized as client issues. If a field instructor cited safety and protection of the client as significant issues, the response was considered to be a safety-paternalism one. If the answer to Part 1 and 3 only discussed an intervention or rephrased the case example, it was rated as an alternative issue response.

The following table for analyzing field instructors' responses to the open-ended questions for Case Vignette III was developed:

Table 14 - Question 3 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	13	22%
Client Issues	15	25%
Pater./Safe. Issues	5	8%
Alternative Issues	25	42%
Blank	1	2%

Less than a quarter of the respondents (22%) identified the multiple issues, those of client self-determination versus concern for safety, as pertinent to this case vignette. Typical responses for those who were categorized as multiple issues are as follows:

Freedom of will versus danger to client, self-inflicted

Individual right to decide on one's existence versus society's right to prevent suicide, to protect human life especially when such a solution permits no other position.

A quarter of the respondents (25% or 15 of the total sample) perceived the issue primarily in terms of client's rights to self-determination and confidentiality. Those field instructors answered in the following way:

Issue of confidentiality - Do you seek outside intervention (psych consult) and break confidentiality - Also self-determination, is it the patient's choice to take his own life?

Does a suicidal person have the right of choice?

A smaller number of respondents 5 or 8% of the total sample identified paternalism-safety issues as the most pertinent. A typical response which stressed safety-paternalism was:

Danger to client of suicide

Almost half of the sample (42%) suggested alternative responses such as:

Allowing John T. to follow through with his plan or trying to persuade him to do otherwise without having to mandate him to a psychiatric hospital

Whether to call the police and have John brought to a psychiatric hospital

The high alternative issue response (42%) is suggestive that field instructors when faced with a crisis often think in terms of an appropriate intervention without giving much consideration to the ethical issues behind their choice. While they may make the appropriate social work intervention (59% of total who selected response c), many of them (42%) do not articulate the ethical issues affecting their decision-making.

To summarize, field instructors seemed to stress self-determination (25%) slightly more than multiple issues (22%) in making an ethical choice with a suicidal client. A smaller percentage (8%) raised paternalism-safety issues with this type of client. Almost half of the sample (42%) did not really articulate any of the conflicting issues which this case example presented.

The responses to Question 3 were then compared to the ethical issues cited by the field instructors and the following table developed:

Table 15 - Question 3 - Responses/Issues

	Multiple Issues		Client Issues		Safety Issues		Alt. Issues		Bla.	
	#	%	#	%	#	%	#	%	#	%
Response a	3	5%	2	3%	2	3%	14	24%	0	0
Response b	0	0	0	0	0	0	0	0	0	0
Response c	9	15%	12	20%	3	5%	11	18%	1	0
Alternative	1	2%	0	0	0	0	0	0	0	0
Blank	0	0	1	2%	0	0	0	0	0	0

Those who selected the more paternalistic response a, that the social work should inform the client that he must go into a psychiatric hospital are about evenly divided as to their identification of ethical issues (3 for multiple issues, 2 for client issues, and 2 for safety issues.) Those who selected the choice which permitted more self-determination (response c) were more likely to list client issues (12 respondents) as compared to multiple (9 respondents) or safety (3 respondents) issues. Those who described an alternative write-in answer such as an intervention were more likely to select the a response which favored more paternalism than the c response which allowed for greater self-determination. (14 respondents for a choice, while 11 selected c choice among those who wrote in an alternative issue

answer.) One could speculate that those who selected the less preferred ethical choice (a instead of c) are slightly less cognizant of the ethical issues and choose in relation to an intervention rather than the ethical issues in conflict.

Duty to Report Potential Homicide?

Case Vignette IV represents a conflict between a client's interest and that of other parties. The client is a familiar one to social workers, a single parent who must cope with the financial and emotional difficulties of raising children alone. In this example her landlord contributes to her problems by failing to make necessary repairs and harrasing her for the rent. The question is posed, does she have the right to relate to the landlord in a life-threatening way. What is our obligation as social workers to report cases of threatened homicide to the police? To the intended victim? In the Tarasoff case discussed in the literature review the psychiatrist involved was indicted for not informing the victim of his patient's homicidal intent. The numbers and percentage of respondents who selected specific interventions as well as the case vignette in total is presented below:

- IV. Mrs. S. has had many problems trying to cope financially and emotionally with raising four children since her husband abandoned her six months ago. Recently, she has been most upset by her landlord who insists on receiving the rent on the first of the month (often her welfare check is delayed and she is unable to pay him), yet

refuses to repair falling ceiling plaster in the bedroom which threatens the safety of her children. This client confides to you that she has discovered a gun in the bottom of her chest which her husband left behind. She believes that the gun is loaded as her husband usually kept several loaded guns around the apartment which contributed to their marital discord. Now, Mrs. S. insists that she is "at the end of her rope" and that if her landlord hassles her one more time she will shoot him.

1. What are the ethical issues involved in this case example?
2. Given the ethical issues involved which course of action would you follow? Circle your preferred choice.
 - a. Discuss with Mrs. S. alternative ways of coping with her landlord, but disregard her threat as she has a right to self-determination of action.
 - b. Advise Mrs. S. that you must inform her landlord about her threat.
 - c. Try to ascertain the seriousness of her threat and if you believe that she will follow through on her intent advise her that you must inform her landlord.
3. Explain the reason for your choice based on the ethical issues you have previously identified.

	Number	Percentage
Response a	3	5%
Response b	2	3%
Response c	53	90%

(Respondents who did not circle a choice)	1	2%
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Only 3 respondents or 5% of the total believed that the client's right to self-determination should take precedence, choice #a. An even smaller number 2 or 3% of the total purposed a directive paternalistic approach which protected the landlord's interest

(response b). The largest majority of respondents chose the alternative which involved the client as much as possible in assessing the seriousness of her intent, but ultimately opted to protect the landlord in a life-threatening situation. Response c, which 90% of the respondents selected, seemed most cognizant of the appropriate social work ethical decision, as well as the legal implications of this case.

The open-ended responses to questions 1 and 3 for case Vignette IV were then analyzed and divided into the following categories; multiple which acknowledged client's rights to self-determination and confidentiality versus need to protect landlord's safety, client issues which stressed the client's rights to self-determination and confidentiality, other interests which emphasized primarily the interest of the landlord in terms of safety, and alternative choice which restated the example or suggested an intervention. The following table was developed:

Table 16 - Question 4 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	13	22%
Client Issues	12	20%
Interests of Others	9	15%
Alternative Issues	22	37%
Blank	3	5%

Slightly more (13 compared to 12) identified multiple issues as paramount in determining their choice. Examples of multiple issues are as follows:

Danger to another - confidentiality of client

Confidentiality of client versus responsibility to community to prevent homicide.

These explanations were considered to be primarily client issues:

Professional confidentiality

Confidentiality and self-determination

A smaller number of respondents (9 or 15% of the total) indicated interests of others such as the landlord's safety as crucial in their choice of intervention. Two examples of this choice are:

Must prevent this shooting - a death - no one has the right to shoot or kill anyone

Danger to others - have a responsibility to protect society if possible and the client from serious consequences

Thirty-seven percent or 22 respondents were classified as presenting alternative issue responses. It is interesting to note that so large a percentage of field instructors did not elaborate the issues in this crisis situation but instead reiterated the appropriate intervention or restated the question. Typical alternative issues responses were:

Whether to report this to the police

Explore her being at the end of her rope. That's the issue not the threat. Bring her back from the end of her rope to deal with the reality of her threat.

In summary, the largest number of respondents (22 or 37%) did not delineate key ethical issues which influenced their decision making. Again the data is suggestive that many social workers when confronted with an ethical dilemma are more likely to respond in terms of an appropriate intervention rather than to analyze the underlying ethical issues. The number of field instructors who identified multiple issues is similar to the number who addressed client issues (13 multiple issues as compared to 12 client issues.) In general, social workers seemed more concerned about client issues than those of the interests of others (only 9 or 15%).

Field instructors' responses to the multiple issues were then compared to the analysis of the ethical issues and the following table developed:

Table 17 - Question 4 - Responses/Issues

	Multiple Issues		Client Issues		Other Interests		Alt. Issues		Bl.a.	
	#	%	#	%	#	%	#	%	#	%
Response a	1	2%	1	2%	0	0	1	2%	0	0
Response b	1	2%	0	0	0	0	1	2%	0	0
Response c	11	19%	12	20%	9	15%	20	34%	2	3%

As one might expect, none of the respondents who selected response a, the ultimate self-determination choice, identified primarily interests of others as significant ethical issues. Even for response b which proposed a directive approach to preserve the interests of others (the landlord), neither of the two "b" respondents discussed interest of others as the most significant issues motivating their choice. Of those who selected c, which had involved the client in assessment, but also ultimately opted for the legal and ethical responsibility to preserve the life of others, the largest number of responses cited client issues (12 or 20% of sample.) A slightly smaller number (11 or 19%) selected multiple issues as key in determining their choice. The field instructors in this sample seemed concerned about client issues more than other interests (13 as compared to 9). Yet the largest number (22 or 38%) of the total did not articulate any key issue, but rather selected an alternative response, an intervention or reintegration of the vignette. Again it is suggested that in crisis situations social workers may think primarily in terms of intervention, rather than the ethical issues which influence decisions about interventions.

The Interest of Natural Mother Versus Child

Case vignette V focuses on a client with a history of mental illness and her desire to raise her child. What emerges is a conflict between interests of a natural mother to raise her child

versus that of a child to have an adequate environment with consistent mothering. The question is raised if the mother now is competent to raise her child and, given the nature of the mother's illness, what can be expected in terms of her future ability to care adequately for her child. This case example is particularly relevant as in recent years family courts frequently make decisions to have children permanently removed from natural parents because of the latter's mental illness and social workers who work in mental health clinics and child welfare agencies are frequently asked to participate in the decision-making process.

Case Vignette V and the number and percentages of responses to each alternative are as follows:

- V. Ms. W. is diagnosed as schizophrenic and has had multiple psychiatric hospitalizations in the last ten years. Last year she gave birth to a baby girl while in a psychiatric hospital. The child was placed in foster care and now the child care agency is proposing that the child be put up for adoption. Ms. W. is now out of the hospital and living in a half-way house with other recently discharged psychiatric patients. Currently she exhibits no acute psychotic symptoms, is cooperative about taking psychotropic medications, and has asked for your help in having her child returned to her.
1. What are the ethical issues involved which of the following interventions would you recommend? Circle your preferred choice.
 - a. Tell Ms. W. that because of her illness she will never be able to have her child returned.
 - b. Arrange with the child care agency to have visits between natural mother and child to further evaluate Ms. W. readiness to take care of her child.
 - c. Advise the foster care agency that in the natural mother's interest they should return the child as soon as possible to your client.

3. Explain the reason for your choice based on the ethical issues you have identified.

	<u>Number</u>	<u>Percentage</u>
Response a	1	2%
Response b	57	97%
Response c	0	0
(Respondent who wrote in alternative)	1	2%

The first listed response a represents an extreme pro-child interest approach. The assumption is made that because of the mother's mental illness she will never be able to assume care of her child. Only one respondent selected this option. The overwhelming majority of respondents (57 or 97%) chose the second response which advised extending the assessment process to further evaluate if the client would be able to take care of her child. The third response c represents an extreme pro-natural mother position, that her rights to her child are paramount and that the appropriate social work role is to advocate for her in this regard with the child care agency. Only one respondent made this choice. The response of field instructors to this question indicate that in conflicts between child and mother interests they prefer an option which would maximize the possibility of promoting the mother's interest, but still provide a safeguard to protect the child's interest.

The open-ended responses to Part 1 and Part 3 of the fifth case vignette were then analyzed and divided into the following categories: Multiple issues, client issues, other interests, and alternative issues. Those who described both the rights of the natural mother as well as the child interest in terms of an adequate upbringing were placed in the multiple issues classification. Those who stressed the interests of the natural mother client were considered to have client issue responses. Answers which pertained to a concern for the child and the adequacy of mothering by schizophrenic woman were considered to be other interests responses. Finally, those answers which enumerated an intervention or restated the case example were categorized as alternative issues.

The following table was developed:

Table 18 - Question 5 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	30	51%
Client Issues	10	17%
Child's Interests	7	12%
Alternative Issues	10	17%
Blank	2	3%

The majority of the respondents (30 or 51%) identified the key issues as multiple ones involving the interests of the natural mother client, as well as the child. Typical responses in this category were:

Mother's needs, rights as parent vs. child's needs and rights to adequate care and nurturance

Self-determination - who is the client, mother or child?
Best interests of the child, mother?

Ten respondents or 17% of the sample perceived this ethical dilemma primarily in terms of client issues. Typical answers of this type were:

Her right to her own child

Rights of natural mother to raise own child - Self-determination of client

A smaller number of field instructors 7 or 12% of the total identified the significant issues as primarily that of the child's welfare. Responses which were categorized as other interests were:

Will the child's psychological and physical well-being be harmed by the mother?

Safety of child is at risk

Ten respondents or 17% of the total either restated the question or proposed an intervention. Examples of this type were:

Should the child be returned to natural mother or stay in foster care?

Assessing the adequacy of mother during visits with child.

In general, the majority of respondents seemed cognizant of mother client's interests in this case example. (30 multiple plus 10 client = 40 total or 68%) A much smaller number stressed the child's interests 7 or 12%.

The categorized responses were then compared to the multiple choice answers for Case Vignette #5 and the following table was

developed:

Table 19 - Question 5 - Responses/Issues

	Multiple Issues		Client Issues		Child Interests		Alt. Issues		Bl.	
	#	%	#	%	#	%	#	%	#	%
Response a	0	0	0	0	0	0	1	2%	0	0
Response b	30	51%	10	17%	7	12%	9	15%	0	0
Response c	0	0	0	0	0	0	0	0	0	0
Alternative	0	0	0	0	0	0	0	0	1	2%

The only respondent who selected a listed response other than b related an alternative issue answer to the open-ended question. More than half of the respondents who selected b response explained their answer in terms of multiple issues involving both mother and child. Ten or 17% of the b respondents discussed client issues, while a smaller number (7 or 12%) stressed child interests. Fifteen percent of the total discussed alternative issues which is a much smaller percentage than for any of the preceding case vignettes. Field instructors seem to be more knowledgeable of issues involved in child-parent ethical dilemmas than with other client populations.

Advocate for Homeless Client?

Case Vignette 6 poses the dilemma of a homeless client who is denied agency service because of lack of income and residence. The question posed is what is our obligation to clients who need our services versus our obligation to agencies which employ us and are struggling to survive in an era of curtailed spending on

social services. The case example with the numbers and percentages to each multiple choice alternative is as follows:

VI. In the waiting room of your agency you witness that a homeless person is denied service because he cannot provide proof of residence or source of income.

1. What are the ethical issues involved in this case vignette?
2. Given the ethical issues involved which of the following interventions would you utilize?
 - a. Insist that the client be seen, as his needs should take precedence over administrative considerations.
 - b. Invite the patient into your office and refer him to an appropriate agency without residency requirements and then discuss with other social workers a possible policy change of intake procedures
 - c. Take no action, as such policies are necessary given the limited resources of the agency.

	<u>Number</u>	<u>Percentage</u>
Response a	8	14%
Response b	45	76%
Response c	0	0
(Respondents who listed an alternative answer)	5	8%
(Respondent who left the question blank)	1	2%

The first response a lists the most extreme client choice answer. Eight respondents or 14% of the total selected this choice. The majority of field instructors selected response b which involved making other arrangements to service the client and accepting the agency policy now, but making plans to change

the policy in the future. It is interesting to note that none of the respondents selected the c alternative which was the pro-agency choice. All the field instructors took the pro-client position as compared to the pro-agency. The five who suggested an alternative related that b was not possible as there were no agencies which would accept a client of this type and that this dilemma was irresolvable.

The open-ended answers to Part 1 and 3 of case vignette 6 were then analyzed and divided into the following categories: Multiple issues including client and agency interests, client issues which stressed that client service was paramount, agency interests which emphasized the importance of obligations to agencies, and alternative responses which restated the case example or cited interventions. The following table was developed:

Table 20 - Question 6 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	14	24%
Client Issues	19	32%
Agency Interests	4	7%
Alternative Issues	18	31%
Blank	4	7%

The larger number of field instructors (19 or 32%) of the total sample identified client issues as paramount in resolving the ethical dilemma posed by case vignette 6. Typical responses which stressed client issues are:

Client's right to service

The individual's right to services are being denied - professional concern to help those in need

A smaller number of field instructions (14 or 24%) cited multiple issues including client and agency interests as significant in this case example. Examples of those who cited multiple issues are:

Client's rights to receive service versus agency's administrative needs and values with limited resources

Agency policy versus immediate need

All in all, 56% of the sampled field instructors saw client interest as at least one of the significant issues in this case example.

A small number of field instructors (4 respondents or 7% of the total sample) perceived agency interests as paramount.

Responses which stressed agency interest were:

Whether to Intervene with agency policy

Organizations need to have requirements to insure need for services.

Eighteen respondents or 31% of the total sample listed alternative answers such as:

Should the client be seen?

The person is homeless, how is he to provide proof of residence or income?

In summary, the field instructors seemed much more concerned about client than agency interests. (56% as compared to

7%)

The multiple choice responses to case vignette 6 were then compared to the identified categories and the following table developed:

Table 21 - Question 6- Responses/Issues

	Multiple Issues		Client Interests		Agency Interests		Alt. Issues		Blank	
	#	%	#	%	#	%	#	%	#	%
Response a	1	2%	4	7%	0	0	2	3%	0	0
Response b	11	19%	15	25%	4	7%	16	27%	1	2%
Response c	0	0	0	0	0	0	0	0	0	0
Alternative	1	2%	0	0	0	0	0	0	0	0
Blank	1	2%	0	0	0	0	0	0	0	0

Of those field instructors who chose responses a which represented the most pro-client position the majority (4 out of 7) cited client issues as most significant in determining their proposed intervention. Those who chose response b and cited client interest as very significant were 25% of the total. Thirty-two percent of the total sample described client interest as most significant in terms of issues involved in this case example. Twenty-one percent of the sample discussed multiple issues of both client and agency interests, while only 7% of the sample focused on agency concerns.

Right to Know

The seventh case vignette focused on a terminally ill man who has not yet been told of the seriousness of his illness. In

conflict are the client's right to know versus the choice of others such as his family and doctor not to tell him. The case vignette with the numbers and percentages who gave each response is as follows:

VII. As a medical social worker in a large hospital you have been assigned the case of a 55-year old terminally ill man who has a prognosis of six months to live. He has not been told of the seriousness of his illness, but confronts you with the question "Am I dying?" Mr S. suspects that this is the case, because of the way his doctor and children are evasive when he asks questions about how serious his illness is.

1. What are the ethical issues involved in this case?
2. Given the ethical issues involved which of the following interventions would you choose?
 - a. Tell him the truth as gently and supportively as possible
 - b. Advise him to consult his doctor
 - c. Refrain from confirming his suspicion.
3. Explain the reason for your choice based on the ethical issues you have previously identified.

	<u>Number</u>	<u>Percentage</u>
Response a	20	34%
Response b	23	39%
Response c	5	8%
(Alternative response written in)	7	12%
Question left blank	4	7%

The largest number of field instructors believed that the appropriate intervention was to advise him to consult his doctor.

Twenty-three respondents or 39% of the total sample selected this choice. Several cited that this was accepted hospital policy that the doctor should tell the patient of his prognosis. A smaller

number of field instructors chose response a which is the response most in keeping with the client's right to know. Twenty respondents or 34% of the total sample chose alternative a. Very few field instructors (5 or only 8%) believed that the social worker should do nothing, response c. There were a number of write-ins (7) in which a conference with all involved parties was suggested to discuss the issue.

Part 1 and part 3 for case vignette 7 were then analyzed and divided into the following categories - multiple issues including the client's right to know, as well as the doctor's and family interest; the client's interest which focused on his right to know, other interests such as the doctor's and the family's rights of disclosure to the client, and alternative issues which restated the question or suggested an alternative. The following table with the numbers and percentages for each category was developed:

Table 22 - Question 7 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	7	12%
Client's Right to Know	34	57%
Other Interests (Dr. & Family)	4	7%
Alternative Issues	9	15%
Blank	5	8%

The majority of the respondents (34 or 57%) of the total sample stressed the client's right to know. Examples of this client-centered concern are:

Client's right to know about his prognosis

Patient has right to information about his illness

A smaller number of respondents (7 or 12%) of the sample considered the multiple issues involved in this case example:

Client's right to know the truth vs. the family's right and doctor's right to deal with the situation as they choose

Does client have the right to know he is dying? What should be family or doctor's role in this?

Only 4 field instructors or 7% of the total sample discussed only the interests of others. Two such responses were:

Family should be involved in whether to tell or not.

It is doctor's position to tell patient about illness.

Nine of the respondents or 15% of the sample suggested an alternative such as:

Would be hesitant to tell patient without doctor's consent

Should social worker tell the patient?

In summary, most field instructors seemed to be concerned about the client's right to know (34 respondents or 57% of the total sample.) This case vignette raised question as to what is the appropriate social work role in a medical setting and working with a terminally ill patient. Who should take responsibility for telling the truth to a patient? The social worker or the doctor?

The multiple choice responses for case vignette 7 were then compared to the responses in the above described categories and the following table was developed:

Table 23 - Question 7 - Responses/Issues

	Multiple Issues		Right to Know		Other Interests		Alt. Ints.		Blank	
	#	%	#	%	#	%	#	%	#	%
Response a	1	2%	12	20	1	2%	5	8%	0	0
Response b	4	7%	16	27%	0	0	4	7%	0	0
Response c	0	0	3	5%	1	2%	0	0	0	0
Alternative	2	3%	3	5%	2	3%	0	0	0	0
Blank	0	0	0	0	0	0	0	0	4	7%

Those who favored the alternative b "advise the patient to consult his doctor" seemed more cognizant of multiple issues (4 respondents) than those who thought the social worker should tell (1 respondent). This group who advocated the alternative of doctor consultation (alternative b) also interpreted the issue primarily as right to know. (16 respondents as compared to 12 for response a, right to know issue.) This is an interesting contradiction in that telling the patient to consult his doctor may abdicate the client's right to know if the doctor continues to avoid disclosing to the patient the true nature of his illness. Those who advised telling the patient (response a) when compared to those who advised consultation with the doctor (response b) were about equal in their discussion of alternative issues as most relevant. (5 for response a and 4 for response b). It is interesting to note that one of the respondents who believed that the social worker should take the responsibility for telling the client of his illness, stressed interests of doctor and family

(other interests) in her interpretation of her response.

In summary, there seems to be sharp division among field instructors as to whose role, the social worker's or doctor's, is the more appropriate one to convey to a client the seriousness of his illness. (20 believed that the social worker should tell, 24 advised that the doctor should take responsibility. In general the majority of field instructors sampled (57%) believed that the client had a right to know, regardless of whether the social worker or doctor should be the one to tell him.

Rights of Pregnant Adolescent

Case Vignette 8 raised the issue of the rights of adolescents. Can a pregnant teenager make a decision about having a baby or, because she is a minor, should the wishes of her parents prevail? What are the rights of a 14 year old minor, her parents, and her unborn child? The case example and the numbers and percentages for each multiple choice response are described below:

VIII You are working in a clinic which services adolescents and you have been assigned a 14-year old girl who has been playing hooky from school and staying out all night on frequent occasions. In your first interview with Sue B. she confides to you that she thinks she is pregnant and wants to keep her baby. She has not told her parents yet, but believes they will be most angry and force her to have an abortion.

1. What are the ethical issues involved in this case example?
2. Given the ethical issues, what alternative would you follow?
 - a. Advise her that given the situation an abortion would be the best decision

- b. Encourage Sue to have her parents come for a family session to discuss the problem and various alternative plans
 - c. Arrange immediately for the client to go to a home for pregnant teenagers, as she clearly wants to keep her baby
3. Explain the reason for your choice given the ethical issues you have previously identified.

	<u>Number</u>	<u>Percentage</u>
Response a	0	0
Response b	53	90%
Response c	0	0
Alternative intervention suggested	2	3%
Blank - no intervention circled	4	7%

The first response a presents an extreme paternalistic position. The implication is that the adolescent girl, because of her youth, as well as competency, is unable to make decisions for herself much less a new baby. Thus the social worker advocates that the client should have an abortion. None of the field instructors chose this alternative.

The majority of field instructors (90%) and all those who selected a specific response chose alternative b which proposed a family conference to discuss alternatives to coping with an unplanned adolescent pregnancy. This decision takes into account that an adolescent is still part of a family constellation, yet is given the opportunity for active planning on her behalf. None

of the respondents selected alternative c which seemed to grant the maximum of self-determination to the adolescent girl, but yet formulated a very directive plan of sending the girl to a shelter as a means of handling a family crisis. Two respondents preferred not to choose any delineated intervention but instead recommended more sessions with the adolescent to ascertain her competency as a possible parent and to receive medical confirmation as to her pregnancy.

The first and third parts of the case vignettes were then analyzed and divided into the following categories: Multiple which indicated that the field instructor was concerned about the interests of the adolescent girl, as well as her parents; client interests in which the needs and desires of the assigned adolescent client seemed paramount; other interests in which the wishes of the parents were stressed; and alternative issues in which the respondent restated the case example or presented an alternative issue. Those which stated the interests of the unborn child (there were two) were classified as other interests or multiple interests if more than that of unborn child was listed.

The following table was formulated to indicate the number and percentages of respondents who were classified in each category:

Table 24 - Question 8 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	25	42%
Client Issues	18	31%
Other Interests (Parent)	2	5%
Alternative Issues	8	14%
Blank	6	10%

As can be seen above, a large number of respondents (25 or 42%) identified multiple issues involving client and parent interests as pertinent to this case example. Examples of multiple issues are:

Rights of adolescent for self-determination versus rights of parents and newborn

Child's rights as a minor and parent's rights to know what their child is doing

The next largest number of respondents (18 or 31%) identified client issues as most significant. Typical responses of client issues were:

An adolescent has a right over her own body

Confidentiality of the adolescent

Two respondents suggested parent-fetus issues like the following:

A parent is responsible for a minor

The rights of the unborn child need to be considered

Fourteen of the sample or 8 respondents suggested alternative issues such as:

Should the adolescent have an abortion?

How does the social worker develop trust in the adolescent?

In summary, the social workers in this sample seem very sensitive to client issues and multiple issues for this case example. (73% of total population.) The field instructors seemed less concerned about the rights of others (parents and fetuses) than that of the client. (Only 2 or 3% of the sample raised these issues.)

The responses to the multiple choice questions for case vignette 8 was then compared to the categories identified and the following table developed:

Table 25 - Question 8 - Responses/Issues

	Multiple Issues		Client Issues		Other Issues		Alt. Issues		Bla.	
	#	%	#	%	#	%	#	%	#	%
Response a	0	0	0	0	0	0	0	0	0	0
Response b	24	41%	18	31%	2	3%	7	12%	2	3%
Response c	0	0	0	0	0	0	0	0	0	0
Alternative	1	2%	0	0	0	0	0	0	0	0
Blank	0	0	0	0	0	0	1	2%	4	7%

As discussed previously, almost all the respondents (90%) selected the b response. Of those 42% or 24 respondents cited multiple issues as motivating their choice. This result indicates very positive awareness of the multiple issues which affect ethical decision-making in social work practice. A smaller number of respondents (18 or 31%) perceived client interests as paramount in this case vignette. All in all, 72% of the population sampled cited the client issues as significant in their decision which is

indicative of the primary focus of social work ethics.

Self-Determination Rights of Frail Elderly

Case Vignette 9 presents the dilemma of an elderly man who wants to continue to live independently in the community, but there is question about his competency to do this. In conflict is his right to self-determination versus a paternalistic concern for his safety and that of others. As our population ages, social workers are called upon more and more to service this type of client.

The case example with the numbers and percentages of field instructors who selected specific multiple choice responses is presented below:

- IX. A 70-year old man with cardiovascular disease was recently discharged from the hospital after treatment for pneumonia. During the last year he has become increasingly forgetful. In fact the fire department was summoned last week when he left the gas on by mistake and a fire ensued. Mr. R. has always been a very independent man and is very reluctant to give up his apartment and move into a senior citizen residence.
1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved which of the following interventions would you select?
 - a. Help Mr. R. obtain home care services for eight hours a day as Mr. R. has the right to remain in his own apartment
 - b. Discuss with Mr. R advantages of residences and take him to visit several which have vacancies
 - c. Arrange for Mr. R to be admitted to a residence as soon as possible
 3. Explain the reason for your choice based on the ethical issues you have previously identified.

	<u>Number</u>	<u>Percentage</u>
Response a	22	37%
Response b	22	37%
Response c	3	5%
An alternative response was written in	7	12%
The multiple choice question was left blank	5	8%

Response a represents the extreme self-determination position in that the elderly client is allowed to remain as independent as possible with the use of home care services. Twenty-two field instructors or 37% of the total sample selected this response. An equal number of respondents (22 or 37% of the total sample) selected the b response in which the social worker seems to have made the paternalistic decision that the client should go into a residence for his own well-being. Yet the client is permitted as much freedom and self-determination as possible in selecting which residence he wants to enter. The field instructors in this sample are equally divided as to whether the client should remain in his own home with the help of day care services (22 respondents) or be encouraged to select a residence for his own well-being (22 respondents).

A small number of field instructors (3 or 5%) of the total selected the maximum paternalism response c in which the client is sent to a residence without much consideration of his needs and

desires. The 7 respondents who did not answer a specific response usually suggested a combination of responses. For example, several recommended both a and b, a as the short term goal of having the client cared for on a daily basis and b as the long term goal to have the client prepare to move into a residence, as often much time is required before placement in a senior citizen residence can be arranged. One respondent recommended that the client be given 24 hour home care services, but recognized that this was probably not feasible given limited home care services.

The responses to question 1 and 3 of case vignette #9 were then analyzed and divided into the following categories: multiple, which included those responses which stressed both self-determination of the client as well as concern for his safety and that of others in his building; client issues which focused on client's right to self-determination; paternalism-safety issues which cited the safety of the client and others as crucial; and alternative issues which reiterated the case example or suggested an alternative issue. The following table was developed:

Table 26 - Question 9 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	28	47%
Client Issues	6	10%
Safety Issues	16	27%
Alternative Issues	2	3%
Blank	7	12%

The largest number of field instructors (28 or 47% of the total sample) discussed the issues as multiple ones involving both the self-determination of the client, as well as a paternalistic concern for his safety. Typical responses which contained multiple issues were:

Does a person with decreased functioning have a right to determine where and how he lives or because of a life-threatening situation does society have a right to put him in a home and protect him?

Client's right to live as he wants or the danger he poses to himself or others in his building

The next largest number of respondents (16 or 27% of the total sample) stressed safety issues. Examples of a paternalistic safety issue response are:

Jeopardy to himself and his neighbors

Whether to force protective services on him - If the client has been diagnosed as having irreversible brain impairment he may place himself in acute danger without being aware of it

A smaller number of field instructors perceived the issue as solely that of client self determination. Examples from these 6 respondents or 10% of the total sample are:

Client has right to self-determination and social workers' role is to help him maximize this.

Client's right to self determination most important

All in all, the majority of field instructors (57%) identified client issues as at least one of the most significant issues in

this case example. Only half as many field instructors 27% perceived the issue primarily in terms of a paternalistic concern for the client's safety.

The multiple choice responses to case vignette #9 were then compared to the categories identified in the open-ended questions and the following table developed:

Table 27 - Question 9 - Responses/Issues

	Multiple Issues		Client Issues		Safety Issues		Alt. Issues		Blank	
	#	%	#	%	#	%	#	%	#	%
Response a	16	27%	2	3%	5	8%	0	0	0	0
Response b	10	17%	0	0	11	19%	0	0	2	3%
Response c	1	2%	1	2%	0	0	1	2%	0	0
Alternative	1	2%	3	5%	0	0	0	0	1	2%
Blank	0	0	0	0	0	0	1	2%	4	7%

Those who selected response a the choice which enabled the client to remain in his own home with the use of home care services and thus provided the maximum in self-determination were much more likely to identify the multiple issues in the case example. (16 respondents as compared to 10 respondents for response b and 1 respondent for response c.) Yet it is interesting to note that those who selected a response, the maximum self-determination answer were not as likely to cite client issues as safety issues. (two discussed client issues, while 5 discussed paternalistic safety concerns).

As one might expect, those who selected response b, the choice which made a paternalistic decision although maximizing self-determination, were less likely to cite client issues. (0 respondents for response b as compared to 2 respondents for response a in terms of client issues.) Interestingly enough one respondent who selected the most paternalistic response c which advised making immediate arrangements to have the client placed in a nursing home also cited client issues such as self-determination as most significant in this ethical dilemma.

In summary, almost half of the sampled field instructors (28 or 48%) cited the multiple issues of self-determination and safety as significant in this case example. The next major concern was that of safety (27% of the total sample or 16 respondents.) Emphasis on client issues was only 10 percent of the total sample. Those who selected response b which stressed concern for the client's safety as ultimate consistently emphasized safety issues in their open-ended answers (11 or 19% of sample) more so than field instructors who selected response a which was more client self-determination focused. (5 respondents or 8% of the total sample.)

Duty to Client Versus Responsibility to Society

The final case Vignette #10 presents the case of a client who confides to her social worker that she is cheating welfare

by having extra unreported income. The question posed is what is the social worker's obligation - to protect the confidentiality and self-determination rights of the client or to promote truth-telling and society's interests in preventing welfare fraud? The case example with the numbers and percentages to each multiple choice response is as follows:

- X. Mrs. C., one of your clients in a family service agency, reports to you that she has taken an "off the books" waitress job to supplement her welfare income. She does not plan to tell the welfare department, since she especially needs the extra income now with her twins graduating from high school this year.
1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved which intervention would you select?
 - a. Advise Mrs. C. to tell the welfare department as your responsibility to promote truth-telling should take precedence
 - b. Discuss with Mrs. C. the possible consequences of her action, but realize that the ultimate decision is hers to make
 - c. Tell the client that her action is completely appropriate given the meager benefits provided by the welfare department.
 3. Explain the reason for your choice based on the ethical issues you previously identified.

	<u>Number</u>	<u>Percentage</u>
Response a	3	5%
Response b	49	83%
Response c	2	3%
Alternative response was written	3	5%
This multiple choice question was left blank	2	3%

The majority of respondents (49 or 83% of the total sample) selected response b which involved discussing the possibilities of having the deception detected, but permitted the client to make the final decision as to whether to inform the welfare department. Only three field instructors or 5% of the total sample selected the a response which represented the extreme directive pro-society interest position. Similarly only a small number of respondents (2 or 3%) selected the extreme pro-client response c which would have been the choice of radical social workers. Most field instructors in this sample selected the middle position which represented neither the extreme pro-society or pro-client stance.

The responses to part 1 and 3 for case Vignette #10 were then analyzed and divided into the following categories: Multiple issues in which client needs as well as society interests were discussed; client issues in which client's needs were paramount; other interests in which societal values such truth-telling and preventing fraud were emphasized, and alternative issues in which an intervention was listed or a restatement of the question. The following table with numbers and percentages for each category was developed:

Table 28 - Question 10 - Issues

	<u>Number</u>	<u>Percentage</u>
Multiple Issues	11	19%
Client Issues	12	20%
Other Interests	2	3%
Alternative Issues	26	44%
Blank	8	14%

A large number of responses (26 or 44% of the total sample) were classified as alternative issues which involved either restating the question or listing an intervention. For this question field instructors seemed to have great difficulty identifying the issues previously described. Typical responses which were classified as alternative issues were:

Whether to inform welfare that Mrs. C. is working or insist that she inform them

What do I do with this information?

Field instructors who cited multiple issues as key in this case example (11) was about equal to the number of field instructors who emphasized client needs in their response. (12) 39% of the sample saw client needs as at least one area of significance in discussing the ethical issues involved.

Typical responses for those who stressed multiple issues were:

Defrauding welfare system versus client's needs

Confidentiality versus legal-societal responsibilities

Those who focused on client issues wrote:

Client needs income in order to live

Client needs are most important.

A small number of respondents (2 or 3% of the total sample) emphasized societal interests. Examples of these answers were:

Social worker by not intervening is condoning fraud

Client is not supposed to have additional income.

The multiple choice responses to case Vignette #10 were then compared to field instructors categorized answers to the open-ended questions and the following table developed:

Table 29 - Question 10 - Responses/Issues

	Multiple Issues		Client Needs		Society Interests		Alt. Issues		Blank	
	#	%	#	%	#	%	#	%	#	%
Response a	0	0	0	0	1	2%	2	3%	0	0
Response b	9	15%	12	20%	1	2%	23	39%	4	7%
Response c	1	2%	0	0	0	0	1	2%	0	0
Alternative	1	2%	0	0	0	0	0	0	0	0
Blank	0	0	0	0	0	0	0	0	4	7%

The respondent who selected response a, the most directive society interest response, also cited societal interests in his/her identification of significant issues. Of those who selected response b which emphasized client's self-determination, the largest number (12 or 20% of the total sample) also focused on client needs in their discussion.

Summary of Questionnaire Results

The results of the questionnaire distributed to the field instructors can be summarized in terms of response and content choice. Similarly to the pre-test, the majority of field instructors selected the same responses to specific questions. Most frequently, the field instructor would select the multiple choice response which permitted the maximum of client self-determination after the concern for client safety is discussed with the client. Client self-determination seems to be the most significant issue in influencing choice of social work intervention, even when the client is very vulnerable (the battered woman) or presents questions of competency (homeless woman and schizophrenic mother).

Field instructors definitely placed their client interests over that of others, yet they seemed to recognize the need to inform others if another life is threatened. While field instructors certainly perceive their client's rights to self-determination and confidentiality as more significant than duty to societal rules, they are less likely to break agency rules for someone who has not yet been identified as their client. While most respondents opted for the alternative of not insisting that the welfare mother tell welfare about her employment, they were very willing to send a homeless person elsewhere if seeing him was against agency policy.

Field instructors indicated the most diversity in responses to the case vignettes on the dying man's right to know and the elderly man who wished to continue living independently in the community. The field instructors were almost equally divided in their responses as to telling the client the truth versus advising him to consult his doctor. Those who worked in medical settings may have been influenced by agency's regulations about appropriate roles in terms of patient care. Similarly to the case in which the homeless man who did not meet agency requirements was referred elsewhere, field instructors may have chosen the response in the case of the dying man which is most closely allied with agency policy of doctors alone discussing patient prognosis. Field instructors usually opt for the client's rights, except when there is a discrepancy between client rights and agency policy. Field instructors seem reluctant to take the client advocate position against their agency.

For the elderly man who desired to remain independent, field instructors were about evenly divided between the ultimate self-determination choice versus the modified self-determination choice. With this case vignette as with the others, field instructors seemed to select the response which maximized the client's self determination. The only exception to this was when the client's right came into conflict with agency policy in which

case the field instructor usually opted to follow agency regulations.

When field instructors discussed ethical issues influencing their choices, they most frequently cited multiple or client issues. Respondents were very unlikely to discuss safety/paternalism or other interests as singular concerns. While the majority of the field instructors stressed multiple issues in their response, almost as many related only client issues in their discussion. This was particularly true in the question of the dying man's right to know in which the majority of the respondents cited the client's right to know as a singular issue. While field instructors are more likely to view an ethical dilemma from a multiple issue framework, a significant number of field instructors viewed the case vignette in terms of client issues only. While the multiple choice interventions indicated that often client issues were not promoted if they conflicted with agency policy, this was not evident in field instructors' discussion of issues in that very few cited agency policy as singular issues. Although field instructors may select the intervention which favors agency over client, they may be somewhat reluctant consciously or unconsciously to discuss the ethical dilemma in this way.

As one might expect, those respondents who selected the

strongest self-determination interventions were more likely to stress client issues in their explanation. They were less inclined to emphasize safety-paternalism issues. Also this group very rarely cited other interests only as significant issues. There seems to be much consistency between how field instructors would intervene in comparison with how they describe the issues involved, especially in terms of client issues.

Analysis of Variables

At the end of the questionnaire each field instructor was asked for background information. The questions included gender, age, ethnicity, social work method, current job title, years of professional practice post-MSW, and years in present agency. Fifty-eight field instructors completed this section, while 59 had answered the questionnaire.

Sex as Variable

There were 17 men and 41 women who participated in this study. Because of the limited number of men as compared to women percentages of each sex responding in a specific way are presented for comparison. Yet as the male sample is small, it should be remembered in the following discussion that 6% or 12% of the men when cited only means one or two male subjects, respectively

who selected a particular response.

For the first case vignette which involved the example of a battered woman, the men in the study were more likely to choose a response which advised the woman to remain in the shelter. (12% of men surveyed as compared to 6% of women.) On the other hand, women were more likely to choose the response which permitted greater self-determination for the client. (85% as compared to 71%). An examination of the categorized issues indicates that women in the study were more likely to interpret the ethical issues in terms of client self-determination (39%) as compared to the men of whom only 12% focused on client issues. Similarly women were more likely to focus on safety issues (19% of sampled women) than the men (6%). Conversely the males surveyed usually described multiple issues such as client self-determination and concern for client safety. (47% of the men sampled as compared to 31% of women sampled.)

For the second case vignette which involved a homeless woman the women surveyed were more likely to choose the response which focused on concern for the homeless person's safety as compared to the men. (17% of women sampled as compared to 6% of men.) Conversely the men sampled favored the response which permitted greater self-determination for the client. Furthermore, men were likely to focus on multiple issues as compared to the

women surveyed. (47% as compared to 17% women.) Yet women tended to emphasize safety concerns more than men (15% as compared to 6%).

For the third case vignette which described a suicidal young man both men and women field instructors made similar choices in terms of the multiple choice questions. Men sampled, however, tended to focus more on multiple issues (42%) than women (14%). Women on the other hand stressed more often client issues (27% as compared to 12% for men.)

For case vignette #4 men did not respond any differently than women to the multiple choice questions. Men, however, were more likely to identify the multiple issues in this case involving a potentially homicidal woman. (36% as compared to 19% of women.) Women in this sample seemed more concerned about the safety of the intended victim than did the men. (20% as compared to 6%.)

In the case example which described a schizophrenic woman and her infant child in placement there were no significant differences in how male and female responded to the multiple choice options. Yet in the content analysis of identified issues for case vignette #5 women seemed to be more concerned about the interests of the child than men who were studied. (17% women as compared to 0% men.)

For case vignette #6 men were more likely than women to choose the option of seeing the homeless client immediately (24% as compared to 7%), while women preferred to refer the client elsewhere, (85% women as compared to 71% men). Similar to preceding case vignettes men tended to focus on multiple issues (30% as compared to 19% women), while women concentrated on client issues (36% as compared to 24% men).

The case example which focused on the dying man's right to know indicated a slight preference of men for telling the patient the truth about his condition (47% men as compared to 41% women), while women more frequently selected the alternative of advising him to consult with his doctor. (46% women as compared to 35% men.) Field instructors described ethical issues for this question similarly regardless of gender.

Case vignette #8 presented the dilemma of a pregnant teenager and most respondents, both men and women, believed that a family conference was the appropriate social work intervention. (83% of the men sampled and 92% of the women.) There was a great discrepancy, however, in how males as compared to females discussed the ethical issues for this case vignette. 71% of the men sampled focused on multiple issues, while only 32% of the women did. In contrast, 41% of the women sampled concentrated on client's issues such as the adolescent right to confidentiality or

self determination while only 6% of the men sampled cited client issues as the most significant.

Women were more likely than men sampled to discuss the option of various residences with the elderly men in case vignette #9. (41% women as compared to 29% men.) For the content analysis men were more likely to focus on multiple issues (64%) than women (39%), while women concentrated more on safety issues for the client and others (39% women as compared to 12% men).

For the final case vignette both men and women answered similarly as to how they would intervene with a client who confided she was cheating the welfare department. Men were more likely to focus on multiple issues (35%) than women (9% of those sampled). Women, on the other hand, were slightly more likely to emphasize client issues. (22% for women as compared to 18% of men.)

The relationship of the variable gender to intervention choice and issues discussed can be summarized as follows: In general, women were more likely to choose the multiple choice response which promoted the client's right to self-determination unless the behavior of the client was life-threatening as with the suicidal patient or the support of the client against agency regulations or as with the homeless client wanting service or the dying man's right to know contrary to his doctor's wishes.

In terms of responses to essay questions men were more likely to list multiple issues, while women focused more on client issues. Also women were more inclined to discuss safety/paternalism issues for the homeless woman who lives on the street and the elderly man who might need to be institutionalized. Furthermore, women more often than men expressed concern for the safety of others like the threatened landlord or the child of the schizophrenic mother.

Most striking in an analysis of the ethical issues discussed related to gender is the finding that women focus more on client issues, while men emphasize to a greater extent multiple issues versus client issues as related to sex and other key variables can be found in Appendix 7. Women are much more likely to focus on client issues; also they seem to be much more concerned about the safety of others. How can this sexual differentiation of responses be understood? A social psychologist, Carol Gilligan, postulates that there are basic differences in how men and women interpret ethical dilemmas.³ The interpretation of the questionnaire responses as related to gender in terms of Gilligan's work is discussed in greater detail in the final chapter.

³ See Carol Gilligan, In A Different Voice (Cambridge: Harvard University, 1982.)

Age as Variable

The age distribution of the field instructors who participated in the study was:

30- Under	15
31-40	28
41-50	10
51-60	3
Over 60	2

To aid in the comparison of the age variable to responses on the questionnaire the age distribution was condensed in the following way;

30- Under	15
31-40	28
Over 40	15

Similar to the comparisons on gender, percentages are used with the different age categories to facilitate comparisons. Yet it should be noted that the 30 & under and the over 40 samples are small. Thus 7% or 13% of subjects 30 and under or over 40 would be only one or two subjects respectively.

For question one which focused on the case of a battered woman all age groups responded similarly in terms of the multiple choice of intervention. Those 30 & under, however, seemed to be more cognizant of multiple issues than either of the two other groups. (60% for 30-under group as compared to 33% for 31-40 or

27% for over 40 group.) Those over 40 seem to identify more often client issues as significant. (54% as compared to under 30 20% or 31-40 25%.)

In response to case vignette #2 all age groups were very similar in terms of their answers to the multiple choice questions. The youngest group, 30-under, and the oldest group, over 40, were more likely to be sensitive to the multiple issues involved (34% and 34% as compared to 21% for the 31-40 group). In contrast the 31-40 group were more aware of client issues -- 44% -- as compared to the 30 and under group (40%) or the over 40 group (33%).

For case vignette 3, the age group 30-under were more likely to choose the most directive approach with the suicidal patient (54% selected response a. as compared to 36% of the 31-40 group and 27% of the over 40 group). Both the youngest and the oldest group were more likely to focus on multiple issues than the 31-40 age group. (27% and 34% respectively as compared to 14% for the middle group.)

For question 4 the field instructors responded similarly to the multiple choice question regardless of age. The population over 40, however, tended to emphasize multiple issues (40% as compared to 27% for the youngest group and 15% of the middle group.) In contrast the younger group cited the safety of the landlord (27% as compared to 13% for the middle group and 7% for the older group) while not citing the client interests as often

as the older groups.

Field instructors regardless of age usually selected in #5 the response of allowing the schizophrenic woman an opportunity to be with her child. The oldest and the youngest age groups, however, were more likely to identify multiple issues (60% as compared to 39% of the 31-40 age range). In contrast the middle age range often cited client issues (25% of those sampled who were 31-40 as compared to 7% for the youngest group and 13% for the oldest).

None of the sampled field instructors who selected the a response which presented the extreme client advocate position in case vignette #6 were over 40 which may be indicative of the conservatizing process which occurs in social workers as they age. Furthermore, the two younger groups were more likely to stress client issues in their discussion of ethical issues. (36% and 40% as compared to 13% for the older group.)

For case vignette #7 the middle age range was more likely to select the alternative which emphasized the dying man's right to know. (45% of field instructors between 31-40 as compared to 27% 30-under and over 40.) Yet in their discussion of client issues the oldest age range over 40 group was more likely to stress the client's right to know. (86% for this group as compared to 67% for the youngest group and 50% for 31-40 age range.)

All field instructors regardless of age selected the same

same intervention of advising a family conference for case vignette #8. The youngest and the oldest group, however, were more likely to stress multiple issues. (47% as compared to 32% for the 31-40 age range.)

In case vignette #9 which described an elderly man who was experiencing difficulty living independently the middle age range 31-40 was less likely to choose the alternative which would have provided home care services (29% as compared to 47% for the 30-under and 54% of the over 40 group). The oldest over-40 group was much more likely to stress the multiple issues in this case example. (64% as compared to 47% for the 30-under and 37% for the 31-40 age range.)

For the final question most of the field instructors answered similarly regardless of age. The oldest group were more likely to discuss multiple as well as client issues. (27% as compared to 14% and 22% for multiple issues, 33% as compared to 7% and 18% for client issues with the 30-under and 31-40 groups respectively.)

In summary, there were no major differences related to age for the multiple choice questions with a few exceptions. Younger field instructors were more likely to select a directive response with a suicidal patient, while the middle age range most frequently chose the response which stressed the dying man's right to know. None of the over-40 group selected the extreme

client advocate position in servicing the homeless client contrary to agency regulations. This was true whether the older person was an administrator (40%) or a practitioner (60%).

In general, the older a field instructor was, the more likely she was to discuss multiple issues as influencing his ethical decisions. Since men were more likely to respond in terms of multiple issues, there was concern that this finding might be more related to a field instructor's sex rather than her age. The number of men and women, however, in the oldest age group was proportionately equivalent. (24% of the men were over 40, while 27% of the women were over 40.) Both older men and women tended to stress multiple issues. Thus age is a significant variable in influencing discussion of ethical decision-making in practice.

Ethnicity as Variable

The field instructors had been asked about their ethnic background and the responses were as follows:

White	46	79%
Black	5	9%
Hispanic	5	9%
Other	2	3%

Because the number in each ethnic group other than white was so small, it was decided comparing the responses of each ethnic group would not be meaningful.

Social Work Method as Variable

The social work method of field instructors in the sample was described as follows:

	<u>Number</u>	<u>Percentage</u>
Casework	50	86%
Group Work	3	5%
Administr.	2	3%
CO	2	3%
CW/GW	1	2%

Again, because of the small number of non-caseworkers, it was decided that comparison of responses according to social work method would not be feasible.

Job Title as Variable

The field instructors listed their job titles in the following way:

	<u>Number</u>	<u>Percentage</u>
Practitioner	34	59%
Supervisor	10	17%
Administrator	4	7%
Combined	9	16%
Other	1	2%

For the purposes of this analysis it was decided to combine all groups other than practitioner into one group and the following categories were developed:

	<u>Number</u>	<u>Percentage</u>
Practitioner	34	59%
Non-Practitioner	24	41%

For question 1 the practitioners preferred to choose the more directive approach with the battered woman. (12% selected response a as compared to only 6% of the non-practitioner group.) The practitioners also seemed much more likely to stress client issues (38% as compared to 17% non-practitioner) which seemed somewhat in contradiction to their anti-self-determination choice in advising the battered woman to remain in the shelter.

Question 2 indicated no significant differences between how practitioners would intervene as compared to non-practitioners. Practitioners seemed to focus more on client issues (41% as compared to 33%), while non-practitioners stressed more multiple issues (33% as compared to 24%). This finding is not that surprising given that the case vignette of the homeless woman questioned administrative policy. One would expect the practitioner to be more client-focused, while the non-practitioner administrator and supervisor would consider more administrative issues which should affect one's decision.

Question 3 which described a suicidal adolescent revealed a sharp division between the interventions chosen by the practitioners versus those selected by the non-practitioners. Practitioners were twice as likely (42% as compared to 21% of the non-practitioners) to choose the directive approach of advising the client to go into the hospital. Direct service providers may be concerned about assuming responsibility for a suicidal patient and thus

avoid a self-determination choice. Again practitioners seemed to focus more on client issues (33% as compared to 12%), while non-practitioners stressed multiple issues (29% as compared to 18%).

For case vignette #4, practitioners were the only group which believed that the social worker should be directive with the client about informing the landlord. (6% as compared to 0% for the non-practitioners). Again, direct service providers may be concerned about assuming responsibility for a potential homicide. Practitioners focused more on multiple issues than did non-practitioners. (27% as compared to 17%.)

Almost all of the field instructors, regardless of job title selected continued sessions with schizophrenic mother and child in foster care. Practitioners focused more on client issues in this case example (21% as compared to 12%), yet they were equal in their concern about the child's interests (12%).

Question 6 indicated an interesting discrepancy between how practitioners as compared to non-practitioners would intervene with a homeless person who lacked admission requirements. Only 6% of practitioners would see the client anyway, while 32% of the non-practitioners selected this client advocate position. Perhaps administrators and supervisors believe that they are in the position to make exceptions in terms of agency policy, a freedom which the direct service worker does not possess. Both groups were

similar in their discussion of significant ethical issues.

Practitioners were more likely to advise the terminally ill man in case vignette to consult his doctor (50% as compared to 37% for non-practitioners), while the latter advised that the appropriate intervention was to tell the client the truth. The direct service provider, especially in a medical setting, may be more influenced as to appropriate role definitions in terms of patients' care. The practitioners focused more on multiple issues (18%) as compared to the non-practitioners (4%), while the non-practitioners stressed more client issues (62% as compared to 53%).

Almost all field instructors regardless of job function believed that a family session was best in case vignette #8. The practitioners, however, stressed more multiple issues (47%) and client issues (35%) than did the non-practitioners (38%) and (25%).

For case vignette #9, practitioners were more likely to favor the intervention which provided for placement of the elderly man in a residence, although allowing him to participate in the choice of residence (response B). Again, direct service providers may be concerned about assuming responsibility for this man's safety and that of others in his building. Yet the non-practitioners were slightly more likely to focus on safety issues (29% as compared to 24% for practitioners.) Practitioners also seemed more aware of the multiple issues presented by this case example.

(56% as compared to 41% non-practitioners.)

Both practitioners and non-practitioners were similar in their response to case vignette #10. Interestingly enough, non-practitioners were slightly more responsive to client issues (25%) as compared to practitioners (18%). Possibly practitioners are more structured to follow rules and regulations, while non-practitioners in supervisory and administrative positions recognize that the rule of truth-telling must sometimes be suspended in the client's interest.

In summary, the practitioners were more likely than the non-practitioner field instructors to select the more paternalistic response for the multiple choice questions. More of the practitioners believed that situations involving battered women, suicidal patients, potentially homicidal clients, and frail elderly clients necessitated a firm, paternalistic intervention by the social worker. Despite the lack of self-determination responses to multiple choice questions, practitioners were more likely to stress client issues in their discussion of the issues.

Practitioners tended to make system-oriented responses; for example, few practitioners would advocate for the homeless client to be seen against agency policy or the dying man to be told the nature of his condition despite the doctor's and hospitals's regulations to the contrary.

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example, few practitioners would advocate for the homeless client to be seen against agency policy or the dying man to be told the nature of his condition despite the doctor's and hospital's regulations to the contrary.

In this study men were twice as likely to be administrators (11 non-practitioners administrators as compared to six practitioners). Women, on the other hand, were twice as likely to be practitioners instead of non-practitioner administrators (28 female practitioners as compared to 13 administrators). One could question if the finding that practitioners make agency-oriented decisions as compared to administrators choosing client advocate positions may be more related to their sex rather than their job title. It will be remembered that women in contrast to men were less likely to take the client advocate position, if it conflicted with agency policy.

Thus the male administrators, male practitioners, female administrators, and female practitioners were all compared in their choice of agency oriented responses versus client advocate position. Both in the case of the homeless client wanting service and the dying man's right to know, female administrators were more likely to advocate for their clients. Here again, women were found to be more client-oriented in general than their male counterparts. Thus administrators as a group assume more client-advocacy positions and this is even more true for women admini-

strators. These women were found to be in sharp contrast to the large majority of women practitioners who usually opted for agency regulations over the client's interest. Therefore client advocacy seems to be more related to agency title than to sex.

Professional Experience as Variable

Field instructors had been asked how many years post-MSW experience they had and the results were as follows:

	<u>Number</u>	<u>Percentage</u>
3-5 years	34	59%
6-10 years	21	36%
11-15 years	1	2%
over 15	2	3%

Because there were so few field instructors with over 10 years for the purpose of analysis these field instructors were grouped with the 6-10 years population. The following categories were compiled:

	<u>Number</u>	<u>Percentage</u>
3-5 years	34	59%
over 5 years	24	41%

It should be noted that at least three years post-MSW experience is needed in order to become a field supervisor.

For the first case vignette which described a battered woman, respondents with differing amounts of experience answered the multiple choice question similarly. The less experienced group, however, emphasized multiple issues more (41% as compared

to 29%), while the more experienced sample stressed safety of the client (25% for the experienced group as compared to 9% for the less experienced group). One could speculate that the social worker who has been in the field for over five years has had more experience with the possible dangerous consequences of women who return to abusive spouses.

With case vignette #2 more experienced field instructors would allow the homeless person to remain homeless if she chose (79% as compared to 68%). They were more likely to focus on multiple issues (29% as compared to 12% for the 3-5 years experienced group), yet less likely to cite safety issues (8% as compared to 18%). The last finding is consistent with their choice that the person should remain homeless if this is her self-determination.

For the potentially suicidal young man, more experienced social workers were more willing to assume a suicidal risk by discussing the possibility of psychiatric hospitalization, while the less experienced social workers favored informing the client that he must go to the hospital. (67% of the more experienced social workers favored voluntary hospitalization as compared to 28% of the less experienced social workers.)

All field instructors responded similarly to case vignette #4. However, the more experienced social workers were more likely to discuss client issues than the less experienced group (25% as compared to 15%).

For case vignette #5, most of the field instructors, regardless of years of experience, selected similar responses. The only exception was for the child's interest; less experienced social workers were more likely to cite this as a significant issue (21% as compared to 0% for the more experienced group.)

When field instructors were presented with the case of a homeless person who was denied service, the more experienced instructors were more likely to advocate for the client who was denied service while those with 3-5 years experience preferred to send the client elsewhere. (12% of the more experienced group selected the extreme client advocate position as compared to only 6% of the less experienced group.) Yet the less experienced group stressed client issues more than the experienced group (32% as compared to 25% for the experienced group).

Less experienced workers were slightly more inclined to tell the dying man of his prognosis as compared to more experienced workers (36% as compared to 29%). Also the less experienced workers seemed more cognizant of multiple issues (18%) than those with over five years experience. More experienced workers, however, stressed client issues (62% as compared to 54% for those with 5 years or less experience).

More consensus was evident for case vignette #8 than any other case example. Those with more experience, however, seemed to be slightly more cognizant of multiple issues (50% as compared

to 41% for those with 5 or under years of experience).

Less experienced field instructors were more likely to discuss options for residences with the elderly client than workers with over 5 years of experience (47% as compared to 25%). Yet in seeming contradiction they most frequently cited safety issues in their discussion (35% as compared to 12%).

Both experienced and less experienced social workers selected similar responses in the case of a welfare mother who worked off the books. Yet, experienced social workers seemed to be more concerned about client issues than their less experienced peers (25% experienced field instructors as compared to 18% of field instructors with 3-5 years experience).

In summary, for many case vignettes experience did not seem to be a factor in how field instructors responded to the multiple choice questions. The more experienced field instructors, however, seemed slightly more inclined to select the alternative which maximized self-determination as with the example of the suicidal man and the homeless woman. Furthermore, they focused more on client issues in their discussion of the homicidal woman, the homeless person wanting service, the dying man's right to truth, and the welfare mother needing additional monies.

Experienced field instructors would advocate more for homeless clients against agency regulations than their less-experienced colleagues. The more experienced field instructors were

more likely to be in administrative positions and the non-practitioner administrative role was previously seen to be linked to client advocacy. In contrast, however, experienced field instructors did not select a client advocacy position in regard to the dying man, although they did stress the client's right to know in their essay responses.

Summary of Variables as Related to Questionnaire Responses

In this study the questionnaire responses were related to four significant variables: gender, age, job title, and years of professional experience. In terms of gender, women were much more likely to emphasize client issues, while men focused on multiple issues. This may relate to basic differences between men and women in ethical decision-making.

Older field instructors were less likely to assume a client advocate position. Furthermore, field instructors over 40 were much more inclined to discuss multiple issues as motivating their decisions. This finding was true regardless of the gender or the job title of the field instructor.

In terms of the job title, practitioners frequently selected a more paternalistic response than non-practitioners. Furthermore, they were more likely to make system-oriented decisions, while administrators in contrast were more apt to select client advocacy responses. This was even more true for women administra-

tors who took a client advocacy position more than their male counterparts, and much more than women practitioners who more frequently selected an agency compatible response.

Years of experience had a mixed effect on questionnaire results. Experienced field instructors seemed slightly more likely to stress self-determination and client issues. At times they would advocate for clients which may be related to the fact that more experienced field instructors were more likely to be administrators. It will be remembered that previously an administrative job title seemed to be linked to client advocacy. Yet at times experienced field instructors, possibly because of setting, did not pursue a client advocacy position.

Analysis of Interviews

From the field instructors who completed the questionnaire in the supervision seminar a small sample of ten were selected for in-depth interviews as to specific ethical dilemmas they had encountered in their practice. Efforts were made to select field instructors who were interviewed were employed in a mental health free-standing clinic, the community relations division of a state agency, a social service agency which serviced the elderly (2), a parochial school, a large medical teaching hospital, an adolescent inpatient unit of a large public hospital, a city public relations office, and a child care agency.

Characteristics of Interviewees

The identifying characteristics were somewhat similar to the large sample of field instructors. Two men and eight women were interviewed. In terms of ethnic distributions eight of the interviewees were white, one black, and one Hispanic. Six had less than 5 years experience; four had been employed as a professional social worker for over 5 years. Almost all reported that they were enjoying their first year of supervising a social work student. A few commented on their initial anxiety over assuming a new role. Several new field instructors reported that they were pleasantly surprised to find out that they knew as much about social work as they did so as to be able to pass on this knowledge to a social work student which is a frequent concern of the beginning supervisor. One field instructor expressed concern that she would have to go to committee with a failing student within the next few weeks.

Methodology of Interviews

The ten field instructors interviewed were asked questions outlined in Appendix 7 Guide to Interviews. All interviewees appeared cooperative in participating in this 45 minute interview process. At the beginning of the interview the field instructor was reassured as to the confidentiality of the interview, that the results would not be shared with the agency or with the field instruction department at Hunter College School of Social Work.

Although the subjects knew that the researcher was a doctoral candidate and would be using the content of these interviews in her doctoral project, the anonymity of the responses was stressed. In addition to the issue of confidentiality there was concern that the field instructors might be inhibited in their responses in that they feared the interviewer might be judging their competency as a field instructor in identifying and resolving difficult ethical dilemmas in practice. A few raised the question of why they were selected and there was some suspicion that the questionnaire which they had completed a month previously had been linked to them and was responsible for their selection as interviewees.

Reaction to Questionnaires

Field instructors' reactions to the questionnaire was generally positive. A few commented that they could have used more time to complete the questionnaire. The two field instructors who had majored in a method other than casework commented about the casework orientation of the case vignettes. Considering that 86% of the sample, however, had a casework background the casework emphasis of the case vignettes seemed appropriate. One field instructor suggested that at times he had wanted to write in an alternative intervention, as none of the listed options were his first choice.

Increased Sensitivity as Result of Questionnaires

All in all, the field instructors interviewed felt that the questionnaire had increased their sensitivity to ethical issues in practice. One stated that these were ethical dilemmas which she encountered in her daily practice, but frequently did not spend much time thinking in terms of their ethical content. One field instructor found the choice of intervention simple, but thought it was difficult to articulate the reasons for one's choice. In contrast another field instructor compared the questionnaire to the CSW licensing exam in that at times the selection of the appropriate intervention was a tricky process. One very articulate, well-informed interviewee reported that the questionnaire helped to make the "subliminal dull awareness of ethical issues" we as social workers have, more conscious.

Most Difficult Ethical Dilemma Related to Agency

The ethical issues cited as most difficult seemed to vary from setting to setting. Those who worked in social service agencies and mental health clinics cited client issues of self-determination and confidentiality. In social service agencies which service the elderly there often developed a conflict between the right of the elderly person to self-determination versus a paternalistic concern for his safety. Field instructors who were faced with these dilemmas felt that they received much support and guidance in resolving these ethical dilemmas from their supervisors.

The field instructors surveyed related that they usually opted for the client's self-determination whenever possible. The decision was usually made to maintain the client in his home whenever possible and to use home care and other support systems to fulfill this identified goal. The client's right to self-determination was respected despite frequent family pressure to have the client placed in a residence. Involuntary placement was only arranged after a psychiatrist's evaluation that the client was incompetent to continue to live independently. One field instructor who worked in an agency which serviced the elderly related that at times he knew that residential placement was advisable for the client's own safety, but he hated to arrange placement because residential in-house procedures frequently abrogated elderly client's independence and self-respect.

Confidentiality as Most Difficult Ethical Issue

Field instructors, especially those who worked in multi-discipline settings, discussed the ethical dilemma of preserving client confidentiality as most challenging. Hospital social workers cited the fact that all have access to case records. One field instructor related that she tries to refer hospital employees who are sent to her service to other agencies because information they share cannot be kept confidential from their supervisors or other hospital personnel. Those who had contact with other professionals such as doctors and teachers reported that other

fields seem to have a different interpretation of confidentiality. While social workers only share what is felt would be in the client's best interest, other professionals believe that as much information as possible should be exchanged with others even if this might be damaging to the client. One field instructor cited the difficulty presented in working with involuntary clients with whom a probation or parole officer is frequently asking for on-going reports as to the client's treatment progress. Her resolution of this dilemma is to share the minimum of information, as to do otherwise would violate confidentiality and the client's trust in the worker. All who discussed confidentiality cited the use of release forms, but felt ultimately it became the social worker's professional judgment and responsibility as to the quantity and quality of information about the client which was shared with outside sources.

Conflict Between Different Interests

As Most Difficult Ethical Issue

The conflict between client's needs and the interests of other agencies was frequently stressed by the interviewed field supervisors. Those who worked in social service agencies for the elderly commented that they frequently learned that the client had additional funds he had not reported to the welfare or Medicaid departments. Those who worked in mental health settings related that they frequently were asked to write letters to the welfare

department about the client's inability to work. Field instructors usually opted to promote the client's interests. While they would discuss the possible consequences of withholding information from financial assistance sources, ultimately they believed that the decision should be made by the client. Field instructors were more likely to view themselves as an agent of the client, not of government funding agencies. Similarly with requests for welfare letters, field instructors usually discussed the reasons for this letter as they justified the need as in the client's best interests. The client's duplicity in relationship to financial assistance agencies presents an ethical challenge to many field instructors, but their resolution of this dilemma is usually to act so as to promote what they perceive as the client's best interest.

Several field instructors cited the ethical dilemma of conflict of parent-child interests as most difficult. In a conflict situation, should the rights of the natural mother or the child take precedence? The decision made seemed to be influenced by the type of setting and who was the assigned client. In a child care agency although the field instructor advocated a family approach, ultimately she related she would opt for the rights of the child. In a mental health setting where the assigned client was a natural mother, the social worker perceived the rights and interests of the natural mother as paramount.

Unethical Behavior of Colleague as Difficult Ethical Issue

One field instructor presented the ethical dilemma of coping with unethical behavior in a colleague. There was great concern about how this colleague's unethical behavior would affect this client, as well as the type of treatment which this colleague in question would render to other clients. The field instructor interviewed discussed this information with the agency administrator who also happened to be her supervisor. The administrator said he would take care of it. Although to the field instructor's knowledge there has been no repeat of the colleague's unethical behavior of condoning extreme anti-social behavior of a group member, the colleague in question is still employed by the agency.

Impediment to Ethical Decisions in Public Sector

Those field instructors who worked in public agencies related conflicts as to loyalties to their agencies versus clients they represent. Because of the political nature of governmental agencies field instructors felt that they were often inhibited in promoting extreme pro-client positions. They felt as social workers they were often the most liberal in their department, but often had to curb the actualization of these views because of internal and external pressures. Accepting the political reality of their employment was cited in that they felt that their agencies, departments, and position were vulnerable to political powers and

changes in administration. While one field instructor felt that even her liberal political activities outside her employment was looked on with askance by the powers that be, another field instructor related how she and others within a government bureaucracy had become a change agent to promote client's rights. In the latter example a task force on teenage pregnancy composed of city employees and other concerned groups was able to advocate successfully for the reversal of a HRA ruling which was discriminatory to teenage mothers who wanted to complete their education. This field instructor recognized that it was unusual for change to be brought about from within the bureaucracy, where the more frequent pattern was change as a result of external pressure groups.

Support of Agency in Ethical Decision-Making

In general, those field instructors who worked in social service agencies thought that their supervisors and administrators were most supportive in helping them confront and resolve difficult ethical issues and dilemmas. Often in social service agencies administrators themselves were social workers and were reported to be sensitive to client issues in ethical decision making.

In less heterogeneous agencies such as hospitals, mental health clinics, and schools field instructors experienced more

difficulties in resolving ethical dilemmas to their satisfaction. They noted that supervisors and administrators seemed most concerned about resolving ethical dilemmas to avoid scandal and unfavorable media coverage than in considering what might be in the client's best interest. Fear of scandal was cited as a particularly strong motivating force in child care agencies which recently have been under attack by the media as not providing adequate safety for children. While a decision made to promote the client's best interest is not always disparate from one selected to avoid agency scandal, we would hope that social workers would consider the first more than the latter in resolving difficult ethical dilemmas.

Ethical Review Boards in Agencies

None of the field instructors surveyed reported that their agency had an ethical review board. One of the interviewees did relate that her agency had what was called a special review committee which she described as Monday morning quarterbacking. The function of this committee was to review suicide attempts, the unspoken purpose of which was to assess past suicidal cues and thus prevent successful suicide attempts in the future and possible legal repercussions.

Although none of the agencies surveyed had an ethical review committee, most of the field instructors believed that such a

group would be helpful in resolving difficult ethical dilemmas. Those who worked in homogeneous agencies which employed mostly social workers wondered how the ethical review committee would function as they found their supervisors, administrators, and clinical conferences with colleagues as supportive and helpful in resolving difficult ethical dilemmas. For others there was the hope that an ethical review committee might help in considering ethical issues and resolving conflicts in difficult cases. The fear that this ethical review committee might be co-opted by agency interests who were mainly motivated by fear of scandal was cited. All in all, field instructors viewed the creation of an ethical review board as a source of support in helping them resolve challenging ethical dilemmas. One field instructor was interested in starting an ethical review board to provide support and guidance in resolving an ethical dilemma with which she was currently faced and any other ethical challenges she would encounter in her future professional practice.

CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

A concern for the teaching of social work values and ethics in professional education, as well as the belief that the field placement provides the primary opportunity for social work students to learn about and test ethical decision-making in practice greatly influenced the nature and course of this study. The focus of attention was field instructors who, although they have such a crucial role in the transmittal of knowledge about ethical issues in practice to beginning social workers, have never been studied in terms of their own understanding and application of ethical decision-making in practice.

New field instructors enrolled in classes for beginning field instructors were studied through questionnaires and interviews. It was believed that this population would provide information about how field instructors put into practice social work values through ethical decision-making. From this study the quality of teaching about ethics to social work students in the field can be inferred. Differences in ethical decision-making related to gender, age, title, and experience can be studied. Finally, this study has important implications for the future education of social work students about ethical decision-making in practice.

In summary, field instructors were most likely to select the social work intervention which maximized the client's right to self-determination, although providing some provision for the client's safety. This would reflect positively on the quality of field work instruction in casework interventions with ethical dilemmas. The social work student witnesses a positive portrayal of his field instructor engaged in ethical decision-making. Yet there is some concern that field instructors may at times favor agency regulations over client interests. The professional social work ethical code emphasizes that a social worker's primary responsibility is to clients. One hopes that social work students are not learning from their field instructors that the regulations of the employing agency should take precedence over client needs. The finding that field instructors often promote agency over client may be reflective of the current conservative trend in the country as a whole which influences the social work profession as well.

Not only in their selection of intervention, but also in their discussion of ethical issues influencing their decision, field instructors seemed very knowledgeable about social work ethics in practice. Most often field instructors cited either multiple issues or client issues as contributing to their choice of response. Very infrequently did respondents cite safety/paternalism issues or the interests of others as singular issues

In determining their response. Again the quality of ethical decision-making on the part of field instructors seems positive and the image portrayed to students a good one.

There is much consistency in the field instructors' choice of intervention as compared to their discussion of ethical issues. For example, those field instructors who selected the most extreme self-determination interventions were most likely to emphasize client issues in their discussion. Almost never did they cite other interests only as affecting their decision. This continuity of intervention choice and ethical issues discussed seems most appropriate for effective teaching of social work students about ethical decision-making in their field placements.

It is interesting to note that while field instructors at times selected an agency-oriented intervention in the multiple-choice question, almost never did they cite agency policy as a singular issue in their discussion of ethical decision-making. A possible explanation may be that field instructors may know about the appropriate social work issues for the purposes of discussion, but not be able to follow through on the most ethical intervention choice. It is encouraging to note that field instructors know about and can discuss the appropriate ethical issues. Yet the discrepancy between intervention selected and discussion of issues is a cause of concern in social work field education, as continuity between theory and practice is considered

essential for effective student learning. One wonders what factors contribute to the field instructors' choices of interventions divergent from the ethical opinions they profess. The interviews with field instructors indicated the important role of agency in influencing the ethical decision-making of social workers.

The type of ethical dilemmas encountered in practice seem to be closely related to the type of employing agency. Those who worked in mental health clinics and social service agencies seemed to experience more conflicts between client self-determination and paternalistic concern for safety. This is frequently a problem in agencies which service the elderly when the social worker is called upon to make an assessment about the elderly's ability to live independently. Field instructors interviewed usually opted for the client's right of self-determination. Whenever possible, despite family pressure, the elderly person was maintained in his own home with the use of home care and other community support systems.

When there is a conflict of interests, field instructors usually support the interest of their identified clients. Workers in mental health settings frequently support the interests of natural mothers, while social workers in child care agencies promote the interests of children. All field instructors interviewed saw their role as client advocate in relationship to community agencies like the welfare department or offender system.

The client's right to confidentiality was considered most difficult to protect, especially for those social workers who were employed in medical settings. Also it was noted that other professionals such as doctors and teachers seem to have a different conception of confidentiality which sometimes makes interdisciplinary consultation difficult. In general, social workers only share what they feel will be beneficial to their clients and only as much information as is necessary.

In general, those field instructors who worked in social service agencies found that their agencies were most supportive in helping them resolve difficult ethical dilemmas. Their supervisors and administrators were usually social workers who were very cognizant of ethical issues in practice and would support the worker in ethical decision-making based on social work values and ethics.

In contrast, field instructors who worked in multi-discipline settings such as hospital or the public sector found that the environment was often less than supportive in helping them resolve ethical dilemmas. Social workers were encouraged to make ethical decisions not because of any social work values or ethical principles, but rather based on fear or agency scandal, unfavorable media coverage, and in the case of public agencies, political repercussions. This is of concern to the social work profession in general and social work education more specifically, as one

would want field instructors and the students to make ethical decisions based upon adherence to basic, intrinsic social work values and ethical principles, rather than because of a utilitarian fear of the consequences of behavior.

The 1980's have witnessed a conservative trend throughout the country which has drastically affected most social and health agencies. Many agencies struggle under the continual threat of financial cutbacks and survival becomes the primary goal of non-profit institutions during this decade. This definitely may have a detrimental effect upon ethical decision-making within agencies, if interventions are selected primarily to avoid scandal and unfavorable media coverage which might jeopardize funding, rather than because of adherence to social work ethical standards. Although the social workers sampled seemed to be knowledgeable about ethical issues in practice, they might be impeded in their ethical decision-making by an administrative concern for agency survival which ultimately might affect their continued employment.

None of the agencies in which the interviewed field instructors worked had an ethical review board. One reported a special review board, but the main purpose of this seemed to be to avoid the possibility of future law suits related to successful suicide attempts. Those who worked in social service agencies wondered how this ethical review board would function, as they already experienced their supervisors, administrators, and colleagues in

case conferences very supportive in resolving difficult ethical dilemmas. Those who worked in multi-discipline settings thought that an ethical review board would be helpful in assisting them to resolve and carry out difficult ethical decisions in practice. One field instructor requested advice as to how to go about forming an ethical review board in her agency. This concern was motivated by her recent attempt to resolve an ethical dilemma involving client interest in which she found other disciplines in her agency critical of her ethical concern for her client and her attempts to integrate this into her practice. Some field instructors voiced the fear that an ethical review board might be co-opted and might function only to avoid agency scandal or unfavorable media coverage, rather than to consider and resolve ethical dilemmas in practice.

This study suggests the possible value of ethical review boards in helping professional social workers resolve and carry out ethical decisions within agency practice. This is especially true within multi-discipline agencies where social workers do not receive as much support in ethical decision-making. Safeguards for the autonomy and independent functioning of this board, however, must be developed, as this board is at risk of becoming an arm of agency administration.

To summarize, field instructors seem to be very cognizant of social work issues which affect ethical decision-making in

practice. This knowledge includes general ethical principles such as the value of truth-telling, as well as information about more specific social work responsibilities such as the professional's duty to warn the intended victim. This is a positive implication for the quality of social work education on ethical decision making which takes place in the field.

When there is a discrepancy between intervention and issue, it seems to be linked to agency. Although social workers may know about the appropriate social work issues, they may not be able to intervene accordingly because of agency control. This is more true for agencies which employ professionals other than social workers. Ethical review boards can be developed to support professional social workers within agencies in making ethical decisions. Yet, further study needs to be undertaken as to how to protect these boards from agency cooptation.

Does ethical decision-making among field instructors vary according to significant characteristics of the field instructors and what are the implications of this for social work education? Research data was analysed in terms of gender, age, job title and years of experience and the following conclusions suggested.

In this study women appeared to focus more on client issues, while men emphasized to a greater extent multiple issues affecting their decision-making. Also, women seem to be concerned about the safety of others. One possible reason for this discrepancy

is raised by Carol Gilligan the social psychologist who has studied extensively moral and ethical decision-making in women as compared to men. She postulates that in women

Identity is defined in a context of relationship and judged by a standard of responsibility and care. Similarly, morality is seen . . . as arising from the experience of connection and conceived as a problem of inclusion rather than one of balancing claims. The underlying assumption (is) that morality stems from attachment . . . For the men, the tone of identity is different, clearer, more distinct, and sharp-edged . . . Although the world of the self that men describe at times includes "people" and "deep attachments," no particular person or relationship is mentioned.

Thus according to this interpretation morality is perceived as different by men and women. While men focus more on multiple abstract issues, women concentrate on the social interaction, on concern and caring for the other person. This may explain in part why men listed multiple issues in their responses, while women discussed more frequently client issues or safety issues which indicated a greater focus on the needs of others.

Analysed from another perspective, the discrepancy of men emphasizing multiple issues, while women focus more on client issues, can be understood in terms of a basic difference in philosophical thinking and decision-making. Men who think in terms of

Carol Gilligan, In a Different Voice (Cambridge: Harvard University Press, 1982), pp. 160-161.

multiple causation may favor a utilitarian, consequential analysis of moral dilemmas, while women concentrate more on the deontological, absolute, singular issues such as the primacy of client care.² Both methods are important in ethical decision-making in social work.

The field instructors who answered the questionnaire were divided into three age categories, 30 and under, 31-40, and over 40. There were no major differences related to age for the multiple choice questions, with a few exceptions. Younger field instructors were more likely to select a directive response with a suicidal patient, while the middle age range most frequently chose the response which stressed the dying man's right to know. Not surprisingly none of the over 40 group selected the extreme client advocate position in servicing the homeless client contrary to agency regulations. It has been frequently noted that with advancing age social workers are likely to become conservers in organizations who are most resistant to any change or deviation from agency regulations.³ Thus, the over 40 group of field instructors would be the least inclined of any age group to advocate for a client against agency policy, regardless of sex or title.

2

Personal Communication from Dean Harold Lewis, January 22, 1986

3

Anthony Downs, Inside Bureaucracy (Boston: Little Brown & Co., 1967), p. 21

In general, older field instructors were more likely to discuss multiple issues as influencing their ethical decisions. This finding was true for both older men and women, even though it will be remembered women usually emphasized client issues. One explanation is that with age the field instructor has had greater experience. Possibly greater experience brings knowledge of the multiple issues which impinge on any difficult ethical dilemma. Increased age may also be more directly related to a greater inclination to explain ethical dilemmas in terms of multiple complex issues or to introduce a literary allusion "in years that bring the philosophic mind."⁴

Practitioners as compared to non-practitioner administrators were more likely to select the more paternalistic responses for multiple choice questions. Possibly direct service providers are somewhat reluctant to assume ultimate responsibility for allowing client self-determination when the latter's behavior may be dangerous to himself or others. More practitioners believed that situations involving battered women, suicidal patients, potentially homicidal clients and frail elderly clients necessitated a firm, paternalistic intervention by the social worker. Despite the lack of self-determination responses to multiple choice questions,

⁴

William Wordsworth, "Ode - Intimations of Immortality from Recollections of Childhood," in A Treasury of Great Poems English and American ed. Louis Untermeyer (New York: Simon and Schuster, 1955), p. 658.

practitioners were more likely to stress client issues in their discussion of the issues. One explanation may be that the central focus of the practitioner's practice is the client, while the non-practitioner supervisor or administrator must examine multiple issues which affect any specific case example.

Practitioners tended to make system-oriented responses; for example, few practitioners would advocate for the homeless client to be seen against agency policy or for the dying man to be told the nature of his condition despite the doctor's and hospital regulations to the contrary. In this study the non-practitioner administrators often assumed client advocate positions in insisting that the homeless client be seen against agency regulations and telling the dying man the truth contrary to hospital policy. He is in a position to make the exception, to advocate for the special case. Contrary to popular opinion, the agency executive is in a unique position to advocate for the client which frequently he does if the case comes to his attention. "The administrator guards against the necessary imposition of agency maintenance needs and practitioner self-interest when they pose negative consequences for agency clients."⁵ This may explain in part the

5

Simon Slavin, "A Theoretical Framework for Social Administration," Leadership in Social Administration: Perspectives for the 1980's eds. Felice Davidson Perlmutter and Simon Slavin (Philadelphia: Temple University Press, 1980), p. 17.

client advocate position of the non-practitioners in response to the homeless client needing service and the dying man wanting the truth contrary to agency regulations.

Although men were twice as likely to be non-practitioner administrators (11 non-practitioner administrators as compared to 6 practitioners, women were twice as likely to be practitioners than non-practitioner administrators (28 female practitioners as compared to 13 administrators). This sex distribution in regard to agency title of the sampled field instructors is similar to what has been noted in previous research on gender distribution in social work managerial positions.⁶ There was concern that the finding that practitioners make agency-oriented decisions as compared to administrators choosing client-advocate positions may be more related to their sex than their job title. It will be remembered that women were less likely to take the client advocate position, if it conflicted with agency policy. Thus the male administrators, male practitioners, female administrators, and female practitioners were all compared in their choice of agency-oriented response versus client advocate position. Both in the case of the homeless client wanting service and the dying man's right to know, female administrators were more likely to advocate for their

6

Leslie Alexander and Toba Schwaber Kerson, "Room at the Top: Women in Administration," Leadership In Social Administration: Perspectives for the 1980's, pp. 196-198.

clients. This is in accordance with the previous discussion in which women were found to be much more client-oriented in general than their male counterparts. Thus administrators in general assume more client advocate positions and this is even more true for women administrators. These women were found to be in sharp contrast to the large majority of women practitioners who usually opted for the agency regulation over the client's interest. Client advocacy seems to be more related to agency title than gender.

Field instructors were divided into two groups, one with less experience (3-5 years) and the other with more experience (over 5 years). For many case vignettes experience did not seem to be a factor in how field instructors responded to the multiple choice questions. The more experienced field instructors, however, seemed slightly more inclined to select the alternative which maximized self-determination as with the example of the suicidal man and homeless woman. Furthermore, they focused more on client issues in their discussion of the homicidal woman, the homeless person wanting service, the dying man's right to truth, and the welfare mother needing additional monies.

More experienced workers would advocate for their homeless client needing service more than their less experienced colleagues. Possibly with more experience field instructors feel more comfortable about advocating for individual clients against agency

regulations. Also, the more experienced field instructors were more likely to be in administrative positions and the non-practitioner administrative role was previously seen to be linked to client advocacy. The oldest experienced workers, however, were unlikely to advocate for the homeless client, as their conservatism with increased age may have prevailed.

Experienced field instructors were not likely to assume an advocacy position in regard to the dying man, although they did stress the client right to know in their essay responses. This may have been related to the setting in which experienced field instructors worked. Experienced field instructors who work in hospitals even though they may be non-practitioners may be reluctant to go against hospital regulations about patient care.

In general, it is positive to note that experienced social workers are so cognizant of client issues, since it is commonly believed that social workers become more burnt out over time by continual battering in the agency⁷ which makes them less sensitive to client needs. Also the data implies that the quality of ethical teaching around client issues will improve as the field instructor becomes more experienced.

7

Harold Lewis, "Paternalism and the Social Work Practitioner," (New York: October, 1984), p. 6

Implications and Recommendations for Social Work Education

1. The questionnaire which was distributed to field instructors included case vignettes which described a diversity of ethical dilemmas in social work practice. Almost all of the subjects in the written questionnaires and in the interviews reported that the case vignettes had increased their sensitivity to ethical issues in practice. One field instructor commented that the questionnaire had served to make her more conscious of the "subliminal dull awareness of ethical issues" we as social workers have all the time.

The case vignette appears as a very positive teaching tool for use in both the classroom and the field. With the case vignette the social work student is able to apply theoretical knowledge to the specific case example. In the classroom the student learns about ethical dilemmas in settings different from his specific field placement. The study of case vignettes provides repeated opportunities for the beginning social worker as well as more experienced professionals to apply social work ethics to new and different situations.

2. Both social work students, as well as experienced social workers, could benefit from greater study of the application of the NASW Code of Ethics. The Code at times seems somewhat ambiguous and contradictory. Although field instructors may understand the ethical issues involved in a specific case example, they could

not and did not utilize the Code to help them resolve ethical dilemmas in practice. Discussion of the social worker professional code and its application to practice could be the subject of supervisors seminars as well as graduate classes.

3. Currently there is no ongoing educational requirement for professional social workers and this applies also to field instructors. In New York City a seminar for new field instructors is an educational requirement for beginning field instructors. To insure that social work students receive education about ethical issues in the field, it seems important to include a section on ethical issues in practice as an integrated part of the supervisors seminars. Also continuing education courses on ethical issues in practice could be offered for both field instructors, as well as other professional social workers.

4. This study indicated that women are more likely to view ethical dilemmas in terms of client issues, while men more frequently stress multiple issues. The most opportune learning experience for ethical decision-making would be exposure to multiple viewpoints both in the classroom and in the field. If possible, social work students should have exposure to both male and female professors and field instructors during their social work education. Also, classes with both male and female students which provide the opportunity for sharing different approaches to ethical decision-making would offer the best learning environment.

5. The older field instructors were more likely to consider ethical issues in terms of multiple factors, but less prone to advocate for individual clients. This suggests that the social work student could benefit from exposure to field instructors and faculty of varying ages, so as to learn of multiple issues and client advocacy in ethical decision-making. Also, the optimal social work student class should include students of different ages, so as to maximize opportunities for different viewpoints on ethical decision-making.

6. Social workers with more experience were found to be more knowledgeable of client issues and more likely to advocate for individual clients. It seems that less experienced field instructors can benefit from class discussions on ethical decision-making with more experienced field instructors and faculty. Also, an experience mix for continuing professional education classes, as well as graduate social work classes, would seem most appropriate.

7. The non-practitioner administrator in this study seemed most likely to take the client advocate position. If one believes that client advocacy is basic to a social work ethic, then one would want practitioners to have more exposure to the client advocacy position of administrators in ethical decision-making. Yet much of social work education separates social workers into different method tracts. Ideally some opportunity within the social work curriculum should be provided for administrative and direct

practice students to discuss mutually ethical decision-making, especially in situations where the client and the agency's interests conflict.

8. The effect of agency must be recognized in social work education. In the questionnaires social workers at times indicated that they could not advocate for client need because of agency control. In interviews field instructors indicated that the agency determined which client interest they espoused. Also within complex, multi-discipline agencies field instructors received little support for ethical decisions. To improve the quality of social work education the student should be exposed to other students from a variety of field placements. In terms of the individual student it would be advantageous for her to learn about ethical decision-making from the perspective of different agencies. The student should be encouraged to bring into the classroom her experience with ethical decision-making, especially in complex, multi-discipline settings. Social work students in alliance with their field instructors can become catalysts in the formation of ethical review boards. The practicum social work class can be used for open discussion of changing the system from within by institutionalizing an ethical review board in an agency. This would introduce direct practice students to more client advocacy and administrative skills than their social work education had previously provided.

Implications for Future Research

This study is almost completed, but the research on ethical issues in field instruction has just begun. While this project focuses on new field instructors, one wonders if the results would have been similar with more experienced field instructors. Also, only a small sample from Hunter College School of Social Work were the subjects for this research. It can be questioned how field instructors who were not in a special seminar for new instructors were utilized by another school, or were from another part of the country, would have responded to questions about ethical issues and dilemmas in practice.

This study focuses on field instructors specifically. Possible future research efforts may contrast field instructors with faculty in terms of ethical understanding and application to practice. In this way better understanding of the total educational process in regard to social work ethical issues in practice which social work students receive can be ascertained. Also it would be important to receive student feedback as to how they perceive field instructors' teaching of ethical issues and decision-making in practice. The effectiveness of field instructor teaching on ethics can be measured by examining the understanding of social work students on ethical practice issues in the beginning of their field placements as well as at the end of their field placements.

Although field instructors may be knowledgeable about ethical

issues in practice and able to transmit this knowledge to student social workers, they may have difficulties in exercising ethical decision-making within their agencies. This seems to happen most frequently in multi-discipline settings and the nature of these impediments, as well as solutions to remedy, needs to be explored in greater depth. Also the possibility of ethical review committees has been raised and the composition and function of such a group could be the focus of future social work research. As so much of social work education as well as social work practice takes place within the agency context, the development of and research on ethical decision-making groups as an integrated part of agency structure will serve to strengthen social work practice and the profession as a whole.

Appendix 1Pretest QuestionnaireQuestionnaire on Ethical Issues In Social Work Practice

This questionnaire consists of ten case vignettes from social work practice. Please circle the response which most closely describes what you would do in the specific case example. A variety of answers are possible and experienced social workers may answer the questions in different ways. If you believe a fourth alternative is the most appropriate, please write in your preferred response in d. Also please add any comments you may have about how you arrived at your decision.

Your answers are completely confidential in that they will not be shared with students, other workers in your agency, or the field instruction department at Hunter School of Social Work.

1. Mrs. S. who has been your client for the last two years confides that she has decided to return to her estranged spouse and try once more to save her marriage. This client has been physically abused on several occasions, once even requiring emergency treatment for a broken arm. Last month she separated from her abusive, alcoholic husband and moved into a shelter for battered women. Which of the following interventions would you utilize?

- a. Advise Mrs. S. to remain in the shelter, as her life is in danger if she returns to her husband.
- b. Discuss consequences of returning to her spouse versus remaining in the shelter and allow Mrs. S. to make her own decision.
- c. Tell the client that she should return to her husband if this is her wish.
- d. _____

Comments: _____

2. A homeless woman known only as Sally lives on the street across from your agency. Sometimes staff members buy her coffee and bring her food. It is now summer, but she has multiple layers of clothing which she wears or discards depending on weather conditions. You have spoken to her about the possibility of entering a shelter, but she appears very resistant to leaving her street corner. What course of action would you take?

- a. Advise the police to bring Sally to a shelter or psychiatric hospital as her life is in danger.
- b. Tell Sally that she must go into a shelter.
- c. Inform Sally about housing alternatives, but ultimately allow her to make her own decision whether she wants to remain homeless.
- d. _____

Comments: _____

3. Your patient in a mental health clinic is very depressed after breaking up with his girlfriend. John T. has not been attending college classes and has not been able to continue with his part-time job. He confides to you that he sees no reason to continue living and has bought a bottle of sleeping pills which he plans to take tonight. You would recommend the following intervention:

- a. Inform the patient that he must go into a psychiatric hospital as he is acutely suicidal.
- b. Allow the patient to make his own decision about taking his own life.
- c. Discuss with the patient the possibility of voluntary psychiatric hospitalization.
- d. _____

Comments: _____

4. Mrs. S. has had many problems trying to cope financially and emotionally with raising four children since her husband abandoned her six months ago. Recently she has been most upset by her landlord who insists on receiving the rent on the first of the month (often her welfare check is delayed and she is unable to pay him), yet refuses to repair falling ceiling plaster in the bedroom which threatens the safety of her children. This client confides to you that she has discovered a gun in the bottom of a chest

which her husband left behind. She believes that the gun is loaded, as her husband usually kept several loaded guns around the apartment which contributed to their marital discord. Now Mrs. S. insists that she is "at the end of her rope" and that if her landlord hassles her one more time she will shoot him. You would advise the following course of action:

- a. Discuss with Mr. S. alternative ways of coping with her landlord, but disregard her threat as she has a right to self-determination of action.
- b. Advise Mrs. S. that you must inform her landlord about her threat.
- c. Try to ascertain the seriousness of her threat and if you believe that she will follow through on her intent advise her that you must inform her landlord.
- d. _____

Comments: _____

5. Mrs.W. is diagnosed as a schizophrenic and has had multiple psychiatric hospitalizations in the last ten years. Last year she gave birth to a baby girl while in the hospital. The child was placed in foster care and now the child care agency is proposing that the child be put up for adoption. Ms. W. is now out of the hospital and living in a half-way house with other recently discharged psychiatric patients. Currently she exhibits no acute psychiatric symptoms, is cooperative about taking psychotropic medications, and has asked for your help in having her child returned to her. Which course of action would you follow?

- a. Tell Ms. W. that because of the nature of her illness she will not be able to have her child returned.
- b. Arrange with the child care agency to have visits between natural mother and child to further evaluate Ms. W's. readiness to take care of her child.
- c. Advise the foster care agency that in the natural mother's interest they should return the child as soon as possible to your client.
- d. _____

5. Comments:

6. In the waiting room of your agency you witness that a homeless person is denied service because he cannot provide proof of residence or source or income. What intervention would you select?

- a. Insist that the client be seen, as his needs should take precedence over administrative considerations.
- b. Invite the patient into your office and refer him to an appropriate agency without residency requirements and then discuss with other social workers a possible policy change of intake procedures.
- c. Take no action, as such policies are necessarily given the limited resources of the agency.
- d. _____

Comments: _____

7. As a medical social worker in a large hospital you are assigned the case of a 63 year old terminally ill man who has a prognosis of six months to live. He has not been told of the seriousness of his illness, but confronts you with the question "Am I dying?" Mr. S. Suspects that this is the case, because of the way that his doctor and his children are evasive when he asks questions about how serious his illness is. You would take the following course of action:

- a. Tell him the truth as gently and supportively as possible.
- b. Advise him to consult his doctor.
- c. Refrain from confirming his decision.
- d. _____

Comments: _____

8. You are working in a clinic which services adolescents and you have been assigned a 14 year old girl who has been playing hookey from school and staying out all night on frequent occasions. In your first interview with Sue B., she confides that she thinks she is pregnant and wants to keep her baby. She has not told her parents yet, but believes that they will be most angry and force her to have an abortion. Which alternative course of action would you pursue?

- a. Advise her that given the situation an abortion would be the best decision.
- b. Encourage Sue to have her parents come for a family session to discuss the problem and various alternative plans.
- c. Arrange immediately for the client to go to a home for pregnant teenagers, as she clearly wants to keep her baby.
- d. _____

Comments: _____

9. A 70 year old man with cardiovascular disease was recently discharged from the hospital after treatment for pneumonia. During the last year he has become increasingly forgetful. In fact, the fire department was summoned last week when he left the gas on by mistake and a fire ensued. Mr. R. has always been a very independent man and is very reluctant to give up his own apartment and move into a senior citizen residence. Which course of action would you follow?

- a. Help Mr. R. obtain home care services for eight hours a day as Mr. R. has the right to remain in his own apartment.
- b. Discuss with Mr. R. advantages of residences and take him to visit several which have vacancies.
- c. Arrange for Mr. R. to be admitted to a residence as soon as possible.

Comments: _____

10. Mrs. C., one of your clients in a family service agency, reports to you that she has taken an "off the books" waitress job to supplement her welfare income. She does not plan to tell the welfare department, since she especially needs the extra income now with her twins graduating from high school this year. You would intervene in the following way:

- a. Advise Mrs. C. to tell the welfare department, as your responsibility to promote truth-telling should take precedence.
- b. Discuss with Mrs. C. the possible consequences of her action, but realize that the ultimate decision is hers to make.
- c. Tell the client that her action is completely appropriate given the meager benefits provided by the welfare department.
- d. _____

Comments: _____

Thank you for taking time from your work schedule to complete this questionnaire. If you have any additional comments, please write them on the other side of the page.

Draft of Ethical Issues in Social Work Practice questionnaire.
Property of Elaine Congress - Not for circulation

Appendix 2- Measurement Scale**Tabulating responses to Ethical Issues in Practice Questionnaire**

1.	a. 0	b. 10	c. 5
2.	a. 0	b. 5	c. 10
3.	a. 5	b. 0	c. 10
4.	a. 0	b. 5	c. 10
5.	a. 0	b. 10	c. 5
6.	a. 5	b. 10	c. 0
7.	a. 10	b. 5	c. 0
8.	a. 0	b. 10	c. 5
9.	a. 0	b. 10	c. 5
10.	a. 5	b. 10	c. 0

The highest score for each question represents the most preferable response in terms of ethical practice.

Appendix 3 - Pretest Identifying Information Form

Thank you for helping me with my doctoral project on ethical issues in social work practice. Now I would like to ask you a few questions about yourself. Again, as with the responses to the questionnaire all your answers are completely confidential. Please circle or fill in as indicated.

1. Sex A. Male B. Female
2. Age A. Under 30 B. 30-40 C. 41-50 D. 51-60 E. over 61
3. Years of experience in the social work field:
 - A. 0-2 yrs. B. 3-5 C. 6-10 D. 11-15 D. over 15
4. What is your major method in school?
 - A. Casework B. Group Work C. Community Organization
 - D. Administration
5. In what field of practice are you currently employed or placed?
 - A. Family Service G. Addiction
 - B. School Social Work H. Community Development
 - C. Child Welfare I. Aged Services
 - D. Mental Health J. Corrections, Justice
 - E. Health K. World of Work (Unions, EAP)
 - F. Public Welfare L. Community Centers, settlements
 - M. Other (please specify) _____
 - N. Not employed in social work

Appendix 3 (continued)

6. As you think back to completing the questionnaire, did it sensitize you to ethical issues in social work practice?

7. Do you think differently now than in the beginning of the course? If so, how? Please discuss reasons for your answer. (Use the other side to complete your response.)

Appendix 4 - Pretest Covering Letter

June 12, 1985

Dear Field Instructor:

The Field Work faculty, with the Dean's approval, has suggested your name for testing the enclosed questionnaire. You were proposed on the basis of your experience as a field instructor; it was felt that your feedback at an early stage of this questionnaire's development would be most helpful to the researcher, Elaine Congress, who is herself an experienced field instructor and a student in Hunter's doctoral program.

Your responses will be held confidential, and only the researcher will have access to identifying data about you. This information will not be shared with personnel at Hunter.

Sincerely,

Elaine Marshack
Coordinator of Field Placement

EM/is

Appendix 5 - Research QuestionnaireQuestionnaire on Ethical Issues in Social Work Practice

This questionnaire consists of ten case vignettes from social work practice. Please complete the short answers as indicated and circle the specific intervention which most closely describes what you would do in that case example. A variety of answers are possible and experienced social workers will answer the questions in different ways.

Your answers are completely confidential in that they will not be shared with students, other workers in your agency, or the field instruction department at Hunter School of Social Work.

- I. Mrs. S. who has been your client for the last two years confides that she has decided to return to her estranged spouse and try once more to save her marriage. This client has been physically abused on several occasions, once even requiring emergency treatment for a broken arm. Last month she separated from her abusive, alcoholic husband and moved into a shelter for battered women.
 1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved which of the following interventions would you utilize? Please circle the best alternative.
 - a. Advise Mrs. S. to remain in the shelter, as her life is in danger if she returns to her husband.
 - b. Discuss consequences of returning to her spouse versus remaining in the shelter and allow Mrs. S. to make her own decision.
 - c. Tell the client that she should return to her husband if this is her wish.
 3. Explain the reasons for your choice based on the ethical issues involved which you have identified.
- II. A homeless woman known only as Sally lives on the street across from your agency. Sometimes staff members buy her coffee and bring her food. It is now summer, but she has multiple layers of clothing which she wears or discards depending on weather conditions. You have spoken to her about the possibility of entering a shelter, but she appears very resistant to leaving her street corner.

1. What are the ethical issues involved in this case example?
 2. Given the ethical issues which of the following courses of action would you take? Please circle the best alternative.
 - a. Advise the police to bring Sally to a shelter or psychiatric hospital as her life is in danger.
 - b. Tell Sally that she must go into a shelter.
 - c. Inform Sally about housing alternatives, but ultimately allow her to make her own decision about whether she wants to remain homeless.
 3. Explain the reason for your choice, based on the ethical issues involved which you have identified.
- III. Your patient in a mental health clinic is very depressed after breaking up with his girl friend. John T. has not been attending college classes and has not been able to continue living and has bought a bottle of sleeping pills which he plans to take tonight.
1. What are the ethical issues involved in this case example?
 2. Given the ethical issues involved, which of the following interventions would you recommend? Please circle your choice.
 - a. Inform your patient that he must go into a psychiatric hospital as he is acutely suicidal.
 - b. Allow the patient to make his own decision about taking his own life.
 - c. Discuss with the patient the possibility of voluntary psychiatric hospitalization.
 3. Explain the reason for your choice based on the ethical issues you have previously identified.
- IV. Mrs. S. has had many problems trying to cope financially and emotionally with raising four children since her husband abandoned her six months ago six months ago. Recently she has been most upset by her landlord who insists on receiving the rent on the first of the month (often her welfare check is delayed and she is unable to pay min), yet refuses to repair falling ceiling plaster in the bedroom which threatens

the safety of her children. This client confides to you that she has discovered a gun in the bottom of a chest which her husband left behind. She believes that the gun is loaded, as he husband usually kept several loaded guns around the apartment which contributed to their marital discord. Now Mrs. S. insists that she is "at the end of her rope" and if her landlord hassles her one more time she will shoot him.

1. What are the ethical issues involved in this case example?

 2. Given the ethical issues involved which course of action would you follow? Circle your preferred choice.
 - a. Discuss with Mrs. S. alternative ways of coping with her landlord, but disregard her threat as she has a right to self-determination of action.
 - b. Advise Mrs. S. that you must inform her landlord about her threat.
 - c. Try to ascertain the seriousness of her threat and if you believe that she will follow through on her intent advise her that you must inform her landlord.
 3. Explain the reason for your choice based on the ethical issues you have previously identified.
- V. Ms. W. is diagnosed as schizophrenic and has had multiple psychiatric hospitalizations in the last ten years. Last year she gave birth to a baby girl while in a psychiatric hospital. The child was placed in foster care and now the child care agency is proposing that the child be put up for adoption. Ms. W. is now out of the hospital and living in a half-way house with other recently discharged psychiatric patients. Currently she exhibits no acute psychotic symptoms, is cooperative about taking psychotropic medications, and has asked for your help in having her child returned to her.
1. What are the ethical issues involved in this case example?

2. Given the ethical issues involved which of the following interventions would you recommend? Circle your preferred choice.
 - a. Tell Ms. W. that because of the nature of her illness she will never be able to have her child returned.
 - b. Arrange with the child care agency to have visits between natural mother and child to further evaluate Ms. W's. readiness to take care of her child.
 - c. Advise the foster care agency that in the natural mother's interest they should return the child as soon as possible to your client.
 3. Explain the reason for your choice based on the ethical issues you have identified.
- VI. In the waiting room of your agency you witness that a homeless person is denied service because he cannot provide proof of residence or source of income.
1. What are the ethical issues involved in this case vignette?
 2. Given the ethical issues involved which of the following interventions would you utilize? Please circle your choice.
 - a. Insist that the client be seen, as his needs should take precedence over administrative considerations.
 - b. Invite the patient into your office and refer him to an appropriate agency without residency requirements and then discuss with other social workers a possible policy change of intake procedures.
 - c. Take no action, as such policies are necessarily given the limited resources of the agency.
 3. Explain the reasons for your choice based on the ethical issues you have previously identified.
- VII. As a medical social worker in a large hospital, you are assigned the case of a 55 year old terminally ill man who has a prognosis of six months to live. He has not been told of the seriousness of his illness, but confronts you with the question "Am I dying?" Mr. S. suspects that this is the case

because of the way that his doctor and his children are evasive when he asks questions about how serious his illness is.

1. What are the ethical issues involved in this case?
2. Given the ethical issues involved, which of the following interventions would you choose? Circle your preferred choice.
 - a. Tell him the truth as gently and supportively as possible.
 - b. Advise him to consult his doctor.
 - c. Refrain from confirming his suspicion.
3. Explain the reason for your choice based on the ethical issues you have previously identified.

VIII. You are working in a clinic which services adolescents and you have been assigned a 14 year old girl who has been playing hookey from school and staying out all night on frequent occasions. In your first interview with Sue B. she confides that she thinks she is pregnant and wants to keep her baby. She has not told her parents yet, but believes that they will be most angry and force her to have an abortion.

1. What are the ethical issues involved in this case example?
2. Given the ethical issues, which alternative would you follow?
 - a. Advise her that given the situation an abortion would be the best decision.
 - b. Encourage Sue to have her parents come for a family session to discuss the problem and various alternative plans.
 - c. Arrange immediately for the client to go to a home for pregnant teenagers, as she clearly wants to keep her baby.
3. Explain the reason for your choice given the ethical issues you have previously identified.

- IX. A 70 year old man with cardiovascular disease was recently discharged from the hospital after treatment for pneumonia. During the last year he has become increasingly forgetful. In fact, the fire department was summoned last week when he left the gas on by mistake and a fire ensued. Mr. R. has always been a very independent man and is very reluctant to give up his own apartment and move into a senior citizen residence.
1. What are the ethical issues involved in this case example?

 2. Given the ethical issues involved, which of the following interventions would you select? Circle the chosen alternative.
 - a. Help Mr. R. obtain home care services for eight hours a day, as Mr. R. has the right to remain in his own apartment.
 - b. Discuss with Mr. R. advantages of residences and take him to visit several which have vacancies.
 - c. Arrange for Mr. R. to be admitted to a residence as soon as possible.
 3. Explain the reason for your choice based on the ethical issues you have previously identified.
- X. Mrs. C., one of your clients in a family service agency, reports to you that she has taken an "off the books" waitress job to supplement her welfare income. She does not plan to tell the welfare department, since she especially needs the extra income now with her twins graduating from high school this year.
1. What are the ethical issues involved in this case example?

2. Given the ethical issues involved which intervention would you select?
 - a. Advise Mrs. C. to tell the welfare department, as your responsibility to promote truth-telling should take precedence.
 - b. Discuss with Mrs. C. the possible consequences of her action, but realize that the ultimate decision is hers to make.
 - c. Tell the client that her action is completely appropriate given the meager benefits provided by the welfare department.
3. Explain the reason for your choice based on the ethical issues you previously identified.

Thank you for answering this questionnaire. If you have additional comments, please write them on the other side of this page. Also, for research purposes please answer a few questions about yourself on the following page.

Ethical Issues in Social Work Practice
questionnaire -- property of Elaine Congress

5. Current job title

Agency supervisor _____

Agency administrator _____

Agency practitioner _____

Other (please specify) _____

6. Years of professional practice post MSW _____

7. Years in present agency _____

8. Do you feel that this questionnaire has increased your sensitivity to ethical issues in social work practice? If so, how? If not, why not? (Please use other side for additional comments.)

Thank you for your participation in this doctoral study on ethical issues in social work practice. At a later date some of you may be contacted for a follow-up interview about ethical issues in practice.

Appendix 6 - Interview Schedule**Guide to Interviews**

1. What was reaction to questionnaire?
2. Did it increase their sensitivity to ethical issues in practice? If so, how? If not, why not?
3. What was the most difficult ethical issue and dilemma that they have encountered in their practice?
4. How was it resolved? Did they feel that the supervisor/ agency was supportive?
5. What other ethical issues and dilemmas have they encountered in their practice?
6. How were they resolved? Did they feel that the supervisor/ agency was supportive?
7. Were they ever impeded in acting according to their ethical decision? What and how were they impeded?
8. Does their agency have an ethical review board? Do they feel that a committee of this type would be helpful in resolving ethical issues.
9. What were their reactions to supervising students?
10. How long have they been professional social workers?

Appendix 6 - Results of Interviews

Interview #1

Female

White

Casework

Free-standing mental health clinic

1. Positive reaction to questionnaire - needed more time.
2. Did increase her sensitivity to ethical issues in practice - Helped to make "subliminal dull awareness of ethical issues" more conscious.
3. Most difficult ethical issue was when she believed that colleague acted in unethical, unprofessional way by condoning anti-social behavior of client to other group members.
4. Interviewee reported behavior to the Director; no further action was taken; colleague is still employed at agency although Director said that he would take care of it (questioned what this means)
5. Involuntary clients who are on parole or probation - question how much to share with probation officer - welfare clients who work
6. Subject usually opts for client - places client needs before community - fee's that supervisor and agency are supportive.

Interview #1 (cont'd.)

7. Not really impeded except for first example in which she felt agency could have taken stronger position.
8. Agency does not have an ethical review board - believes that this would be useful in resolving conflicts like #3.
9. Enjoys supervising student - has become more aware of all she knows in field.
10. 6 years post-MSW experience.

Interview #2

Female

White

Community Organization

State mental health agency

1. Positive reaction to questionnaire - casework orientation of vignettes.
2. Made her more aware of ethical issues and dilemmas in casework practice.
3. Most difficult situation - community group she worked with did not want her student to participate in all activities because of student's ethnic background.
4. Interviewee discussed problem with all parties involved - felt that issue was resolved as much as could be - Her agency was supportive.
5. Politics - agency is located in conservative area, she herself is liberal social worker in community relations - how you work with an elected official but not for him - this is especially crucial since she is employee of state and budget for next year could be detrimentally affected.
6. Not easily resolved - agency requires her to walk a thin line.
7. Concern about continued funding prevents her from being as adamant about ethical choices as she would like to be.

Interview # 2 (cont'd.)

8. Agency does not have an ethical review board, but she feels it would be useful - wonders if it would be coopted.
9. Finds student supervision stimulating.
10. 3 years post-MSW.

Interview #3

Male

White

Casework

Social service agency for elderly

1. Positive reaction.
2. Became more aware of ethical issues in practice.
3. Most difficult situation - person competent or not competent - difficult to say incompetent as this means nursing home placement with greatly curtailed freedom.
4. Difficult situation discussed with supervisor, also psychiatric evaluation - agency generally supportive.
5. Issue of suicide intent - many elderly talk about suicide - important to determine how serious they are.
6. Agency offers backup in terms of supervisor and psychiatrist opinion - agency generally supportive
7. Nothing has prevented him from acting in ethical way.
8. Agency does not have ethical review board - questions how it would work - supervisor and psychiatrist function as informal review board.
9. Enjoys student supervision
10. 3 years post-MSW experience

Interview #4

Female

White

Casework

Parochial School

1. Positive, limited time
2. Yes, thought more about ethical issues
3. Lack of resources for learning disabled children - yet dilemma of referring out
4. Administration and parents both impede decision to refer out
5. Child was expelled, she disagreed with administration.
6. Administration view was upheld
7. Sometimes administration, parent, and social worker in conflict - administration usually wins out.
8. No, Catholic church has hierarchy of authority
9. Difficult time in supervising student as student to be dropped
10. 6 years

Interview #5

Male

White

Casework

Neurology ward in medical hospital

1. Positive, but often wanted to write in "d" response
2. Sensitive to ethical issues already in type of work.
3. Discharge planning - dichotomy between safety and self-determination - difficult to provide for someone what they really need.
4. Doctors pressure to have patients discharged.
5. Do not resituate - doctors often conference with family - hospital is fairly conservative - decision of teaching hospital re: admission.
6. Fear of lawsuits seem to be motivating factors - social workers have more time to speak with patient and families.
7. No ethical review committee - believes it will be motivated by fear of lawsuit.
9. Enjoys supervising students
10. 3 years post-MSW

Interview #6

Female

White

Casework

Psychiatric out-patient affiliated with medical hospital

1. Positive
2. Made her think more of ethical issues and dilemmas.
3. Confidentiality issues - employees can be seen up to 10 times counseled to go elsewhere
4. Employers from other parts of hospital insist on information, supervisor is supportive in confidentiality.
5. Social worker very vulnerable to law suit 20 years later; social worker expected to work with every one - represent both mother and child interests.
6. Questionable support from administration
7. Not really
8. Special review committee - Monday morning quarterbacking - basically deals with suicide attempt - questions how it would be used
9. Enjoys supervising student; realizes all she knows in the field
10. 7 years

Interview #7

Female

White

Casework

Social service agency for the elderly

1. Positive, made her more conscious to ethical issues encountered in practice.
2. Yes, same as above
3. Medicaid has policy of not transferring money for two years - recently participated in conference with lawyer and client in which lawyer advised client to cut husband with Alzheimer disease out of her will. What is appropriate role for social worker with deception encouraged in order to get Medicaid?
4. Social worker did nothing; sees self not as agent of Medicaid; supervisor is very supportive.
5. Many receiving restitution monies - should this information be shared with the welfare department, with the agency so that patient can pay for home care.
6. Does not report to welfare, but has obligation to tell agency - Agency is supportive.
7. Was never impeded in acting in way she felt was ethical.
8. Agency does not have an ethical review committee; not that necessary as agency is very supportive including supervisor.

Interview #7 (cont'd.)

9. Some anxieties about role change as supervisor; eager to learn more about supervising.
10. 5 years

Interview # 8

Female

Hispanic

Casework

Psychiatric Inpatient

1. Positive
2. Has always been interested in ethical issues, but the questionnaire encouraged her to think of ethical dilemmas in other settings.
3. Case of 17 year old patient, mother of 7 month old child, who has been inpatient for five months. Child is with father. Child welfare committee pressuring therapist to have child taken away. Problem of whose interest should she represent - the child, the mother, the father
4. Has not been resolved yet - Administration is pushing to have child removed because they are afraid of scandal.
5. Conflict over contact with family especially when adolescent describes sexual activity, abortion.
6. Client encouraged to bring up issue herself with family - supervisor and team very supportive in conflicts like this.
7. With first case social worker believed that administration impeded her acting as she wanted because of fear of scandal.
8. No, wants to establish ethical review committee because of conflicts like this case.

Interview #8 (Cont'd.)

9. Enjoys student supervision; pleased and surprised to learn how much she knows.
10. 3 years

Interview # 9

Female

Black

City community relations department

Administration

1. Mixed, felt that it was casework oriented
2. Though she was cognizant of most of issues, even though she did not deal with them in daily practice
3. Hotline not permissible to monitor. Thus, she was involved in changing agency monitor.
4. Changing agency monitor so as to leave program intact - have to deal with political realities - Her supervisor advised this measure
5. Issues of teenage pregnancy - baby sitting paid for if girl went to trade school, not regular school
6. Advocacy came from within the system - not usual procedure.
7. Other part of system HRA had passed the regulation - yet through advocacy they were able to have rule changed.
8. No ethical review board in their agency, not sure how it would function
9. Likes supervising students, even though sometimes feels disconnected as student placed in agency where she used to work.
10. 8 years

Interview #10

Female

White

Casework

Foster care agency

1. Positive, dilemmas frequently encountered in practice
2. Thought more about ethical dilemmas she had encountered
3. Termination of parental rights - may be conflict of interest between parent and child
4. Usually opts for the child, supervisor usually supportive in decision, all child abuse cases go to administrator who is very fearful of scandal now.
5. Removing child from the home tonight, as result of administrative decision
6. Feel that she must go along with administrative decision - supervisor supporting this.
7. Describes social workers as very supportive - all the administrators and supervisors are social workers.
8. No ethical review committee, but it would be useful
9. Enjoys supervising students.
10. 3 years

Appendix 7

Table 30

Key Variables as Related to Multiple/Client Issues

<u>Question</u>	<u>Sex*</u>		<u>Age*</u>			<u>Title*</u>		<u>Years Experience*</u>	
	<u>M</u>	<u>F</u>	<u>O</u>	<u>M</u>	<u>Y</u>	<u>P</u>	<u>A</u>	<u>Less</u>	<u>More</u>
1. Multiple Client	47% 12%	31% 39%	27% 54%	31% 25%	60% 20%	43% 38%	33% 17%	41% 29%	29% 33%
2. Multiple Client	47% 41%	17% 44%	34% 33%	21% 44%	34% 40%	24% 41%	33% 33%	12% 41%	29% 37%
3. Multiple Client	42% 12%	14% 29%	34% 27%	14% 28%	27% 27%	18% 33%	29% 12%	18% 24%	25% 29%
4. Multiple Client	36% 18%	19% 19%	40% 27%	15% 21%	27% 7%	27% 24%	17% 25%	24% 15%	20% 25%
5. Multiple Client	53% 18%	49% 17%	60% 13%	39% 25%	60% 7%	53% 21%	46% 12%	47% 15%	54% 21%
6. Multiple Client	30% 24%	19% 36%	20% 13%	15% 40%	20% 36%	21% 35%	16% 33%	15% 32%	21% 25%
7. Multiple Client	12% 70%	12% 65%	0% 86%	12% 50%	20% 67%	18% 53%	4% 62%	18% 54%	4% 62%
8. Multiple Client	71% 6%	32% 41%	47% 40%	32% 29%	47% 27%	47% 35%	38% 25%	41% 32%	50% 29%
9. Multiple Client	64% 6%	39% 5%	64% 33%	37% 11%	47% 14%	56% 12%	41% 8%	47% 35%	54% 12%
10. Multiple Client	35% 18%	11% 22%	27% 33%	22% 18%	14% 7%	18% 18%	17% 25%	18% 18%	21% 25%

Key

Sex M = Male
F = Female

Age O = Oldest, over 40
M = Middle, 31-40
Y = Youngest, 30 and under

Title P = Practitioner
A = Administrator, non-practitioner

Years of Experience Less = 3-5 years
More = over 5 years

Note: Percentages for multiple and client issues do not total 100%, as other responses (Paternalistic Safety, Other Interests, and Alternative Responses) occurred.

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