

SOCIAL WORKERS AND THE NASW CODE OF ETHICS:  
BELIEF, BEHAVIOR, DISJUNCTURE

by

NIKKI NELSON DIFRANKS

A dissertation submitted to the Graduate Faculty in Social Welfare in  
partial fulfillment of the requirements of the degree of Doctor of Philosophy,  
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August 31, 2005  
Date

\_\_\_\_\_  
Michael J. Smith  
Chair of Examining Committee

August 31, 2005  
Date

\_\_\_\_\_  
Michael Fabricant  
Executive Officer

\_\_\_\_\_  
Elaine Congress

\_\_\_\_\_  
Paul Kurzman

\_\_\_\_\_  
Michael Fabricant  
Supervisory Committee

THE CITY UNIVERSITY OF NEW YORK

## Abstract

SOCIAL WORKERS AND THE NASW CODE OF ETHICS:  
BELIEF, BEHAVIOR, DISJUNCTURE

By

Nikki Nelson DiFranks

Advisor: Professor Michael J. Smith

A quantitative descriptive survey of a national sample of social workers examined discrepancies between belief in tenets of the National Association of Social Workers' Code of Ethics and behavior that implements the Code, as well as social workers' disjunctive distress that may occur when belief and behavior are discordant.

The study also examined relationships between setting and disjuncture and ethics education and disjuncture. This was accomplished by the administration of an instrument that the author designed that is based upon principles set forth in the NASW Code of Ethics. The instrument incorporated a validated scale, the Abbott short-form Personal Opinions Scale. The study was conducted as a mailed survey to a probability sample of 500 social workers throughout the United States, who are MSW members of NASW.

The study found that there is disjunctive distress when belief and behavior scores are discordant; low disjunctive distress is found when behavior is highly congruent with the Code; and high disjunctive distress when behavior is non-congruent with the Code. Belief in the Code did not influence behavior congruent with the Code, so that other variables, such as setting, may affect behavior. The study

found there is significant difference in disjuncture scores among respondents in different work settings. Disjuncture scores were the highest in public agencies and lowest in private agencies. However, host versus non-host setting does not make a difference in terms of disjuncture, belief, behavior and discordance.

In terms of social work ethics education, there is higher discordance of belief/behavior scores among those who did not take a separate ethics course but belief scores are lower among those did. Those who have taken separate courses may have become more aware of discrepancies between belief and behavior and may have modified their beliefs to accommodate the discordance. There is lower disjuncture among students who said they learned from teachers who modeled ethics; there is a relationship between low amounts of supervisory feedback and higher disjuncture; and most social workers believe they value their work more when they have supervision. However, social workers report that supervision decreases with experience.

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I also acknowledge gratitude to those who have inspired me academically and professionally: Professor Michael J. Smith, my committee chairperson, who was willing to take a chance with me and whose smiling face and research skills kept me going; my committee member, Dean Paul Kurzman, who patiently coached me through my second exam and who urged me to stay the difficult course; my committee member, Dean Elaine Congress, whose encouragement helped make this a reality when it seemed impossible; Professor Irwin Epstein, who distilled my fifty random thoughts into the title of this dissertation; my professors at Arcadia University, New School University, and Columbia University School of Social Work, who left me with a hunger to learn more; my excellent professors here at CUNY, especially Professors Andrea Savage and Harold Weissman; my supervisor at Beth Israel, Dr. Philip Yanowitch, who let me go when I needed to do this; and Dr. Ellen Levine, who showed me the possibility.

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## Preface

### **Interest in Topic**

The author's interest in social work ethics began over a dozen years ago, when she had begun to notice some of the paradoxes in the Code of Ethics. At the time, the author was unaware of Muriel Pumphrey's recommendation that social work ethics be taught by examining the dichotomies inherent in social work values. (Pumphrey, 1959)

Thinking she was 'on' to something no one had noticed before, the author wrote a paper for a now defunct publication of the Columbia University School of Social Work, in which she examined paternalism and self-determination as difficult to reconcile concepts whose roots were embedded in the NASW Code of Ethics itself. For example, professional paternalism means that there may be situations in which social workers have a duty to protect clients from themselves (Reamer, 1983) or even to protect others from their clients.<sup>1</sup> This paternalism may be directly opposite the principle of client self-determination which states that "social workers respect and promote the right of clients to self-determination and assist clients in their efforts to identify and clarify their goals." (Code of Ethics of the National Association of Social Workers, 1999)

Also, the Code suggests that we must promote maximum self-determination, while at the same time ensuring that public policies, often paternalistic in nature, are developed and implemented towards the goal of social justice and for the good of society as a whole.<sup>2</sup>

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<sup>1</sup> Reamer says, "Paternalism can thus take a variety of forms in social work. In general, paternalistic actions can be placed in three categories: interference with an individual's intentions or actions; deliberate withholding of information; and deliberate dissemination of misinformation." (Reamer, 1993, p.54)

<sup>2</sup> An example of a paternalistic policy would be "requiring that a client be institutionalized against his or her wishes." (Reamer, 1993, p.54)

The author suggested resolution of the incompatibilities via professional role function. (DiFranks, 1994; Wilding & George 4(4)).<sup>3 4</sup> Subsequently, the author began to notice more dichotomies in the Code and then, of course, came the inevitable discovery that her observations were hardly novel.

Nevertheless, the author's interest in the area continued. In 1998 and 1999, the NASW Journal, Social Work, published two special centennial issues. (Social Work 43(6); 44(4)) The author was captured by the contents and noticed that her profession was asking the very questions she had, both personally and professionally, been asking herself. These were questions such as: Who are we? How did we get here? What is our identity? What is it that we do? What is our mission? How can you know me (us)? How can I know you? Where are we headed?

These are questions that people have been asking since the beginning of time. They are not unique to the author or to social work, but they seem at their most puzzling when viewed through the peculiar bi-focal lenses of the social work profession, where dichotomies such as serving the individual client versus promoting social change, and commitment to the client versus commitment to the agency go hand in hand.

### **Relevance of Ethics**

Why is it important to study social work ethics? C. Wright Mills has said, "The sociological imagination . . . is a quality of mind that seems most dramatically to promise

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<sup>3</sup> That is, administrative roles and policy-making roles may require a more professionally paternalistic stance, while individual casework would allow, in most cases, an emphasis upon self-determination.

<sup>4</sup> Specifically, Wilding and George wrote about social policy as structure-building activity. The planning aspects of policy-making activities imply a paternalism of planning for the benefit of a whole society.

an understanding of the intimated realities of ourselves in connection with larger social realities.” (Mills, 1959, p.15) The sociological imagination lives in the synapses between history and biography, man and society. The individual social worker who struggles with the ethical dilemmas of her culture, her profession and her personal life is struggling to express her sociological imagination.

In recent years, an interest in ethics in social work has burgeoned. (Fleck-Henderson, 1991; Strom-Gottfried, 2000) And, as we set forth into the new millennium, we are faced with ethical dilemmas unprecedented in the history of mankind. For example, although we have always been struggling with the question of “What Is Human?” we have never been as pressed to resolve this for ourselves as we are today.

We are told that by the end of our new century we may be combined, physiologically, with machines (i.e. computers) as memory chips are implanted in our brains. (Maguire and McGee, 1999) There already exists the technology to clone ourselves and harvest the body parts, if we wish, or perhaps this would be accomplished at the cloned embryo stage, obviating the need for bringing our cloned selves to maturity.

In a sense, we may have been practicing for the question of “What is Human?” in our struggles with abortion rights, in vitro fertilization, postmenopausal pregnancy,

ethanasia, chimeras<sup>5</sup> (Shreeve, 2005) and animal rights, where philosophers have argued that a seven year old dog may have more distinctly ‘human’ attributes than a new born child. (Specter, 1999; O’Brien, 2003)<sup>6</sup> How we define ‘human’ will shape the ethical choices that we make as a species, as a society, as social workers, and as individuals. (Alexander, 2004) And, one hopes, our ethics, including the ethics of our social work profession, will shape those definitions. Deciding what defines ‘human’ is just one example of the kinds of ethical choices with which we will struggle.

It may be said that to live one’s life is to apply ethics. It is what we are doing every day, in each decision we make about what is right and wrong, good or bad. This brings us back to the “sociological imagination” of C. Wright Mills. When we are aware of the way in which our personal and professional ethical choices connect to the past and future, as well as to the clients with whom we work and to our society as a whole, we, as social workers, are exercising the “sociological imagination.” That is why it is important to study social work ethics.

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<sup>5</sup> Mammals with human stem cells injected into their brains or other organs.

<sup>6</sup> The Peter Singer “argument from marginal cases” suggests that an ape with an I.Q. of 90 has as much right to society’s protection as a human with an I.Q. of 50 or less. Many social workers worry about the “animalization” of the cognitively impaired. The Singer argument does offer a powerful rationalization for abortion, since an unborn fetus is hardly a fully sentient human being. Unfortunately, this argument also can be applied to less than sentient but completely normal new-borns, as well as less fortunate new-borns, such those thought unlikely to survive or those severely disabled. The problem of what gets humanized and who gets animalized is a thorny, unresolved ethical dilemma.

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## **Chapter 1 -- Introduction and Parameters of the Study**

### **Introduction**

The author has selected areas of social work ethics that remain unexamined. At the present time, there has been little work done in the area of discrepancy between social workers' beliefs and behaviors. This focus of studying the discrepancy between beliefs and behaviors can be sharpened by grounding the study in the NASW Code of Ethics. In other words, does a discrepancy exist between social workers' belief in the tenets of the NASW Code of Ethics and behavior that is consonant with the Code of Ethics, and is there an experience of disjuncture (dilemma-induced distress) when this discrepancy occurs? This is the central thesis of this study.

Studying beliefs, behaviors and disjuncture assists us in evaluating ourselves as social workers in regard to the following questions: Do we believe in what we are supposed to be doing, according to the guidelines of the NASW Code of Ethics? Do we behave as we are supposed to behave, according to the Code? Do we feel tension when there is discordance between belief and behavior? Do work-setting, supervision and type of ethics education have a relationship to experienced tensions and disjuncture? There has been little work done regarding differences in social work ethics education,<sup>7</sup> the impact of supervisory feedback in regard to disjuncture, or employment setting differences, although Paul Kurzman has suggested that there might be differences in "constraints and supports" in different settings. (Kurzman, 1984) Finally, do we agree with Harold Lewis that social work ethics education can be modeled by ethical teaching? (Lewis, 1987)

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<sup>7</sup> This refers to different ways that ethics education may be taught to social workers, such as integrating the ethics material into each course, teaching social work ethics via a separate course or modeling social work ethics via ethical teaching.

Studying the disjuncture caused by discordance between ethical beliefs and behavior gives us information about ourselves. For example, discrepancies between belief and behavior, without tension -- which we have not expected to find -- could indicate that social workers have moral inconsistencies that should trouble the profession. Few discrepancies and low disjuncture indicate that we are on a morally consistent path, which is right where, presumably, we should wish to be.

Perhaps discrepancies (between belief and behavior) and concomitant tension are only associated with certain work-settings. Perhaps discrepancies and tension are associated with educational methodology. In that case, we might identify the method of teaching that might help sort out the issues and produce less tension and discrepancy between belief/behavior. Also, supervisory feedback, or the lack thereof, may be perceived by social workers as having an impact upon the experience of disjuncture. Although the study grounds beliefs in the Code of Ethics, it does not explore social workers' global beliefs about ethics. Rather, the study asks a social worker about beliefs based upon Code values. Beliefs in the tenets of the Code are then contrasted with social workers' self-reported behaviors. Where there is lack of consonance, an experience of disjuncture may occur. Social workers are directly asked about the tensions or disjuncture that occurs when they do not behave in consonance with their beliefs. Questions about setting, education and supervisory feedback are correlated with level of tension. Finally the educational data helps define the optimal social work ethics education modality and gives us information as to whether ethical teaching effectively models social work ethics.

### **Parameters of Study**

This study proposes an examination of social workers' experienced disjuncture in the face of discordant ethical beliefs and behaviors; in addition, it examines relationships between setting and disjuncture and education and disjuncture. This is accomplished through the administration of an instrument that the author designed that is based upon the NASW Code of Ethics. The instrument also incorporates an already existing and well-validated scale. (Abbott, 1988; Abbott, 1999; Abbott, 2003; Boland, 2002)

This questionnaire that is designed to measure beliefs, behaviors, and disjuncture is based primarily on the principles and values of the Code, with a fair representation of questions that reflect the standards of the Code. It would be too lengthy an instrument if it were to cover each standard in the Code and all its sub-categories. The instrument includes the short-form Professional Opinions Scale in order to operationalize the concept of "belief." The POS will be detailed in the literature review and in the methodology sections of this proposal.

This study examines obligations and prohibitions in terms of belief and behavior. Any study that uses principles set forth in the NASW Code must be an examination of the obligations and prohibitions of the social worker. These obligations and prohibitions are the duties of the social worker, and it therefore follows that the study is grounded in theory of duty, which will be further explicated in both the review of social work ethics literature and intellectual framework sections of this research study.

The author studies social workers' beliefs about their duties and she studies how social workers behave in response to these duties. She investigates whether social workers accept these duties as tenets in which they believe. That is, are these duties

represented or not represented as beliefs? When these duties are represented as beliefs, are they shallow or deeply held? Finally, she studies whether or not there is a disjunctive experience for the social worker when there is a wide discordance between belief in duties and behavior regarding duties as prescribed and proscribed by the Code.

Adjunctly, she investigates the education that promotes the assimilation of these duties, as well as the supervision that may maintain the belief and enactment of these duties.

The Code of Ethics was revised in 1996, editorially revised in 1999, and is now twenty-seven pages in length. The early NASW Code from 1960 was only one page in length. The 1996 Code is divided into sections that review the ethical principles that are based on social work's core values; this is followed by a much longer ethical standards section, with responsibilities to clients, colleagues and practice settings. The history of the development of the Code will be reviewed in the next section of this study.

This is an applied ethics study that selects the major standard of ethical guidelines for professional social workers. That standard is the NASW 1999 revised version of the 1996 Code of Ethics that formally governs nearly 155,000 members and is used as a measure of adjudication for some 845,000 self-identified social workers (NASW News 47(5)), regardless of whether or not they are members. In other words, even when self-defined social workers do not belong to NASW, courts usually look to the NASW Code of Ethics as the guideline for determining culpability. (Murphy & Koppels, 1997.)

It should be noted that the NASW Code of Ethics may not cover the individual requirements of each and every state's licenses and laws. The Code, itself, says: "Alleged violations of the Code would be subject to a peer review process. Such processes are generally separate from legal or administrative procedures and insulated

from legal review or proceedings to allow the profession to counsel and discipline its own members.” (Code of Ethics of the National Association of Social Workers, 1999) This study is concerned strictly with the Code, whether NASW members believe and follow that Code, and whether tensions occur when they do not. This study is not concerned with the state-to-state variations of licensure or law.

## **Chapter 2 -- History**

The history of social work's ethical development reached an apogee with its promulgation of a formal ethical code. The author's dissertation topic is tied to this historical development because it is an examination of the principles of the NASW Code of Ethics in terms of what she discovered to be unexamined in her reading. This Code and many unexamined or inconclusive social work issues have roots that go back to the latter part of the nineteenth century and the interest in social reform.

Social work began in the late 1870's - 1880's with concerns about pauperism. (Reamer, 1998a) These concerns were met with attempts to improve the lives of people by reforming them. (Reamer, 1993) The poor were often thought to be lacking or deficient in moral character. Thus, pointing out deficiencies was a way of providing assistance. Sobriety, cleanliness, and hard work were virtues that could be taught to people. The 'friendly visitor,' often a volunteering, church-going woman of comfortable means, would call upon the indigent to impart her higher-toned values. This early paternalistic (maternalistic) phase of our history has been known as the morality period. Thus, well before we had a Code, we were preoccupied with morality and values. (Reamer, 2001a)

The first course on social reform was offered in 1885 by Dr. Francis Peabody at Harvard University. The title of the course was "The Ethics of Social Reform: the Questions of Charity, Divorce, the Indians, Labor Prisons, Temperance, etc., as Problems of Practical Ethics – Lectures, Essays & Practical Observations." (Alexander, 1997) Again, one sees the field's early connection between the social and the ethical.

This morality period, which began in the last two decades of the nineteenth century, was characterized by charity organization societies (COS), whose largesse was dispensed with doses of exhortation to improve character. (Reamer, 43(6); Reamer, 1999) The COS phase of social work history is synonymous with the paternalistic morality period, and this phase endured well into the early twentieth century. (Reamer, 1993)

In tandem with COS's, came the settlement houses of the progressive era. These began to spring up in inner cities, and with them came a change in ethos, a subtle shift in values. The indigent were no longer held fully responsible for their state. Settlement house workers pointed out that the structure of society could be held largely accountable for social problems. The shift was from socially reforming the individual to reforming the social structure. The emphasis was now more in keeping with an ethic of social justice, thought by many to be the backbone of our profession. (Crabtree, 2000)

The 1920's witnessed Mary Richmond's introduction of the casework approach to social work. (Specht & Courtney, 1994) Once again, the focus shifted and this time individual well-being became a targeted goal.<sup>8</sup>

It follows that the early Freudian vision of psychiatry would fit well with casework, since both focus intensely upon individual development, oral communication and client/patient well-being. Social work embraced psychiatry because it gave the field its share of scientific theory, primarily Freudian theory. According to many, social work's subsequent preoccupation with psychiatry detoured social work from the social justice

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<sup>8</sup> History has tended to dichotomize the social work shifts in interest as shifts between social action versus practice. Harold Lewis, in particular, found this dichotomization to be divisive and unnecessary, which will be detailed in the literature review. (Lewis, 1977)

perspective. (Specht & Courtney, 1994) Nevertheless, social casework remains a viable approach, still in use today.

Much of this adaptation of another discipline's theoretical framework was an attempt to legitimize ourselves as professionals. Porter Lee, of the New York School of Philanthropy, asserted that the profession must not respond to the challenges facing it "by going back to a day when social work was predominantly a cause." (Lee, 1937, p.23) For Lee, social work must be both: a cause or social movement aimed at social justice AND a function, or provider of services. With this sentiment, social work as a professional social service became the prevailing theme. (Specht & Courtney, 1994) Lee's struggle with social work as a cause versus social work as a provider of services is a major ethical issue that will be further detailed in the review of social work ethics literature section of this paper.

The period of social work that stretches roughly across forty years, from the 1930's to the 1960's, has been called the values period, as we struggled to determine what the profession's values would be. (Reamer, 2001a) Two decades of social activism within the values period, the 1930's and the 1960's, reminded the profession that its sole focus was not individual mental health. The shifting between individual mental health and activism is the origination of the "mission abandonment debate," which posits that social work had denied its mission to advocate for the disadvantaged. (Specht & Courtney, 1994; Billups, 2002)

It was during the values period that our Code of Ethics evolved. An early experimental draft of a code, attributed to Mary Richmond, was published in the 1920's. (Pumphrey, 1959; Reamer, 1998a; Congress, 1999) In 1947, the American Association

of Social Workers formulated and adopted a formal code, which was called “Principles of Professional Conduct.” (Reamer, 1998a; Ain, 2001) It was not until 1960, however, that the first NASW Code of Ethics was written. (Ain, 2001) This was in response to our need to legitimize ourselves and hold the members of our profession accountable for their actions.

The Code has had two major revisions since the 1960, growing from a mere one-page outline of appropriate values to a document issued in 1996 of twenty-seven pages.

(Reamer, 1998a; Congress, 1999) The first major revision, however, was made under the direction of a task force headed by Charles Levy in 1977. (Reamer, 1998a) This revision, ten pages in length, consisting of six sections with a preamble, was adopted in 1979.

(Congress, 1999) According to Ain and Nulman, the work of Jane Addams, based on core values of self-determination, equality and human dignity, became the conceptual foundation for the 1979 Code of Ethics. (Ain, 2001; Nulman, 1984)

The 1979 Code underwent minor revisions in 1986 and 1993. The first revisions (1986) were in response to an FTC mandate to ensure the Code would not promote a restraint of trade. The latter revisions (1993) spoke exclusively to social worker impairment and the prohibition of dual relationships. (Reamer, 1999) These had been widely acknowledged as two important areas of omission in the prior versions of the Code.

The second major revision of the Code was under the direction of Frederic Reamer, who chaired the NASW Task Force, charged in 1994 with drafting a new version of the Code. This task force reviewed all the literature on social work ethics and then sought to revise the Code in a way that would reflect the literature and prevailing professional

standards and opinion. The committee also called upon other social work organizations to make their contributions, including NABSW, CSWE, and the American Association of State Social Work Boards. (Reamer, 1998a)

The resulting 1996 Code is divided into sections that review the ethical principles which are based on social work's core values; this is followed by a much longer ethical standards section, delineating responsibilities to clients, colleagues and practice settings. The social work principles of the Code are based upon the core social work values of service, social justice, dignity and worth of the individual, importance of human relationships, integrity and competence. The ethical standards include 1) social workers' ethical responsibilities to clients; 2) social workers' responsibilities to colleagues; 3) responsibilities in practice settings; 4) responsibilities as professionals; and 5) responsibilities to the broader society. (Reamer, 1998a)

In 1999, the NASW Delegate Assembly made editorial revisions to the Code that had been approved by the Delegate Assembly in 1996. (Code of Ethics of the National Association of Social Workers, 1999) These revisions included the removal (in section 1.07, Privacy and Confidentiality) of the following words: "or when laws or regulations require disclosure without a client's consent." (Reamer, 1998a; Code of Ethics of the National Association of Social Workers, 1999) The deletion of the above phrase was based on the objections of the NASW's National Committee on Lesbian, Gay and Bisexual Issues; the National Committee on Racial and Ethnic Diversity; and the National Committee on Women's Issues. These groups maintained that reporting clients' immigration status, HIV status, or sexual orientation could be harmful to clients. (NASW News 44(8); Code of Ethics of the National Association of Social Workers, 1999)

The adequacy of the Code as a guideline to professionals historically has been an ongoing subject of debate, with studies faulting the vagueness of the Code and its general lack of specificity. (Murphy & Koppels, 1997) In the section of this dissertation that reviews social work ethics literature, an attempt will be made to note whether this research concerning the adequacy of the Code was completed before or after the formulation of our most recent Code. That is, does the judgment that the Code is inadequate occur before or after the 1996 Code revisions?

An interest in social work ethics, in terms of ethical decision-making, began to develop in the 1980's. Some of this interest was based upon assertions about the nature of social work values. That is, are there profession-specific values inherent in social work or are the values a reflection of broader, more relativistic societal values? Related to the nature of social work values is the question of how we resolve ethical dilemmas. Do we resolve dilemmas using teleological arguments based upon anticipated consequences or do we resolve them using deontological arguments based upon fundamental principles?<sup>9</sup> From this do we conclude that social work values are societal, teleological values or special, deontological values? These were all questions that social workers interested in ethics and the Code of Ethics began asking in the nineteen-eighties.

This interest in ethical decision-making led to the development of protocols for decision-making. (Reamer, 2001a) Today we have a number of competing, albeit similar, protocols that will be examined in the literature review of this study. In the early

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<sup>9</sup> Teleological arguments primarily consider the consequences of an action, whereas deontological arguments are derived by following moral laws, commandments, or principles. This will be detailed in the subsequent literature review.

1980's, social work educators began to give considerably more attention to ethical issues. (Reamer, 2001a) Separate courses in social works ethics were offered at schools of social work, and, in 1992, the Council of Social Work Education required that ethics education be included in the curriculum. Debates began about how to best teach social work ethics. Debates were also waged about the adequacy of the Code, not only as a guide for behavior, but also as a teaching tool. These debates are still with us. (Reamer, 2001a)

Reamer says that the current ethical focus is on ethical standards and risk management. One engages in risk management through self-examination of one's own practice in order to avoid intended or unintended ethical breaches that could result in lawsuits or complaints. Risk management, via familiarity with ethical standards, has become a recent ethical theme largely due to increased litigation and complaints against social workers. (Reamer, 2001a) It should be noted that this increased litigation takes place in the context of a society that, overall, has become increasingly litigious.

Reamer's 2001 book, The Social Work Ethics Audit: A Risk Management Tool, comes with a computer disk and written tools to assess the potential risk of one's current practice in providing direct service and in social work administration. (Reamer, 2001b)

Thus, a number of ethical issues that emerged over the years have remained unsettled. The issue of the centrality of social justice remains unresolved. There is not consensus about the deontological or teleological nature of social work values, an ethical interest which emerged in tandem with researchers' investigation of our decision-making processes. (Reamer, 1987; Levy, 1973) Also undetermined are issues of the current

Code's adequacy and the adequacy of ethics preparation in social work education. These issues will be discussed in the following chapter.

It is tempting to wish to speak to all these issues which have emerged in the course of our history. That, however, could be a lifetime task. Nevertheless, a study of discordance between belief and behavior that is grounded in the Code of Ethics will go a long way toward clarification of how social workers experience the Code and relate it to their practice behaviors.

### **Chapter 3 -- Review of Social Work Ethics Literature**

The history chapter of this study demonstrates that issues of ethics have always played a critical role in the social work profession. A review of ethics literature in social work will reveal major themes that have been identified in the historical section and the themes that will emerge again in a subsequent intellectual framework chapter. The literature review will cover the areas of professionalism and social work ethics, including adequacy of the Code as a guide to professionals; the debate about cause or function and its relationship to mission abandonment; a discussion of John Rawls's work, A Theory of Justice; theory of duty literature; values literature, including Milton Rokeach's work on the relationship between values and behaviors; the societal values versus special values debate; ethical decision-making studies; social work ethics education literature; beliefs and NASW Code literature; and an overview of literature research methodology.

An effort will be made to present these themes in approximate chronological order. The literature falls into two major categories that interweave with the major themes and their rough chronology. The literature revolves around actual studies that have been done in the field of social work ethics and works that are a discourse or articulation of theory and of philosophy. The very earliest social work ethics literature, for example, is that which is a discourse or articulation of theory/philosophy. This literature is comprised of the development of ethical thinking in the field of social work ethics, as reflected in the thought processes of Porter Lee, Harold Lewis, or Charles Levy. Often this type of literature has led later to qualitative or quantitative descriptive studies that attempt to put the thinking of these seminal theories to test.

## **Professionalism and Social Work Ethics Literature**

### **Professionalism and the Code**

One crucial characteristic of a profession is the need to practice in an ethical manner and to establish norms for ethical behavior. In 1915, Abraham Flexner, a medical doctor, declared that social work at that time was not a profession because it had no body of demonstrated knowledge and it could not hold its members individually accountable or responsible for their actions. (Flexner, 1915) Since that time, social workers and social scientists have been discussing whether or not social work is truly a profession.<sup>10</sup>

Greenwood and Toren took the Flexner argument a step further by asserting that Codes of Ethics were essential to each profession and a prerequisite for being recognized as a profession. (Greenwood, 1957; Toren, 1969; Toren, 1972) At the time of Greenwood's assertion, there was no social work code of ethics. However, it should be noted that when Toren was writing her comments, social workers had already been guided by their first NASW Code of Ethics for at least nine years. (Ain, 2001) Toren excluded social work among the professions because it lacked a "strong inclusive professional association in which membership is a necessary prerequisite for the right to practice." (Toren, 1969, p.146)

Using this criterion, social work would still be excluded as a profession, since there is no requirement to join NASW or any other social work organization. Indeed, no profession that requires practitioners to be licensed or certified can mandate membership in a professional association, for this would not be legal.

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<sup>10</sup> A trend toward licensure supports the assertion that social work is a profession. New York State, for example, began to license social workers on September 1, 2004.

Greenwood, writing prior to the first version of the NASW Code in 1960, believed that social work *is* a profession. This he asserted despite having declared the presence of an adequate code to be one of the requirements of a profession. He felt that there were “too many points of congruence with the model [of what characterizes a profession] to be classifiable otherwise.” (Greenwood, 1957, p. 54) Greenwood felt that the other attributes that constitute a profession are present in social work. These attributes are systematic theory, authority, community sanction and culture. (Greenwood, 1957)

Bullis noted that “The promulgation of ethical codes is significant for the professional and the public. Codes of ethics put the clinical social worker and the public on notice that a certain standard of behavior is expected; behavior deemed below that standard will be punished. The punishment and the means of punishment are open to the public, even if the trials are confidential.” (Bullis, 1995, p.94)

### **The Adequacy of the Code as a Guide to Professionals**

The perceived adequacy of the Code relates to the issue of professionalism when the Code is critiqued as a guide to professionals. If the Code is not perceived to be an adequate guide to professionals this then limits our professionalism, our ability to practice in an ethical manner. And, if the Toren and Greenwood definition of “profession” is accepted -- that a profession must have an adequate code of ethics -- any perceived inadequacy of the Code as a guide to professionals also compromises the assertion that we are a profession. (Greenwood, 1957; Toren, 1969; Toren, 1972)

Gordon, Reamer, and Felkenes have all, in times that preceded the latest Code revision, contended that the Code was not adequate as a guide to professionals. (Gordon, 1984; Reamer, 1987; Felkenes, 1980) One major issue is how specific the Code needs to

be in presenting standards of ethical professional conduct. Gordon said that social workers have a hard time utilizing the profession's specialized knowledge because of the "largely unspecified, though loosely agreed upon" nature of the Code of Ethics. (Gordon, 1984, p. 31) Reamer actually asserts that codes of ethics are symbolic documents and are not meant to provide unequivocal guidelines; codes of ethics are never really complete guides. (Reamer, 1987) Felkenes, in a dissertation study, surveyed social workers about the adequacy of the Code. She found that social workers do not believe that all the Code's values are made clear, particularly the injunctions to promote self-determination and to advocate for one's clients. (Felkenes, 1980)

The Code has been criticized as being inadequate for particular practice methods. Dolgoff and Skolnik noted that the Code is inadequate in helping professionals make ethical groupwork decisions. They suggest that a separate Code of Ethics be formulated for professional social workers engaged in groupwork. (Dolgoff & Skolnik, 1992) This implies that our Code should be generic enough to accommodate all practice methods.

Holland and Kilpatrick noted that none of their respondents utilized the Code in making ethical decisions. Although this does not necessarily indicate that the Code was perceived as being inadequate by professionals, it does demonstrate that it was not an explicit resource in their ethical decisions. (Holland & Kilpatrick, 1991)

Code inadequacy has become a less prevalent theme since the Code revisions in 1996. In recent work, Ain, Congress, and Murphy confirmed adequacy of the Code as a guide to professionals. (Ain, 2001; Murphy & Kopels, 1997; Congress & Gummer, 1997) Ain found that social workers do turn to the Code in making ethical decisions; however, it is not their first resource. (Ain, 2001)

Although the Murphy-Kopels and Congress-Gummer discussions were published subsequent to the 1996 Code, the work was done prior to the publication of the 1996 Code. These discussions actually referenced the 1993 revised version of the Levy Task Force Code of 1979, rather than to the 1996 Reamer Task Force Code. (Murphy & Kopels, 1997) Therefore, the Murphy-Kopels and Congress-Gummer discussions cannot be used to contribute to increased findings of Code adequacy subsequent to 1996.

Murphy and Kopels debated the topic of Code adequacy in a series of written arguments. Murphy asserted the Code is an adequate guide to professionals. This has been demonstrated by its use in adjudication, which means that the Code is used as a guideline for civil and criminal suits against social workers, regardless of whether or not the named social worker is a member of NASW. Kopels disagreed with Murphy by asserting that the Code lacks specificity. Kopels does not view the Code as adequate merely because legal judgments are reached by using the Code as guideline. (Murphy & Kopels, 1997)

Gummer, in debate with Congress, did not feel the Code is sufficient for agency directors and administrators, while Congress asserted sufficiency of the Code and its equal applicability to both administrators and direct service workers. (Congress & Gummer, 1997)

It is noteworthy that Kugelman found Code adequacy as a guide to professionals prior to the 1996 Code revisions. She found, in a qualitative study, that ethical principles codified in the NASW Code of Ethics are effective in informing professional practice decisions. (Kugelman, 1992)

Greenwood was perhaps the first to notice that our interest in professionalism and our preoccupation with codes of ethics may actually take us away from another ethical concern: that of promoting social justice. (Greenwood, 1957) If Greenwood is correct, our interest in the ethical rules that make us more “professional” may lessen our desire to protest against social injustice. With professionalism there is a tendency in the direction of a more conservative status quo, whose first function is its own self-preservation. On the other hand, professionalism could harness our commitment to social justice by virtue of the fact that it is the second principle of the NASW Code of Ethics. (Code of Ethics of the National Association of Social Workers, 1999)

### **Professional Values**

As well as being a guide to ethical professional behavior, the Code of Ethics reflects the values of the profession. Horner and Whitbeck studied the personal values of social workers and social workers’ perceptions of professional values. They also studied the personal values of the general population. They found that the values of the social worker differ from the personal values of the general public. They also demonstrated that social workers’ perceptions of the values of the profession even more clearly reflected the values of the profession than their own personal values. They concluded that social work values are accessible to investigation and that social workers are well acculturated to their professional values. (Horner & Whitbeck, 1991)

### **Epstein: Code Adequacy, Professionalism, and Social Justice Implications**

Epstein implied that the ethics of social work are not clear. He demonstrated that there is a conflict, essentially ethical in nature, among commitment to the client, commitment to the organization, and commitment to the profession, and that values are

insufficiently defined to the extent that they could support both radical and conservative ideologies. (Epstein, 1970a)<sup>11</sup> If true, this would be an ethical conflict because the Code mandates commitment to the client, commitment to the organization, and commitment to the profession, in that order. (Code of Ethics of the National Association of Social Workers, 1999).

In Epstein's examination of role orientations, he concluded that commitment to the organization is conservatizing, commitment to the client is radicalizing, and commitment to the profession is neither. (Epstein, 1970a) How much the Code represents a commitment to social justice will be examined in the next section. Epstein implicitly offers an argument to the accusation that private practice is an abandonment of the promotion of social justice.

This argument, which is pointed to by Epstein's findings, would be that private practice is radicalizing because private practice represents a commitment to the client and commitment to the client is radicalizing. In other words, the type of client seen should not decrease activism towards social justice, as long as there is commitment to the client. However, many private practitioners see clients who can afford to pay directly for their services, while many agencies see lower income clients. One wonders if commitment to middle and upper income clients, in the final analysis, would be particularly radicalizing. Therefore, the type of client seen could be said to be the critical point of the argument.

Epstein, himself, did not offer an interpretation that private practice could be radicalizing in its commitment to the client; rather, he asserted that professionalism is not

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<sup>11</sup> It is noteworthy to reiterate that many studies that find inadequacy were done prior to the 1996 Code revisions.

a useful intervening variable and suggested the need for an empirically based, de-professionalized model of social work that does not excuse political apathy. (Epstein & Conrad, 1978; Epstein, 1970b)<sup>12</sup> In later work, Epstein and Reeser wrote that social work professionalism and activism are not necessarily antagonistic, as some would imply. (Epstein & Reeser, 1990)

### **Cause or Function and the Mission Abandonment Debate**

#### **Cause or Function**

Social justice is clearly recognized in the NASW Code of Ethics as a defining value principle of the profession. Social justice is thought by many to be the primary mission of social work. Or, if it is not thought to be the mission, it is considered imperative by all. Social justice is our second articulated principle; helping individuals in need is our first. (Code of Ethics of the National Association of Social Workers, 1999) These values are not necessarily mutually exclusive, for there are situations where assisting an individual could conflict with a macro-level promotion of social justice. In such a situation does the individual need supersede our second articulated value? Social justice is, essentially, the “cause” of which Porter Lee speaks (alluded to in the historical section) when he attempts to tease apart the roles of cause and function in social work. (Lee, 1937)

Social movement in the field of social work is inextricably bound with social justice. Social movement can be thought of as a tool for social justice. Social movement is often found in the same corner as social justice because social movements are often

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<sup>12</sup> That private practice might be radicalizing could be further explored by studying the private practitioner’s degree of radicalization, especially in relation to the demographics of the practitioner’s patients.

rationalized and popularized by assertions that they are pressing for change in the direction of social justice. (There are, of course, examples of right wing social movements that might be perceived as contrary to social justice.) It will be demonstrated in this literature review that there are those who, seeing social justice and social movement as united, believe that the second articulated principle of the NASW Code has been abandoned.

We have mentioned the historical shift, led by Porter Lee, towards the attitude that social movement (cause) should not be predominantly our work. (Lee, 1937; Lewis, 1976; Specht & Courtney, 1994) Lee spoke about “cause and function” (social justice, or social movement as ‘tool’ of social justice versus social service) in a famous address at the 1929 National Conference of Social Work. (Lee, 1937)

Harold Lewis interpreted Lee as follows: “Porter Lee, initially, described what he viewed as a normal social process, the move from a cause sought and won to a function which realized in practice the intentions contained in the cause. . . . In those threatening days of 1929, he believed the profession must not respond to the challenges confronting it by going back to a day when social work was exclusively or predominantly a cause. He argued that we must meet (the challenge) with the sober recognition that it is and must be both cause and function.” (Lewis, 1976, pp.18-19; Lee, 1937)

Thus, Lee hypothesized a linear movement from cause to function. Later he modified this to cause *and* function, by which he meant that the profession must be both, and suggested that different people within the profession were suited to promoting “cause” or “function.” (Lewis, 1976; Lee 1937)

Lee's assertions are an important contribution to the professionalism literature. Lee was nudging us towards a professionalism that is the provision of social services. That is, he envisioned a linear movement from social advocacy to a more traditionally "professional" provision of services.

Lewis, by contrast, did not separate cause and function. He stated that the cause is inextricably embedded *in* the function. In his commentary, "The Cause in Function," Lewis explained that he does not see cause and function as having a linear relationship. He said that the hypothesis that one moves from cause (as in social movement towards social justice) to function (as in social service provision), did not satisfy Lee, which is why Lee moved to the position that social work must be both cause and function. Lewis maintained that Lee "failed to appreciate the ends in means and . . . the cause embedded in function." (Lewis, 1976, p.20)

Lewis asserted that the helper activates both cause and function in the activity of helping. "[E]very helping act is both a personal and social act, and carries in its service elements the core of what we recognize to be cause." (Lewis, 1976, p.21) Continuing, he explained how "resources are made available when they are converted into services through the activity of the helper and his client." (Lewis, 1976, p.21) Thus, the cause (the social movement that seeks more resources for people or more social justice) and the function (the provision of resources) are connected by the activity of the client and the helper. This is a dynamic dialectic where the means become the end and the end is activated by mutual activity that has causal elements intrinsic to its nature (i.e. the helping activity causes the provision of services). Moreover, the dialectic provides both philosophical and action-based resolution to the dilemma the social worker faces in

attempting to balance the dual commitment of helping individuals and facilitating social justice, the first two principles of the NASW Code of Ethics.

### **Mission Abandonment Argument**

In Unfaithful Angels: How Social Work Has Abandoned Its Mission, Specht and Courtney declared that social workers have abandoned their mission to promote social justice. (Specht & Courtney, 1994) Specht and Courtney found clinical practitioners in private practice particularly culpable of mission abandonment. They asserted that there is nothing intrinsically wrong with social workers having a private practice as a psychotherapist. It is, however, simply not a social work function. For Specht and Courtney, community building and social justice promotion comprise the backbone of social work. They contended that social work's preoccupation with psychiatry led to the profession's focus on mental health, with the gradual flight of many clinicians from agency-based work in public service institutions to private clinical practice with individuals of higher socioeconomic means.

Others have disagreed, pointing out clinical contributions towards social justice that could even apply to private practitioners, or offering a synthesis of the seemingly incompatible perspectives. (Swenson, 1998; Haynes, 1998) Crabtree's findings indicated that Specht might have been somewhat pessimistic. Crabtree found that social workers do not abandon their belief in the importance of social justice. (Crabtree, 2000) Crabtree found that there is a positive relationship between advanced levels of licensure and emphasis on societal values, which he interpreted to mean that social justice, as a societal value has not been abandoned.

Gil noted that the Code of Ethics gives social workers an ethical mandate to pursue social change on behalf of vulnerable and oppressed individuals and groups of people. (Gil, 1998) He calls for consciousness raising or awareness, which he names “the emergence of critical consciousness,” and implores us to act towards structural transformation. (Gil, 1998, pp.39) He maintains that the intellectual paradox of social work is that we are mandated by our Code towards certain behaviors but lack adequate theoretical insights as to how to challenge social injustice. He essentially advocates for, at the very least, the promotion of a political social democracy. Gil’s moving and passionate rhetoric yields themes similar to Manning’s ideas -- to be detailed in the ethical decision-making section of this literature review -- about moral citizenship that transforms the structure of society. (Manning, 1997)

A recent response to Specht and Courtney’s Unfaithful Angels has been Faithful Angels by James O. Billups.(2002) Faithful Angels, in assertion of social justice, biographs and interviews fifteen 20<sup>th</sup> century social worker activists. They are the faithful angels. Heartening in its affirmation of social justice and social movement, the book offers no more empirical validation of this position than the Specht and Courtney work offers to the position of mission abandonment.

### **John Rawls**

A review on the ethical theme of social justice and its concomitants would be incomplete without mention of John Rawls. Rawls was a philosopher who wrote the classic A Theory of Justice. (Rawls, 1971) Nevertheless, since he articulated a philosophical theory with ethical implications for social justice, it is important for any social work ethics study to emphasize his influence. A Theory of Justice was written to

offer an alternative to utilitarian or teleological thinking; it was written to demonstrate that deontology should supersede teleology.

Teleology or utilitarianism is a philosophical framework that looks at the consequences of an act, or its outcome, rather than looking at fundamental rules or principles as a guide to the resolution of an ethical dilemma. Deontology, a framework that is in direct contrast to utilitarianism, does not consider the outcome of actions when taking action. Deontologists consider rules or fundamental ethical principles when making decisions.

Although deontology comes from the Greek word “deon,” that which is obligatory, (Webster’s Third New International Dictionary, 1993) “there is nothing like a standard or received definition of the term. . . . It is sometimes suggested that deontologists believe in absolute rules. But this too is an inadequate way of drawing the contrast [with teleology]. . . . Another proposal is that deontologists – in contrast to consequentialists [teleologists] – believe in ‘the priority of the right over the good.’” (Kagan, 1998, p.73) This definition of deontology is critical to the thinking of John Rawls.

Rawls said that in utilitarianism, the consequences or outcome is all that matters and the ‘how’ of reaching that outcome is not accounted for by the theory. He said that the two main ideas in any ethical theory are “the right” (as in right-wrong) and “the good.” He contended that utilitarianism initially says that “the good” is defined separately from “the right,” but then, “the right” becomes defined as the *distribution* of “goods,” making it dependently defined as that which “maximizes the good.” (Rawls, 1971) Rawls found this to be inconsistent reasoning. He asks how “good” and “right” can be separate principles and then become a linear proposition, where what is “right” becomes

dependent upon what is “good” in the “maximization of the good” and the “distribution of goods.”

Rawls offered instead his alternative wherein “justice as fairness” is “the right” which precedes “the good” and upon which “the good” is dependent. (Rawls, 1971) Justice as fairness is “the right,” which is the first principle. Furthermore, the “good” is not separated from “the right.” It only exists in its dependent relationship to “justice as fairness as ‘the right.’” Rawls further contended that “justice as fairness,” is a concept, which under a “veil of ignorance,” is always intuitively chosen when one is unaware of one’s advantages or disadvantages in a society. (Rawls, 1971, p.118) In other words, if one is presented with a fictional society, where one does not know whether one is in a position of power (where one is under a “veil of ignorance”), one will intuitively select fairness and equity as the means of making ethical decisions.

Chart #1: Rawls’s Theory of Social Justice

Philosophical Framework	Definition of the Right	Logic of Argument
Teleology (Consequentialism or Utilitarianism)	-- “The right” (as in “right and wrong”) is defined separately from “the good.”	-- “The right” becomes the distribution of “goods.” --Now “the right” is dependently (and inconsistently) defined as “that which maximizes the good.”
Deontology (John Rawls’s position)	-- “The right” precedes “the good.” -- “The right” is “justice as fairness.”	--“The good” consistently depends upon “the right” of “justice as fairness.”

The author of this study has developed an instrument that inquires about beliefs in ethical principals of the Code, behaviors that reflect those Code principles, and the disjuncture that may occur when the two are discrepant. Social justice is one of the ethical principles examined for belief, behavior and disjuncture in this instrument. The

“social justice” that the instrument examines is consistent with “justice as fairness” and is implied in theory of duty as one of the prescriptions of duty mandated by the NASW Code.

### **Theory of Duty Literature**

Theory of duty literature that is relevant to social work emerges in the nineteen seventies. Jonsen and Hellegers asserted that ethics is more than the prescriptions and prohibitions that comprise a theory of duty. They emphasized that ethics is a comprehensive theory of human morality. They said a complete study of ethics embraces the exploration of three principal theories: the theory of virtue, the theory of duty, and the theory of common good. (Jonsen & Hellegers, 1976) The theory of distributive justice, while a salient first premise in the thinking of Rawls, is subsumed by Jonsen and Hellegers under the theory of common good.

In this study, we are concerned with the theory of duty, which focuses upon prescriptions and prohibitions. Prescriptions and prohibitions are the purpose of codes of ethics. Theory of duty is about the contractual permissions, obligations, prohibitions and prescriptions that lead to imperatives to ensure a moral and beneficent society. (Kurzman, 1988)

Rawls spoke of theory of duty, theory of common good/theory of good and theory of justice. (Rawls, 1971) For Rawls, “justice as fairness” is “the right,” upon which “the good” is dependent, and that then triggers the duty. As such, Rawls’s theory of duty is not a theory that concerns itself directly with a code of ethics; it is more concerned with the furthering of just institutions. However, it certainly could be construed that Rawls

implies the concrete prohibitions and obligations of codes of ethics in order to further the “just institutions,” of his social contract.

In this study, we are focusing on the theory of duty as typically expressed by Jonsen and Hellegers, a theory codified in varying versions of obligations and prohibitions, a theory spelled out in a code of ethics.

Nulman’s dissertation found that Levy’s work demonstrates social work ethics to be deontological, wherein consequences are an outcome of obligations that are inherent in the social work relationship. (Nulman, 1984) The obligations or duty reside within the theory of good. (Nulman, 1984) Thus, theory of duty is explained differently by Rawls and Levy, although both are deontologists. In the case of Rawls, duty does not appear to be a first premise, whereas, in the case of Levy, duty resides within the theory of good as a premise of social work. Also, Jonsen and Hellegers further differentiate by asserting theory of justice (distributive justice) to be embedded in the theory of good. (Jonsen & Hellegers, 1976)

This author’s study falls within the framework of theory of duty because it examines the prescriptions and proscriptions that are contained in the NASW Code of Ethics. However, there is no attempt on the author’s part to resolve any debates about deontology vs. teleology vis-à-vis theory of duty; nor is there an attempt to comment upon whether Rawls’s deontological rationale is more cogent than Levy’s deontological rationale, or vice versa; or whether justice is embedded in good or whether good is dependent upon justice. Chart #2 represents an effort to contextually represent theories of duty as viewed by Jonsen and Hellegers, Rawls, and Levy. It is apparent that the author’s study falls

within the Jonsen and Hellegers representation, as it is concerned with the prohibitions, obligations and prescriptions inherent in the NASW Code of Ethics.

In summary, this study will concern itself with theory of duty and theory of duty concerns itself with the contents of codes of ethics, specifically the obligations and prohibitions of a discipline. It is not focused on the anticipation of the consequences of our actions and therefore is not teleologically oriented towards outcomes. Instead it is focused on the imperatives that derive from our duties. This study will examine the NASW Social Work Code of Ethics in terms of social workers' beliefs in these tenets and examines social workers' behaviors in regard to these tenets.

Chart #2: Theory of Duty – Contextualized Sample

Author	Components of Ethics	Theory of Duty	Theory of Good
Jonsen & Hellegers	--Ethics is composed of Theory of Duty, Theory of Common Good & Theory of Virtue. --Theory of "distributive justice" is part of Theory of Common Good.	--Theory of Duty is composed of prohibitions, obligations & prescriptions.	--Manner in which "goods" & the "common good" should be distributed. --Implies <b>Utilitarianism</b> because "the right" becomes "the distribution of goods."
Rawls	--"Justice as fairness" is the ethic that supersedes all others. --Or, equity vs. equality in the distribution of scarce resources.	--Duty is the furthering of "just institutions," the outcome of "justice as fairness." --Duty is not a first premise. --Obligations & prohibitions of Codes are implied in order to further "just institutions."	--"The good" is dependent on "the right," which is "justice as fairness." -- <b>Deontological</b> viewpoint.
Levy	--Ethics of Social Work are based upon unique fundamental principles.	--Duty resides within the Theory of Good. --Duty is part of a 1 <sup>st</sup> premise.	--The Theory of Good is a 1st premise & contains the Theory of Duty. -- <b>Deontological</b> viewpoint.

### Values Literature

Values are what we cherish and hold dear. Values imply a weight, a valence. These are the things that are more important to us than others. We place a high worth on some

things and some things, intrinsically, have worth. Values are organizing principles of societies. Values are comprised of what is regarded as good and desirable and what is preferred by a culture. (Abbott, 1988) Values relate to ethics. Ethics are the rules we make about right and wrong, good and evil. Ethics are based on values that are codified as guidelines by way of profession, religion, etc. Values indicate preferences and ethics indicate rules based upon the preferences. (Abbott, 1988) The values of social work are the basis of the Code of Ethics.

### **Milton Rokeach**

Rokeach wrote extensively about values. (Congress, 1986) He asserted that individuals who are aware of their values, are more likely to change their behavior to be more consistent with their values. (Rokeach, 1973; Rokeach, 1979)<sup>13</sup> In this study, the author measures the level of discordance that social workers experience when their beliefs about the values inherent in the Code are inconsistent with their behaviors. This study does not measure changes in behavior based on awareness of discrepancies between values and behaviors, as suggested by Rokeach. It measures the level of disjuncture, predicting that it will be greater in the face of higher belief/behavior discrepancy.

Rokeach also developed two scales that measure values. (Rokeach, 1973) One scale measures instrumental values and the other scale measures terminal values. These scales are not useful to the author's study because they measure: a) values that are end-state

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<sup>13</sup>This relationship between values and behavior underlies the thinking of Ann Abbott, who also maintains that values influence behavior. Abbott's POS Scale, incorporated in the author's instrument, measures opinions that reflect values and influence behavior. (Abbott, 1988) The author of this study asserts that opinions reflect beliefs more aptly than they reflect behaviors and uses the POS to measure beliefs. This will be discussed in greater depth later.

qualities of life, such as ‘a comfortable life,’ ‘an exciting life,’ ‘family security;’ and b) instrumental qualities of character that presumably bring preferred outcomes, such as ‘ambitious,’ ‘capable,’ ‘courageous.’ Although the Rokeach scales are useful in measuring values, both personally and across the professions, they are not useful in measuring belief in the codified values of the NASW Code of Ethics. As it turns out, there are scales that are far more suited to this end, one of which will be used in this study to measure belief in the principles of the Code. (Abbott, 1988; Varley, 1963; McLeod & Meyer, 1967; Judah, 1979; Howard & Flaitz, 1982)

### **Societal Values vs. Special Values**

One of the most interesting themes to appear in the literature is an ongoing debate regarding the nature of social work values. The debate, which began in the nineteen-eighties, essentially juxtaposes the notion that social work reflects the values of society, particularly western civilization, against the notion that social work values are a unique configuration of specially selected values.

The argument of societal values versus special values can be placed in a framework of teleology versus deontology. If social work is a reflection of societal values, then it solves social problems by thinking about an action in terms of what society values, gives weight to, or thinks is important. It problem-solves in terms of consequences for society. This means that values may vary from era to era or culture to culture. This is a teleological approach. By contrast, if social work is based upon special values, then it solves social problems by adhering to fundamental principles that are unique to its discipline. This is a deontological approach.

Reamer's work may be interpreted as a representation of the view that social work values reflect the values of society. More than once he has demonstrated how social work values are the applied ethics of western culture dating back to the Greeks. (Reamer, 1993; Reamer, 2001a) Because of the breadth of values encountered, Reamer sees dilemmas and their solution as having some relativity. He says, "What we have tended to practice is situational ethics." (Reamer, 1982, p.255) As such, the choice of particular values applied in a given situation depends upon their consequences and utility. Writing prior to the 1996 revisions, Reamer viewed the NASW Code of Ethics as vague and insufficient in assisting social workers with their ethical dilemmas. (Reamer, 1987; Nulman, 1984)

Although Reamer has described social work as a "self-consciously normative profession," (Reamer, 1993, p.39) he does not mean normative in the sense of providing fundamental deontological principles. (Kagan, 1998) He views normative ethics as applied ethics. (Reamer, 1993) It also could be construed that Reamer uses normative in the idiosyncratic manner of Peile, wherein normative becomes synonymous with the qualitative, descriptive, and interpretive. (Peile, 1988) In any case, Reamer's use of normative does not imply deontological principles as the basis of decision-making.<sup>14</sup>

However, in the work of Reamer, there are no distinct statements indicating that he takes a solely consequential position regarding ethics. Reamer feels the Code is not

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<sup>14</sup> The word "normative" is not used consistently used by ethicists, philosophers, social scientists, or social workers. Ethicists tend to use normative as referring to fundamental principles. (Kagan, 1998) Peile uses the word in reference to qualitative, descriptive research. (Peile, 1988) Abbott uses it synonymously with "societal." (Abbott, 1988) Reamer and Lewis use the word to refer to applied ethics. (Reamer, 1993; Lewis, 1984) Lewis, somewhat in contradiction of himself, also uses the word to imply fundamental rules. (Lewis, cited in Bloom, 1992) Applied ethics looks at the consequences or application of principles. Therefore, Reamer's use of the word normative, as applied ethics, does not imply the deontological approach.

precise and, therefore, is open to varied interpretation. This is a comment on the Code and not an assertion about personal philosophy, professional philosophy, or the philosophical nature of social work values themselves. (Reamer, 1987) It is a statement about the vagueness of our pre-1996 Code, not a statement that social work's values exclusively reflect society's values. Moreover, Reamer often referred to the "core values" of the Code. (Reamer, 1998b, p.170) Core values imply the fundamental principles of deontology, not the relativity of teleology.

In contrast to Reamer, Levy represents a more deontological point of view. He believes that the values of social work are uniquely configured and that certain fundamental principles require that we act in certain ways, and that those ways are based on values that often differ from the values of the larger society. This is an inherently deontological view. The Code of Ethics, according to such a viewpoint, therefore should be the guide for our behaviors. (Levy, 1973; Crabtree, 2000; Nulman, 1984) Felkenes, however, states that "Levy could be interpreted as both a deontologist and a teleologist. He is a deontologist to the extent that he believes that the social service situation reveals certain self-evident obligations between client and social worker." (Felkenes, 1980, p.41) He is a teleologist because he sometimes is pressed to act by also assessing the balance of good or evil in possible consequences of his action. (Felkenes, 1980) In fact, when Levy classifies the values of social work, as noted in Reamer, he begins with societal values, which are, arguably, relative. (Reamer, 1999)

To summarize, the special values versus societal values debate may be characterized as a debate that unfolds when one contrasts deontology and teleology, with societal values representing a more teleological position, and special values representing a more

deontological point of view. In addition, it may be asserted that Levy is representative of the special values stance while Reamer's position is closer to one which underscores societal values. In correspondence with Frederic Reamer, dated March 21, 2005, Dr. Reamer wrote to the author: "I argue that in a profession that is as applied as social work, one must think in terms of potential/actual consequences (teleology); however, our focus on the ends must be tempered by our obligation to respect and promote certain fundamental rights and duties (the deontological component)" (Attachment 5F)

One cannot conclude from this that Reamer is purely consequential in his thinking or that Levy bases all decision-making on fundamental principles.<sup>15</sup> Finally, none of these characterizations resolves the question of the profession's essential nature: is social work a reflection of society's values or is it a reflection of special values or is it a combination thereof?

Chart #3: Societal Values vs. Special Values Debate

Philosophical Framework	Definition	Argument of Debate
--Deontology (also known as formalist theory) --Framework may be traced back to Immanuel Kant. (1780) <sup>16</sup>	Fundamental Principles are the basis of ethical decision-making.	-- Social Work Values are a unique configuration of values. -- These values are based on fundamental principles.
--Teleology (also known as Utilitarianism or Consequentialism) --Framework may be traced back to John Stuart Mill. (1863) <sup>17</sup>	Consequences that will/should/may occur are the basis of decision-making.	-- Social Work Values are a reflection of the relative values of society. -- Societal values tend to prioritize consequences over fundamental principles.

<sup>15</sup>Dr. Reamer said, in his March 21, 2005 correspondence with the author, "At this point in my career I tend to argue that the teleology/deontology split is too limiting." (Attachment 5F)

<sup>16</sup> In "The Metaphysical Elements of Ethics," Kant said, "Ethics . . . cannot start from the ends which the man may propose to himself." p.5.

<sup>17</sup> In Utilitarianism, Mill said, "Utility . . . holds that actions are right in proportion as they tend to promote happiness, wrong as they tend to produce the reverse of happiness." ch.2, p.1.

Several doctoral dissertations have discussed or alluded to the societal versus special values debate. Randall Crabtree noted the differences, but was more concerned with whether his findings confirmed the Specht and Courtney argument that social work had abandoned its mission. (Crabtree, 2000; Specht & Courtney, 1994) In focusing solely on the mission abandonment controversy, Crabtree missed an opportunity to contribute to the societal versus special values debate findings. Crabtree found that there is a positive relationship between advanced levels of licensure and emphasis on societal values, which lends itself to the interpretation of social work reflecting societal, relativistic values. Crabtree's interpretation, however, was that social justice, as a societal value has not been abandoned and that Specht and Courtney were overly pessimistic. (Crabtree, 2000)

The Felkenes dissertation found that those in the profession who believe social workers' values reflect the values of society, and not a discrete set belonging to the profession, might be correct, since society today is characterized by ethical relativity and individualism. (Felkenes, 1980) Moreover, this study showed that social workers take an individualistic, relative approach to what is right and wrong. Felkenes therefore concluded that the relative approach of social workers could be construed to be a reflection of our relativistic society. It should be noted, however, that this dissertation was undertaken to describe the attitudes of clinical workers toward their professional ethics. The implication that social work might reflect the values of society is a sidebar that Felkenes inferred from the relativistic approach to right and wrong used by social workers. It is also based upon a presumption that society, today, has relativistic values.

Horner and Whitbeck, previously mentioned in the section on professionalism, found that the values of the social worker differ from the values of the general population.

(Horner & Whitbeck, 1991) These authors studied the personal values of social workers, social workers' perceptions of professional values, and the personal values of the general population. They demonstrated that social workers' perceptions of the values of the profession even more clearly reflected the values of the profession than their own personal values. Horner and Whitbeck, however, did not discuss the societal values vs. special values debate, but their findings could be interpreted to bolster the assertion that the values of social work are specially configured, since the values of social workers differed from the values of the general population. Their conclusion was that social work values are accessible to investigation and that social workers are well acculturated to their professional values.

Through logic and functional theory, Nulman set forth an argument that demonstrates his belief in the correctness of Levy's position that social work values are unique in nature. (Nulman, 1984) This is an unusual dissertation that was essentially a philosophical examination and discussion. There is no hypothesis presented beyond Nulman's stated intention of logical proof. The use of functional theory emanates from a quotation in which Levy asserted that the social worker's values and ethics are a function of the social worker's job and assumed professional responsibility. (Levy, 1979) Nulman found social work ethics to be deontological, logically constructed, and consistent with the functional approach, wherein functional obligations are inherent in the social worker-client relationship. Nulman emphasized that Levy viewed consequences as an outgrowth of obligations and that he does not rely on consequences as his first premise, which teleological theory would. Nulman says that Reamer is "simply not correct" when he says that social work ethics relies on society's traditional philosophical theories because

“each ethical system is based on a distinct set of values.” (Nulman, 1984, p.79) This question of special values versus societal values remains unresolved.

### **Ethical Decision-Making**

A number of authors have written about ethical decision-making. Ethical decision-making studies began in the nineteen eighties and continue today. These are among the first studies in social work ethics. They were possibly prompted by assertions about the nature of social work values and whether these values were special values or a reflection of societal values.

The ethical decision-making literature is divided into studies that observe the cognitive processes that occur in ethical decision-making and models that provide ethical decision-making protocols. In other words, the literature is divided into descriptive and prescriptive categories. The descriptive categories describe typical processes that are used in decision-making and the prescriptive categories prescribe ideal models that should be followed in decision-making.

The author’s study does not concern itself with decision-making processes or with models that delineate the protocols for proceeding with these processes. Although some might argue that the Code of Ethics is a model for decision-making, it is not a model that offers a recipe for decision-making. Rather, the Code is a document which provides the values, standards and principles upon which one must base ethical decisions. The models that follow the section on descriptive decision-making processes offer a concrete procedure for making decisions.

### **Descriptive Decision-Making Processes**

Those who studied and describe the logical processes of ethical decision-making include: Ain, Congress, Dolgoff and Skolnik, Kugelman, and Boland.

Ain described how New York City social workers resolve ethical dilemmas in their practice. First they turn to colleagues, then to supervisors, followed by trusted friends and, finally, they turn to the NASW Code of Ethics. (It is interesting to note that the Code is the last of the four resources used by New York City social workers in making ethical decisions.) Social workers focus their ethical deliberations in the areas of confidentiality, informed consent, self-determination and dual relationships. (Ain, 2001)

Congress studied ethical decision-making among field instructors and found that most tried to maximize client self-determination. She also found that multi-discipline agencies were less conducive to ethical decision-making than social work agencies. Moreover, women were more likely to focus on client issues, whereas men focused upon multiple issues. Congress suggested that this might reflect basic differences in ethical decision-making among men and women. Finally, more experienced social work field instructors were more likely to focus on client issues. (Congress, 1986)

Congress concluded, "Both social work students, as well as experienced social workers could benefit from greater study 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." (Congress, 1986, pp.175-176)

Dolgoff and Skolnik explored the relationship between ethical decision-making in group work practice and the NASW Code of Ethics. This work was done prior to 1996 Code revisions. The issues of confidentiality, informed consent and self-determination are seen as areas that pose potential ethical dilemmas for group workers. They concluded that group workers are unable to use the Code when making group practice ethical decisions, primarily due to inadequacy of the Code to address group-related issues. (Dolgoff & Skolnik, 1992)

Kugelman, on the other hand, demonstrated that the ethical principles of the NASW Code of Ethics informed the ethical decision-making of social workers. (Kugelman, 1992; Kugelman-Jaffe, 1990) Kugelman noted, however, that although the Code was frequently cited, it was not used in any organized or systematic fashion. (Kugelman, 1992) In Kugelman's qualitative study, twenty social work practitioners were asked to read fictional case histories with ethical dilemmas. The interviews were taped and each practitioner was asked to discuss the process of decision-making.

Boland studied the ethical decision-making processes of hospital social workers in her dissertation research. (Boland, 2002) She hypothesized a positive relationship between internalization of social work values and the identification of an ethical dilemma. She also predicted that the internalization of social work values would relate positively to the process used for ethical decision-making and the rationale for decision-making.

Boland found an uneven pattern of dilemma identification and evidence of rules-based (deontological) ethical decision-making. However, social workers who had internalized social work values used fewer rules-based rationales for decision-making.

Recalling the societal values versus special values debate of this literature review, Boland's research could suggest that well internalized social work values are more teleological in nature, although that is not a question that concerned her. Boland measures well internalized social work values with the Professional Opinions Scale, the same scale that is used to measure beliefs in this study. (Abbott, 1988)

### **Prescriptive Decision-Making Models**

Authors of prescriptive decision-making models include: Lewis (1984), Abramson (1990), Applewhite & Joseph (1994), Congress (1988), Fleck-Henderson (1991), Pine (1987), Reamer (1999), Lawrence (1999), Lowenberg and Dolgoff (1996), and Manning (1997). The prescriptive models do not study the processes of ethical decision-making. Rather, they are prescriptive models that recommend the protocols for decision-making. They are generally based upon the expertise of their authors.

Lewis, in one of the first prescriptive models, suggested a protocol that begins with examination of ethical consequences, followed by examination of ethical principles or rules. (Lewis, 1984) He was, perhaps, the first of social workers to have distinguished between our previously mentioned deontological and teleological, or, fundamental principles versus the consequences of an action, as guides to decision-making. He says, "Two great traditions in normative or applied ethics are encompassed in various forms of utilitarianism and formalism. Utilitarianism bases moral judgments on the consequences of an act if it were to be performed; formalism, on some formal feature of the ethical imperative (a principle of conduct) under which the act is performed." (Lewis, 1984, p.209) Lewis suggests that the ethical worker is "bound to consider the practice principle that directs and commands the actions." (Lewis, 1984, p.213)

Lewis's protocol may be summarized as follows: 1) conduct a consequential analysis; 2) conduct a formalist analysis; 3) where both analyses suggest the identical choice to be preferred, act on the suggestion; 4) where both analyses yield different results, follow the consequentially derived suggestion as long as the action does not directly contradict the formalist analysis; and 5) where both analyses yield different results, and the consequential analysis directly contradicts the formalist analysis, the formalist analysis should prevail.

Applewhite and Joseph developed a model, similar to that of Lewis, for working with self-harming adolescents. (Applewhite & Joseph, 1994) They suggested one begin with fundamental principles in ethical decision-making, but recommended considering consequences when principles conflict. This implies that the principles could vary in relation to the client population, in this case, self-harming adolescents. Applewhite and Joseph created a hierarchy of values which places safety and security first, followed by autonomy and self-determination. The final values are parental autonomy and privacy.

Barbara Pine developed a decision-making model that she based on philosophical concepts and ethical guidelines. (Pine, 1987) Her complex model was designed to assist child welfare workers in making ethical decisions. Pine asks the worker to 1) identify conflicting values that are encountered in the situation; 2) identify the practitioner's prima facie duties or obligations; 3) identify the uncertainties; 4) identify the sources of power of each party in the case; 5) assess consent and the capacity to give consent; 6) assess the needs and rights of each party, whether they conflict with one another, and whose rights have priority; 7) assess whether there are resources available to support the

intervention; 8) assess negative responsibility; and 9) assess whether there are ethical conflicts with other professions involved in the case.

Abramson based her decision-making structure on the 1983 President's Commission of the Study of Ethical Problems in Medicine, Biomedicine and Behavioral Research. (Abramson, 1990) She suggested that principles promoting the well-being of people, respect for their value preferences and choices, as well as their equitable treatment, should be applied in a process of ethical decision-making that includes a weighing of salient facts, feelings and conflicts of interests. Abramson also recommends introducing more about medical science into the social work curriculum.

Congress developed the prescriptive ETHIC model of ethical decision-making: **E**xamine relevant values, including personal, professional, societal, and client; **T**hink about the NASW Code of Ethics and how it relates to the dilemma; **H**ypothesize consequences of the decision; **I**dentify those who will benefit and those who will be harmed; and **C**onsult with supervisors and/or colleagues. (Congress, 1998; Congress, 2000) Fleck-Henderson suggested a model of moral decision-making as a guide for further empirical research, which included an examination of one's own ethical choices, as well as a commitment to make them more public. (Fleck-Henderson, 1991)

Lowenberg and Dolgoff provided guidelines for ethical decision-making and developed an ethical assessment screen. This tool requires the social worker to identify personal, societal, and professional values in relation to the dilemma; identify alternative actions; think about actions that minimize personal, societal and professional conflicts; think about actions that bring least possible harm; and consider both long-term and short-term consequences. (Lowenberg & Dolgoff, 1996)

Reamer's complex decision-making framework combines many features of all the aforementioned protocols. (Reamer, 1999) He has outlined the following process for social workers to use when making ethical decisions: 1) identify the ethical issues, including those that may conflict with one another; 2) identify those likely to be affected by the ethical decision; 3) identify viable courses of actions, along with risks and benefits of each course; 4) examine the reasons in favor of and opposed to each course of action, considering ethical principles, codes of ethics, social work practice principles; and personal values; 5) consult with experts; 6) make and document the decision; and 7) monitor and evaluate the decision.

Lawrence has written about the need to ground all ethical justification in "rational action for human well-being" that can be used as a framework for all professions. (Lawrence, 1999, p.1) Lawrence identified five interdependent stages of his cross-professional model for ethical decision-making. These include identifying the conflict situation; identifying an existing agent of responsibility; deciding how to respond to contrasting arguments; implementing the decision; and assessing of the result of the intervention. Lawrence's framework is a unique perspective, for he is the first in social work to have designed a template that he believes can be applied to all professions.

Manning brings up an interesting point in relation to ethical decision-making processes and models. (Manning, 1997) She says that although we have ample literature that analyzes the ethical dilemmas of social workers, suggests solutions for dilemmas, and even elucidates the philosophical foundations of our profession, we do not have a practical theoretical framework for our decision-making processes and protocols. In short, we have descriptive reports of cognitive processes and prescriptive models for

action, both of which have been embedded in a philosophical, historical account of the profession, but we have no theoretical explanation of why such courses of action are taken or ought to be taken.

Manning suggests the action philosophies of Hannah Arendt and Paul Tillich integrated with the contributions of Charlotte Towle as the basis for her framework. Components of her framework are social conscience and social consciousness (the influence of Arendt and Tillich) as well as awareness, thinking, feeling and action (the influence of Towle). Borrowing from Arendt, she emphasizes “moral citizenship,” a citizenship which brings the responsibility of ethical dialogue, transformation of structures, and the shaping of culture. Towle stressed that social workers needed to act, to care, to be concerned, to carry an informed head and to carry an informed heart. (Manning, 1997)

### **Social Work Ethics Education /Teaching Social Work Ethics**

The prior discussion of ethical decision-making indicates that those studying this issue gave it considerable attention. In tandem with the ethical decision-making theme is the issue of social work ethics education itself. This education issue included questions such as: are social workers being adequately educated to engage in decision-making processes; does their education facilitate the application of decision-making models; and what is the best way to teach social work ethics. That is, should social work ethics be taught as a separate course or should the material be integrated into each course in the curriculum? Or is there another alternative?

Although deciding what to teach might seem like the obvious place to begin, the literature focuses less on content than on adequacy of content and how to teach content.

When, in 1992, the CSWE required that “students must acquire specific knowledge about social work values and their ethical implications and demonstrate their application in professional practice,” (Council on Social Work Education, 1992) literature turned to the adequacy of social work ethics education and to the question of how to teach social work workers. Although this problem had been considered before (Lewis, 1987), it became more salient as a result of this statement.

### **Adequacy of Ethics Education**

Adequacy of ethics education may involve studies that evaluate the adequacy of social work ethics education or that reflect social workers’ opinions about the adequacy of received ethics education. This author’s study asks social workers to evaluate the adequacy of their social work education. Likewise, Felkenes asked respondents about the adequacy of their training. Felkenes found that social workers believe that they need more training. (Felkenes, 1970)

Conrad, nearly twenty years later, evaluating the adequacy of social work ethics education, concluded that “results indicate the need for ethical skills in the role-coping repertoire of practitioners and suggest content for training in ethical problem-solving.” (Conrad, 1988, p.603) Dodd concluded that there is a need to investigate whether “increased ethics preparation enhances the social workers’ ability to identify ethically charged situations.” (Dodd, 2000, p.110) This recommendation was not precisely an evaluation of the adequacy of social work education, but rather, a suggestion that further research be done to determine **if** increased social work ethics preparation improves the social worker’s ability to identify ethical dilemmas that emerge in practice.

## **How to Teach Social Work Ethics**

The question of how to teach social work ethics has generally been broken into smaller questions: Should ethics material be integrated into each course? Should it continue to be integrated by way of a separate “ethical issues” section at the end of each course, as is commonly done? Should ethics be taught in a separate course? Should this course be required? Does fieldwork enhance ethical competency? Is it possible to model social work ethics via ethical teaching? The author’s study asks respondents all these questions.

Ain found that respondents indicated a need for a separate ethics course in social work. (Ain, 2001) Congress stated that there is some evidence that teaching a discrete course in ethics is superior to integrating values into each course. (Congress, 1993) Joseph and Conrad, in an empirical study, actually compared the effectiveness of the two models and found that students who had taken the separate ethics class scored higher in terms of understanding the underlying values and principles of ethical content and also scored higher for ethical decision-making ability. (Joseph & Conrad, 1983)

J. M. Mishne, in evaluative research at the Smith College School of Social Work, found that a separate course in ethics improved ethical competency. (Mishne, 1981) A separate social work ethics course was evaluated by students who responded to a questionnaire after they had taken the course; likewise, faculty responded to questions in a qualitative interview format.

Reamer feels either method works (discrete course or ethical content integrated into each course), but that there has been a decline in curricula offering discrete courses. (Reamer, 2001a, p.3) Other writers have suggested that, if schools of social work wish

students to adhere to the NASW Code of Ethics, they should officially adopt the Code, thereby making it the official code with which social work students must comply.

(Brieland & Korr, 1987) Brieland and Korr state, “First, students are not bound by the NASW code unless they are NASW members. If a school of social work wishes to require all students to conform to the NASW Code of Ethics, it should be adopted officially. Students must then familiarize themselves with the code at the time of their admission to the school of social work.” (Brieland & Korr, 1987, p.34)

A difficulty with literature that surveys preferences for (or perceived adequacy of) separate ethics courses, as opposed to coursework that integrates ethical issues into each course in the curriculum, is that there may not be, or have been, a sufficient number of individuals who have taken separate ethics courses at the MSW level. That is, the sample may be too small to yield a valid comparison. Empirical evidence is further needed in this area.

In 1989, Black and colleagues found that only seven out of seventy-three (10%) graduate social work education programs offered a discrete course in social work ethics. (Black, Hartley, Whelley, & Kirk-Sharp, 1989) Presumably, these were not all mandatory courses. If a researcher were to elect to only look at schools that provided mandatory ethics courses in comparison to schools that offered ethics integrated into each course in the curriculum, thereby ignoring schools that offer elective ethics courses, the researcher might come up with a sample so small that it would not be valid. On the other hand, those schools that provided mandatory ethics, would likely have greater numbers of students enrolled in their social work ethics classes, therefore compensating sample size diminished by fewer schools providing the mandatory courses.

By further contrast, sample size might hypothetically be increased by the 1992 CSWE requirement that “students must acquire specific knowledge about social work values and their ethical implications and demonstrate their application in professional practice [i.e. fieldwork]. Students must develop an awareness of their personal values and clarify conflicting values and ethical dilemmas.” (Council on Social Work Education, 1992) However, since the CSWE does not specify that this must be accomplished by a separate, mandatory ethics course, the number of separate ethics courses could also have decreased rather than increased, as Reamer asserts. (Reamer, 2001a, p.3) Moreover, many survey respondents may have received their education prior to the CSWE mandate, which means that their opportunities for social work ethics training were likely fewer than those students who were educated after the mandate.

Ain asked respondents about their training in social work ethics, including whether or not they had taken separate ethics courses. (Ain, 2001) Ain sent her survey to 1200 New York City members of NASW and had a return rate of twenty-five percent (n=287). One hundred and ninety five (195) respondents, or fifty percent of respondents, said that they had had ethics training as part of their education. Of these, one hundred and forty-five (145) indicated that they had had a separate required course in ethics during their social work training.<sup>18</sup> One hundred and thirty-three (133) indicated a preference for separate

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<sup>18</sup> Recall that Black found that 10% of schools offered discrete social work ethics courses in 1989. (Black, Hartley, Whelley & Kirk-Sharp, 1989) Ain, over a decade later, found that 11% of her New York City respondents had had a separate course in ethics. Does this tell us that separate courses are increasing? Only if the sample is nation-wide and includes such demographics as date of graduation. An easier way to determine this would be to contact the schools of social work and ask whether they have separate courses and when these courses were introduced to the curriculum. Also recall that Reamer said there has been a decline in discrete courses. (Reamer, 2001a, p.3)

required ethics courses. Such a finding, if replicated nation-wide, as opposed to New York City-only, would give a large enough sample to increase the generalizability of the results.

Congress asked the deans of 120 CSWE accredited MSW programs to indicate whether ethics education was infused throughout the curriculum or taught in either separate or required ethics courses. (Congress, 2001) According to the CSWE website, there are now 170 accredited MSW programs throughout the United States, meaning that Congress sent to the deans of about 71% of accredited schools. (CSWE Member Program Directory, 2004) Ninety-nine percent (98.9%) of Congress's respondents infused ethics throughout the curriculum. Of these, 50.6% had either a required ethics course or an elective ethics course. In addition, 98% of social work educators reported that they had read the current Code of Ethics and 90% said that the Code of Ethics had been distributed to students.

### **Concept of "Ethical Teaching"**

It is Lewis who suggested another method of teaching ethics to social workers. He maintained that the teacher of social work, regardless of course content, serves as a model for social work ethics, and in so doing, teaches ethics through ethical teaching. Lewis actually took principles from the NASW Code of Ethics and substituted the word "student" for the word "client" and substituted "teacher" for "social worker" in the same manner. This structure allows the teacher to teach ethics to the social work student in any teacher-student interaction. Lewis also emphasized the importance of belief-behavior congruence. (Lewis, 1987) Peile, as well, emphasized the theme of teaching by modeling

when he said, “The teacher begins with one necessary condition for influencing another; that of being a model.” (Peile, 1988, p.383)

Because the evidence is not conclusive, regarding the issue of integrated ethics contents versus a discrete social work ethics course, the author’s study asks respondents how they were taught ethics. It will be noted whether or not ‘method of ethics education’ is associated with disjuncture. That is, when behavior/belief discordance is accompanied by measured disjuncture, the following question will be posed: is this disjuncture associated with a particular method of social work education that the social worker has undergone? Is disjuncture associated with a separate course in ethics education or is it associated with ethics that has been integrated into coursework? It has been previously noted that there are potential problems with the sample size regarding the number of respondents who will have had separate ethics courses. The research question is posed with this caveat in mind.

This author’s study also addresses the Lewis issue of modeling ethics through ethical teaching by creating a scale that asks about the perceived ethical adequacy of one’s former social work teachers and whether or not this is perceived as relating to one’s own sense of ethical competency.

### **Beliefs and NASW Code Literature**

It is difficult to separate the topics of beliefs literature and NASW Code literature, most of which began in the nineteen eighties. This is because much of the literature regarding beliefs is not simply about social work ethical beliefs; a fair portion is about belief in such things as the adequacy of the Code or the helpfulness of the Code of Ethics. (Gordon, 1984; Reamer, 1987; Felkenes, 1980) Therefore the said studies could be

construed as being focused upon both beliefs **and** the Code of Ethics. Nevertheless, there are some studies that investigate general ethical beliefs (Jayaratne, Croxton, & Mattison, 1997) and there are some studies that investigate the NASW Code of Ethics without relating the contents to beliefs. Examples of the latter would be studies that focus on the kinds of Code violations that have been reported over time. (Reamer, 1995; Stromm-Gottfried, 2000)

The need to review this literature is based upon the fact that the author of this study utilizes the Code to identify belief in the principles and standards of the Code, behaviors that are consistent with the Code, and disjuncture that occurs when the belief and behavior are not consonant. Therefore, the author's work falls into both categories: beliefs literature and NASW Code literature.

Some of the literature in these categories has already been reviewed in other sections, especially in the section that deals with ethics and professionalism. At least one other study that follows, like the author's, examines belief in relation to the Code of Ethics itself. (Congress, 2001) Of course, one could assert that all research on social work ethics either directly or indirectly implicates the NASW Code of Ethics. The studies reviewed will be those that are direct investigations.

### **Beliefs**

The beliefs literature involves such topics as belief in the adequacy of the Code. This includes beliefs about behaviors regarding dual relationships; beliefs in adequacy of social work ethics education; and professional social worker beliefs.

Felkenes found that respondents did not believe that either the Code or their education was adequate. (Felkenes, 1980) Others, such as Gordon and Reamer deliver

their own beliefs on the inadequacy of the Code as written commentary, but do not specifically study the beliefs of other social workers. (Gordon, 1984; Reamer, 1987) In addition, one study, mentioned in the professionalism section of this literature review, found that social workers never considered the Code in their decision-making processes, from which one could infer limited belief in the adequacy of the Code as a guide. (Holland & Kilpatrick, 1991)

However, it is worth noting that beliefs of Code inadequacy have been primarily expressed before the Code's most recent revisions. Recent discussion emphasizing Code adequacy that coincides with an absence of Code inadequacy findings is encouraging. (Ain, 2001)

In 2001, Congress studied dual relationships<sup>19</sup> -- prohibited by the Code of Ethics where there is a risk of exploitation (NASW Code of Ethics, 1999) -- between social work educators and current, as well as former students. Beliefs about the appropriateness of such relationships were varied. Sexual relationships with current students were believed to be wrong, but non-sexual dual relationships were believed to be possible, although most educators did not anticipate having them. There was more tolerance for dual relationships with former students. (Congress, 2001)

Ain, despite concluding that the Code is adequately utilized by New York City social workers, also noted that respondents expressed belief in the need for separate ethics courses and post-master's training. (Ain, 2001) This indicates that social workers believe they need more ethical training even though they are demonstrating ethical competence. Further research in this area would be useful.

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<sup>19</sup>The Code says, "Dual or multiple relationships occur when social workers relate to clients in more than one relationship, whether professional, social, or business." (NASW Code of Ethics, 1999, p.9)

Jayarathne, Croxton, and Mattison did an exploratory study of professional social work standards and beliefs in six domains: intimate relationships, dual relationships, mixed modalities, advice giving, boundary behaviors, and financial transactions. (Jayarathne, Croxton, & Mattison, 1997) These beliefs are further elaborated by gender, community size, auspices, and age. They concluded that social work has a need for more specific practice guidelines. The variable of auspices appears to be conceptually similar to this study's "setting" variable.

Grodny, in 1990, completed a dissertation about practitioners' beliefs regarding ethical and unethical practices. She studied this because her review of literature had revealed to her that there had not been "any attempt made by a social worker to study clinical social workers' beliefs about ethical and unethical practice." (Grodny, 1990) Grodny found that social workers generally agreed about what they believed to be ethical or unethical behaviors, and that social workers, when compared with clinical psychologists, are more conservative about what they believe to be ethical or unethical.

The Grodny study is actually different than the author's study because it is surveying beliefs **about** behaviors rather than discrepancies between belief (in Code tenets) and behavior (congruent with Code) that result in the experience of disjuncture. However, the Grodny survey is similar to the author's in that both involve the study of beliefs and behaviors and both are topics heretofore unexamined. Since the discrepancies between behavior/belief and their resulting tensions is a topic which has not been examined, this author is contributing, therefore, to the beliefs literature. In addition, no one has examined beliefs and behaviors vis-à-vis the specific principles of the Code.

To summarize, the beliefs literature is the examination of social worker beliefs regarding the following issues: 1) belief in the adequacy of the Code as a guide to professionals; 2) beliefs about ethical and unethical practices; and 3) beliefs about the adequacy of social work education. Trends that have emerged in recent years include an increased belief in the adequacy of the Code and an increased belief in the need for separate ethics courses in social work education. The author's work examines beliefs and behaviors vis-à-vis principles of the Code. In addition, the author examines beliefs about the influence of supervisory feedback and ethical teaching.

### **NASW Code**

Review of literature grounded in the NASW Code of Ethics must include Ain (2001), Kugelman (1992), Stromm-Gottfried (2000), Bullis (1995), Reamer (1998), Dolgoff and Skolnik (1992), Holland and Kilpatrick (1991), and Brieland and Korr (1987). Ain, as previously noted, studied use of the NASW Code in resolving ethical dilemmas and found that it is used in decision-making, but it is not the first place that social workers turn in their decision-making process. (Ain, 2001) Kugelman studied ethical decision-making and found that ethical principles as codified in the Code were used in practice. (Kugelman, 1992; Kugelman-Jaffe, 1990) This is in contrast to the findings of Holland and Kilpatrick, who noted that none of their respondents turned to the Code in dealing with complex ethical issues. (Holland and Kilpatrick, 1991)

Brieland and Korr studied the NASW Code and its role in student education. (Brieland & Korr, 1987) Students, they found, need more than just familiarity with the Code. They also suggested that students must also be familiar the academic rules and regulations of the institution they are attending, since these academic rules and

regulations might be more specific than the NASW Code and may require that students adhere to additional behaviors deemed ethical by their respective institutions.

Bullis has written an entire book regarding NASW Code violations, but tended to focus primarily upon sexual violations. (Bullis, 1995) His work is helpful in explicating the differences between professional and legal violations. Professional violations are against the NASW Code of ethics, while legal violations are against the law in a particular state. There are times when the two types of violations may overlap.

Strom-Gottfried also examined Code violations. She described the frequencies and types of behavior. (Strom-Gottfried, 2000) She concluded that allegations exceed actual findings of violation. Dolgoff and Skolnik explored ethical decision-making, using the Code as a guide, in group-work. (Dolgoff & Skolnik, 1992) They concluded that there might need to be an auxiliary code for group workers.

Reamer reviewed the new Code in a 1998 critical review of the Code. He delved into each principle in the Code in depth. (Reamer, 1998a) Reamer, like Bullis and Strom-Gottfried, above, has also written about malpractice claims based on Code violations. (Reamer, 1995) Finally, Reamer has written a risk-management tool, which is based on the NASW Code of Ethics. (Reamer, 2001b)

### **Overview of Literature Methodology**

Jansson and Dodd noted that greater empirical research regarding ethics in social work and healthcare is needed. (Jansson & Dodd, 1998) They surveyed the literature and found only fifteen empirical studies in the area of ethics in social work and health care. Of the three basic research traditions, only two are represented in the literature: quantitative descriptive and qualitative. The experimental tradition is notably absent

from the literature. The qualitative research tends to be vignettes that are employed to elucidate the decision-making processes of social workers. The quantitative descriptive research tends to be surveys in the various thematic areas that appear in the literature.

Representative of the qualitative research is Kugelman's "Social Work Ethics in the Practice Arena: A Qualitative Study." (Kugelman, 1992) In this study, social workers were given a fictitious case and asked to explain how the case could be ethically resolved. The fictitious case was designed to create an ethical conflict between the social worker's value of self-determination and the value of commitment to the organization in which one works.

Although her study is qualitative, Kugelman took pains to establish reliability and validity by giving the instrument to two groups of social work practitioners (a group of three practitioners and a group of four practitioners). One of the groups had already pre-tested the tool. Both groups believed that the instrument appeared to measure the intended concepts. Kugelman added, "In terms of the validity of this study, all transcribed interviews were reviewed by a Master's degree social worker. The use of the tape recorder allowed the author and the social worker to review the content of the interviews as often as necessary to accurately assess and rate the responses of the participants. Category reliability was computed as a function of agreement." (Kugelman, 1992, p.67)

Kugelman concluded that, although the Social Work Code of Ethics was often cited by subjects, there was no organized or systemized use of the Code. She recommended that the NASW Code of Ethics be a starting point for practitioners in making ethical decisions.

Representative of quantitative descriptive research is the Strom-Gottfried study entitled “Ensuring Ethical Practice: An Examination of the NASW Code Violations, 1986-97.” (Strom-Gottfried, 2000) All allegations and violations represent cases filed prior to the 1996 Code revision.

Strom-Gottfried reviewed the literature on the subject and also reviewed the reported Code of Ethics violations for a decade. She described the frequency and types of behaviors that resulted in findings of ethical misconduct. There were allegations in all sixty-one ethical categories; violations were found in fifty-three. Categories where no violations were found included: breaches of confidentiality with the media; dual relationships in supervising a friend or former romantic partner; denying care; rendering a disputed diagnosis; failing to properly supervise a negligent worker; committing plagiarism; failing to act to report a client’s dangerous behavior; and intentionally misdiagnosing a client. The most frequent violations were in the area of boundary violations. These included one hundred and seven sexual violations and seventy-seven other dual relationship violations, such as personal relationships preceding supervision and treatment. The study concluded that this information about Code violations helps concretize the abstract ethical requirements of the Code, thereby enhancing practice.

Dodd studied social workers in hospital settings. (Dodd, 2000) The study was quantitative descriptive, but had three qualitative, unstructured questions at the end of the instrument. Dodd examined the ethical issues that social workers witness during their practice; the extent that they are involved in deliberations around these issues; and the extent to which they felt they should have been more involved in these discussions. Dodd, unlike the authors described in the ethical decision-making category of this

literature review, was not concerned with examining the processes of decision-making or with offering prescriptions for decision-making. Rather, she was examining the types of ethical issues that arise, such as bioethical dilemmas or ethical issues in brain injury rehabilitation, as well as the degree of social workers' involvement in the deliberations.

Dodd's work is relevant to the author's present study because she identifies setting-receptivity as a factor in participation in ethical deliberations. That is, "the more receptive the setting was to social work participation in ethical deliberations the more social workers participated in ethical activism." (Dodd, 2000. p.107) The author of the current study hypothesizes that setting will relate to measured disjunctive distress.

Abbott developed the Professional Opinions Scale (POS) in 1988. (Abbott, 1988) This is a values scale whose items were inferred from Public Social Policy Statements made in 1983 by NASW social workers. (Abbott, 1999) Factor analysis resulted in four value factors: 1) respect for basic rights; 2) sense of social responsibility; 3) commitment to individual freedom; and 4) support of self-determination. Abbott explains that the 121-item POS was developed using one sample and replicated using two additional samples. Analyses of the additional samples replicated the findings achieved in the first sample. This, states Abbott, provides strong support for the validity of the four identified value dimensions. Cronbach alpha reliability coefficients indicated acceptable levels of internal consistency for each of the four value factors. (Abbott, 1988; Abbott, 1999)

Abbott further refined her work in a confirmatory factor analysis of the POS. (Abbott, 2003) As a result of her factor analysis, eight items were removed from the scale. The items that were removed had loadings of .3 or less. Factor loadings indicate how much each item has in common with a specific factor or value dimension. Abbott concluded

that the factor loadings in the new instrument were higher than the factor loadings of the 1988 factor analysis, which is why the 32-item POS will be used in the author's proposed study.

In a dissertation study, Boland utilized the shortened 40-item POS (Abbott, 1999) as a section of her own instrument. (Boland, 2002) Since the Professional Opinions Scale is representative of professional social work beliefs (and not actual behaviors) the instrument to be utilized in this author's study would need to be like the Boland instrument to the extent that it would only use the POS as a section of the entire instrument.

There are other social work values instruments (Varley, 1963; McLeod & Meyer, 1967; Judah, 1979; Howard & Flaitz, 1982) but these instruments do not cull their values from the NASW Code of Ethics. The Abbott instrument infers the values from the Code via NASW Policy Statements which are all to be found in the Code, (Abbott, 1988), thereby making her instrument more useful to the purposes of this study. Abbott says, "The Code of Ethics specifically delineates preferred professional behavior. The Public Social Policy Statements illustrate both the impact of the value base and the derived ethical principles. . . . In addition, because NASW members developed the statements, it is believed that the influence of the underlying value base and the derived Code of Ethics, should be evident in the statements themselves." (Abbott, 1988, pp.22-23) The Abbott instrument (POS), as an instrument that examines opinions about values implied by the NASW Code, extrapolates from values to opinion. Taking this a step further, one can also extrapolate beliefs from POS scale opinions, as opinions are based on belief.

Abbott's scale, however, was not used to measure beliefs. She rationalizes that opinions about values influence behavior and that her instrument is, therefore, reflective of behavior. (Abbott, 1988) If it is agreed that opinions about values influence but do not determine behavior, it could be suggested that the stronger relationship may exist between opinions about values and belief in values. That is, opinions about values may actually be more closely reflective of beliefs about values than they are reflective of behaviors. Therefore, the study at hand uses the POS as an instrument that measures beliefs.

## **Chapter 4 -- Goals and Intellectual Framework**

### **Purpose**

The major purpose of the study has been to look at the NASW Code and the problems it causes social workers in terms of the discrepancies between belief in the tenets of the Code and behaviors that implement the Code. The literature review has shown that discrepancies between the Code and behaviors are unexamined areas. Also unexamined is the relationship between disjuncture (dilemma-induced distress) and work setting, as well as disjuncture and training in ethics. Finally, no one has looked at whether or not social workers agree with Lewis's contention that ethical teaching can model the teaching of ethics.

In a pilot study, results indicated that some social workers have high belief in the Code of Ethics, behaviors congruent with the Code and yet experience high disjuncture. Interpretation of this pilot data included the suggestion that lack of supervisory feedback may be implicated in these findings. It may be that social workers who have congruence of belief and behavior are not being given the evaluatory feedback that reassures them that they are doing a good job in terms of implementation of the Code. (DiFranks, 2001) Thus, they experience high disjuncture. Therefore, two questions regarding the amount of past and present supervisory feedback have been added to the questionnaire.

### **Goals**

The goals of this study are to answer the following research questions:

- 1) Do social workers experience disjuncture when ethical beliefs and behaviors are discordant?
- 2) Is there a relationship between experienced disjuncture and work setting?

- 3) Is there a relationship between experienced disjuncture and the method of ethics integration into the social work curriculum and exposure to ethics in social work education?
- 4) Do social workers perceive that ethical teaching can model the teaching of ethics?
- 5) Do social workers report high disjuncture and high concordance of belief/behavior when they perceive an absence of supervisory feedback?

## **Intellectual Framework**

### **Key Definitions and Key Theories**

The following section will define key constructs and identify theories used to inform this research. In philosophy, social work and other disciplines, there is often muddling or disagreement about definitions. This study attempts to select the definition that best suits the parameters of this proposal.

#### **1) Key Definitions**

Disjuncture -- Disjuncture is defined as a disjoint, a situation characterized by alternate choices, a situation characterized by mutually exclusive choices, a discontinuity, a separation of usually contiguous parts, a disunity, and a sundering. (Webster's Third New International Dictionary, 1993) Disjuncture implies states of emotion. When the author of this study speaks of disjuncture, she is presuming that the accompanying emotional state is one of tension, possible anomie (personal anxiety and disorientation), and a general level of discomfort. Put simply, *disjuncture is dilemma-induced distress*. Of the above definitions, "a sundering," in particular, does not occur without physical or emotional pain. This study expects to

find the experience of disjuncture when beliefs in the Code of Ethics and behaviors that implement the Code are non-congruent.

Ethical Teaching -- Ethical teaching, as defined by Lewis, occurs when teachers educate by modeling the behavior they expect of their students. When teachers follow ethical standards in their behavior, their behavior is 'caught' or learned as well by students as the material that these students have been formally taught, says Lewis. (Lewis, 1987) Lewis takes principles of the NASW Code of Ethics and substitutes the word 'student' for the word 'client' and substitutes 'teacher' for 'social worker' in the same manner. He distills the Code's principles into five principles for ethical teaching:

- 1) Responsibility to Students: The Teacher's primary responsibility is to the student.
- 2) The Teacher should treat colleagues with respect, courtesy, fairness, and good faith. The Teacher has the responsibility to relate to the students of colleagues with full professional consideration.
- 3) The Teacher should adhere to commitments made to the employing organization.
- 4) The Teacher should uphold and advance the values, ethics knowledge and mission of the profession.
- 5) The Teacher should promote the general welfare of society. (Lewis, 1987, pp.5-12)

If ethical teaching is apprehended or 'caught' by the students, as Lewis

asserts, it is possible that the students are not consciously aware of what has been modeled by the teacher, in which case the instrument of this study may not capture the concept of ethical teaching with the item that asks whether social work teachers modeled ethics by demonstrating a primary responsibility to students, by respecting colleagues, and by keeping their commitments to their educational institution.

(Appendix A, Section III, Question #2)

Ethics -- Ethics are the rules we make about right and wrong, good and evil. These may become codified as guidelines by way of profession, religion, etc. Ethics has been described as “values in operation,” (Dolgoff & Skolnik, p.100) but there are problems with such a definition when ethics and values clash. Abbott emphasized that values indicate preferences and ethics indicate rules based upon the preferences.

(Abbott, 1988)

Values -- Values are what we cherish and hold dear. Values imply a weight, a valence. These are the things that are more important to us than others. We place a high worth on some things and some things, intrinsically, have worth. We use variations of value as a verb, as an adjective and as a noun. Values are organizing principles of societies. Values are comprised of what is regarded as good and desirable and what is preferred by a culture. (Abbott, 1988)

Some writers view values as less constant. Lewis asserted that values are relative and ethics are normative, and that social workers keep confusing the two. (Lewis, cited in Bloom, 1992) That is, in the view of Lewis, values may differ from person to person, but ethics, especially professional ethics, are rule-abiding. In the case of codes of ethics, the codes represent a set of rules. These rules imply values,

but these values have been agreed upon by the particular profession; they are therefore less relative than the personal values of which Lewis speaks.

Beliefs -- Beliefs are those things about which we have convictions. (For example, we believe that something is true or untrue; we believe that something is good or bad; we believe that something is right or wrong.) The dictionary succinctly defines belief as “a conviction of the truth of some statement of reality.” (Webster’s Third New International Dictionary, 1993) Some beliefs are considered factual: we believe that the sun will continue to shine on the earth for a long time. Factual beliefs may be correct or incorrect: the belief that the sun moves from east to west is an incorrect belief. Some beliefs are opinions: we believe that we have been good parents. Other beliefs represent values: we believe that something has value when we ascribe to it worth, weight, and valence. In some cases beliefs as opinions and beliefs as values will overlap. For example, many social workers believe in the NASW Code of Ethics. It is the opinion of many of them that the Code is true and correct; this trueness and correctness is likely valued by these social workers.

## **2) Key Theories**

Cognitive Dissonance Theory -- This is the theory chosen to explain the presumption that disjunctive situations are ones in which negative feelings occur. Cognitive dissonance, pared from the flesh of its theory, is simply two conflicting cognitions. Cognitive dissonance, more fully fleshed, becomes a situation of disjuncture that occurs in one’s cognitive processes. (Garfield & Bergin, 1978) Leon Festinger, who proposed the theory of cognitive dissonance, identified two patterns: 1) the presence of *inconsistency that is psychologically uncomfortable*, thereby motivating a change

in belief, attitude, or behavior to accommodate the inconsistency; and 2) a pattern of avoidance of situations and information that are likely to increase the dissonance.

(Crabtree, 2001; Garfield & Bergin, 1978; March, 1997)

Cognitive dissonance, in the context of this study, is activated by the discordance between beliefs and behaviors, the knowledge that one is not behaving consistently with one's beliefs. This study calls upon this theory in order to predict disjuncture in the presence of incongruent beliefs and behaviors, as well as to underscore that it is not overly presumptive to assume that disjuncture implies a negative state. This study does attempt to bolster Festinger's already robust findings regarding change motivation. (Garfield & Bergin, 1978) We expect to find cognitive dissonance and the accompanying discomfort when beliefs/behaviors are incongruent.

However, findings that belief/behavior incongruence does NOT bring disjuncture could suggest that we are looking at the second pattern of Festinger's theory, as above. In such a case, social workers may deny the dissonance, put it aside, or repress the information altogether. This has consequences for the profession: social workers avoiding information and situations are a threat to themselves and others.

Applied Ethics -- Ethics may be defined as the theory, or arguments, we make about right and wrong, good and evil, otherwise known as morality. Applied Ethics is the application of abstract ethical theory to hypothetical (and sometimes actual) situations. (Fieser, 2001a) In the case of this study, the NASW Code of Ethics' principles and standards are being applied via an instrument, in the form of a

questionnaire, that asks about workers' beliefs in principles and standards, behaviors in regard to the principles and standards, and resulting disjuncture.

Empiricism -- This is a quantitative descriptive study, which places it in the tradition of empirical research. Empirical research may rely upon quantitative or qualitative data. (Weiss, 1998) However, empiricism tends to be categorized with logical positivism (science as having only one logic) and the experimental, scientific method. (Neuman, 1984; Peile, 1987) Empiricists maintain that knowledge is based on sense experience and internal mental experience, such as emotions and self-reflection. Empiricists used both inductive and deductive methods of reasoning. (Feiser, 2001b) This study gathers its empirical data via a questionnaire designed by the author.

Theory of Duty -- Theory of duty is both prescriptive and proscriptive. It suggests contractual permissions, obligations, prohibitions and prescriptions. (Kurzman, 1988.) As such, duty is met when certain prohibitions, or proscriptions, are *not committed* and when certain obligations, or prescriptions, are *not omitted*. The study of ethics embraces the exploration of three principal theories: the theory of virtue, the theory of duty, and the theory of common good. (Jonsen & Hellegers, 1976) The theory of distributive justice is the manner in which goods and the common good should be distributed and is thought by some ethical philosophers to be an aspect of the theory of good. Theory of duty philosophers may disagree on the primacy or order of ethical principles. Some place duty as a premise embedded in theory of good; others place duty as dependent upon a right that is *not* embedded in a theory of good; and others separate theory of duty and theory of good. (Rawls, 1971; Nulman, 1984; Jonsen & Hellegers, 1976) Theory of duty is a context for the study; it will not be measured

and tested. Theory of duty generates codes of ethics, leading, in many cases, to professional licensing. This study is grounded in the NASW Code of Ethics that emanates from theory of duty.

### **Pilot**

A pilot version of this study was run by the author in January of 2001. The number of respondents was small (n=30), but the results were so surprising that they are worth noting. Using an instrument similar to that which has been developed for this study, the author found that social workers believe in the NASW Code of Ethics, behaved in a manner that is congruent with the Code of Ethics, but experienced high levels of expressed tension.

This was a completely unexpected finding that was given two interpretations: 1) It was suggested that social workers have very high unmet ideals. That is, despite the fact that they are behaving in congruence with a Code in which they believe, they remain frustrated by not having more perfect congruence. 2) It was also suggested that social workers with high belief /behavior congruence and high disjuncture might not be receiving the adequate supervisory feedback that tells them they are doing a good job in terms of enactment of social work values. (DiFranks, 2001) Therefore, the supervisory process could be a mitigating factor in disjuncture.

On account of the pilot results, a question was added to the instrument (Appendix A, Section II, Question #25): “When I receive supervisory feedback I value the quality of my work more.” This question is the result of the interpretation that high belief/behavior concordance in the face of high disjuncture could mean that social workers are not given sufficient evaluatory feedback that lets them know they

are doing a good job. This evaluatory information might be perceived as having potentially ameliorative affects upon the tensions that are present, despite the high consonance of belief and behavior. This also lends itself to the hypothetical statement that where social workers report concordant high behaviors and belief, but still report high disjuncture, they will also report an absence of supervisory evaluatory feedback. In addition, the study will measure the amount of past and present supervisory feedback. (Appendix A, Section IV, Questions #10 – 13)

Finally, it is possible that with results indicating high congruence between belief and behavior in the face of high disjuncture, what we are really seeing is social workers operating in very tension-provoking situations with a Code that is an unrealistic guide to the social worker's day-to-day dilemmas. Such an interpretation revisits the arguments about adequacy of the Code.

### **Problem Statement**

In terms of values set forth in the principles and standards of the NASW Code of Ethics, not enough is known about social workers' belief/behavior discordance and experienced disjuncture, the relationship between setting and experienced disjuncture, the relationship between method of ethics education integration into the social work curriculum and experienced disjuncture, whether social workers perceive that they have learned ethics by having experienced ethical teaching, and whether concordance of high belief/behavior and high disjuncture is accompanied by lack of supervisory feedback. All are absent from the literature. This need for more information in these areas will be addressed by the research questions that follow.

### **Research Questions**

- 1) Do social workers experience disjuncture when ethical beliefs and behavior are discordant?
- 2) Is there a relationship between experienced disjuncture and work setting? (For example, does a 'host' setting correlate with higher disjuncture than a social work setting?)
- 3) Is there a relationship between experienced disjuncture and the way in which the social worker's ethics education was integrated into the curriculum?
- 4) Do social workers perceive that they have learned ethics by having experienced ethical teaching?
- 5) Do social workers report high experienced disjuncture and high belief/behavior concordance when they perceive an absence of supervisory feedback?

### **Statement of Hypotheses**

Hypothesis #1: Social workers experience disjuncture when belief and behaviors are discordant.

Hypothesis #2: There is a positive correlation between higher levels of experienced disjuncture and employment in host (non-social work) settings.

Hypothesis #3: There is a positive correlation between higher levels of experienced disjuncture and social work education that does not require a separate course in social work ethics.

Hypothesis #4: Social workers will perceive that they have learned social work ethics by having experienced ethical teaching.

Hypothesis #5: Where social workers report concordant high behaviors and belief, but also report high experienced disjuncture, they will additionally report an absence of supervisory feedback.

### **Independent and Dependent Variables**

Since this is a quantitative descriptive study, there are no experimental interventions and no true causal relationships can be inferred. We are looking at relationships among the variables. In hypothesis #1 of this study, the dependent variable is disjuncture. Belief and behavior could be considered independent variables that affect disjuncture. However, what is hypothesized to **most** affect disjuncture, is the **relationship** between belief and behavior. Disjuncture is presumed dependent upon, or affected by, degrees of congruence between belief and behavior. Low congruence between belief and behavior (discordance of belief and behavior) is a condition that affects the dependent variable of disjuncture, presumably increasing it. High congruence between belief and behavior is a condition that affects disjuncture, presumably decreasing it. Thus, belief and behavior, independently, do not actually affect disjuncture and may more aptly be construed as antecedent variables. The conditions of high congruence or low congruence are really the conditions, or independent variables, that affect the dependent variable of disjuncture

As stated, since there are no interventions in this study no true causal relationship can be inferred. Statistically significant relationships can, however, be described and from this one can infer whether or not high or low belief/behavior congruence affects disjuncture. Quantitative analysis will include descriptive bivariate statistics such as correlations, ANOVAs, paired sample t-tests and t-tests;

and descriptive univariate statistics, such as frequency distributions. Univariate statistics include measures of central tendency, such as means, medians, and modes, and analyses of dispersion, such as standard deviation and variance.

Hypothesis #2 states that there is a positive correlation between levels of experienced disjuncture and employment in host (non-social work) settings. Disjuncture is the dependent variable that is affected by the independent variables of host setting (non-social work) and non-host setting (social work). Private practice will be considered as a non-host setting, where no other profession is in charge.

Hypothesis # 3 states that there is a positive correlation between disjuncture and social work ethics education that does not require a separate course in social work ethics. In this case, the dependent variable is again disjuncture, while the independent variables are social work education that includes a separate elective ethics course, social work education that includes a required ethics course, social work education that includes ethical issues integrated into each course, social work education that models social work ethics through ethical teaching, and social work education that includes ethical issues integrated into field work practicum and supervision.

Hypothesis #4 states that social workers whose teachers modeled ethical teaching perceive that this modeling educated them in social work ethics. The dependent variable is the learning of social work ethics. The independent variables are the perceived presence of ethical teaching or the perceived absence of ethical teaching. It is predicted that the perceived presence of ethical teaching will have a positive relationship with the perceived adequacy of social work ethics education.

Hypothesis #5 states that where social workers report high behavior/belief consonance, but also report high experienced disjuncture, so too will they report an absence of supervisory feedback. The dependent variable is the concordance of high belief/behavior and high experience of disjuncture. The independent variables are perceived absence of supervisory feedback and actual absence of supervisory feedback.

## **Chapter 5 -- Research Design**

### **1) General Research Design**

This is quantitative descriptive study, utilizing descriptive univariate and bivariate statistics. It is formative, rather than summative, and intended to inform social work practice in the area of applied ethics. The study is a survey of social workers that assesses ethical issues for a large sample of social workers and tests some initial hypotheses concerning the concepts of disjuncture, ethical beliefs, ethical behaviors, method of social work ethics education, ethical teaching, perceived adequacy of social work ethics education, and supervisory feedback. The study has evaluative aspects in that we can make inferences about ourselves as teachers, supervisors and workers.

The study is conducted as a mailed survey to an initial random sample of five hundred social workers throughout the United States, who are members of NASW. This random sample, stratified or selected for MSW's, is purchased from NASW and is randomly drawn from their mailing lists..

### **2) The Questionnaire**

A cover letter explains the purpose of the survey (Appendix B, Cover Letter) and a page reviewing some basic Code tenets is included with the instrument to define the basic tenets of the Code. (Appendix C, Basic Tenets of the Code) It is an attempt to level the playing field of social worker respondents, so that those who have not been exposed to the Code will be at no exceptional cognitive disadvantage. The basic Code tenets are included to bring those social workers who might not be

familiar with the Code to a facsimile level with those who are. There is also an informed consent form that indicates that participants who respond have read the form and agreed to participate. (Appendix D, IRB Approved Consent Form)

The questionnaire that is largely designed to measure beliefs, behaviors, and disjuncture is based primarily on the principles and values of the Code, with a fair representation of questions that reflect the standards of the Code. It would be too lengthy an instrument if it were to cover each standard in the Code and all its sub-categories. The instrument incorporates another validated scale, the Professional Opinions Scale. (Abbott, 1988; Abbott, 1999) The short-form POS is a set of forty items that operationalizes the concept of “belief.” This scale was later reduced to a thirty-two item scale as a result of the Abbott confirmatory factor analysis. (Abbott, 2003) The thirty-two item scale is utilized in this study.

Abbott developed the Professional Opinions Scale (POS) in 1988. (Abbott, 1988) This is a values scale whose items were inferred from Public Social Policy Statements made in 1983 by NASW social workers. Factor analysis resulted in four value factors: 1) respect for basic rights; 2) sense of social responsibility; 3) commitment to individual freedom and 4) support of self-determination. (Abbott, 1999) The professional opinions are opinions (beliefs) about values.

Abbott explains that the 121-item POS was developed using one sample and replicated using two additional samples. Analyses of the additional samples replicated the findings achieved in the first sample. This, states Abbott, provides

strong support for the validity of the four identified value dimensions. Cronbach alpha reliability coefficients indicated acceptable levels of internal consistency for each of the four value factors. (Abbott, 1988; Abbott, 1999) The reliability coefficients for the four value factors ranged from .72 to .82. Abbott's confirmatory factor analysis resulted in the removal of items from the original POS. The POS with the highest factor loadings is the 32-item scale. (Abbott, 2003) This researcher has incorporated the 32-item short-form Abbott scale into the three section instrument that is utilized to collect the data for this study.

Because the NASW Code of Ethics is based on values (each principle is preceded by the value it represents) and the POS is a values scale based on NASW policy statements, it stands to reason that the four factors in the POS are embedded in the Code of Ethics. Abbott elaborates upon the connection between values and ethics, emphasizing that values indicate preferences and ethics indicate rules based upon the preferences. (Abbott, 1988) Since the Code is based upon the preferences of professional social workers, it is possible to use this scale as part of this author's proposed instrument. As such, the POS (Professional Opinions Scale) could be seen as measuring opinions synonymous with beliefs. These opinions would be about the values that are reflected in the Code's principles. The Abbott instrument (POS), as an instrument that examines opinions about values implied by the NASW Code, extrapolates from values to opinion. Taking this a step further, one can also extrapolate beliefs from POS scale opinions, as opinions are a kind of belief.

### 3) Conceptual Definitions

The following concepts are operationalized by questions on the instrument that the author has designed. They are: “belief in the tenets of the Code,” “behavior congruent with the Code,” “degree of belief/behavior discordance,” “experience of disjuncture,” “modeling ethical education,” “ethics education,” “host/non-host setting,” “perception of enhancing supervisory feedback” “actual supervision,” and concordance of beliefs, behaviors, disjuncture.” These concepts are operationalized as variables in the study. A chart of concepts and items that measure them is provided later in this chapter. In addition, demographic data is collected. “Demographic data” does not comprise any dependent or independent variable.

Belief in the Tenets of the Code -- Beliefs are cognitions about objects or situations that are evaluated as ‘true’ or ‘false’ or ‘good’ or ‘bad’ by a group or individual.

“Belief in the tenets of the Code” is defined as self-reported belief or agreement with the standards, principles and stated values set forth in the NASW Code of Ethics. In this study professional opinions will be viewed as being synonymous with beliefs.

Behavior Congruent with the Code -- This is defined as self-reported behaviors consistent with principles set forth in the NASW Code of Ethics.

Degree of Belief/Behavior Discordance -- This is defined as the amount of discrepancy between belief in the tenets and values of the Code and behavior that is consistent with the Code.

Experience of Disjuncture -- This is defined as a self-reported negative experience of discontinuity. Disjuncture is dilemma-induced distress. This study is concerned only with the subjects' perceptions of distress.

Modeling Ethical Education -- This is defined as educating by modeling the behavior that is expected of students. The teacher models ethics by demonstrating a primary responsibility to the student; by treating colleagues with respect, courtesy and fairness; by adhering to commitments made to the employing organization; by upholding the values of the profession; and by efforts to promote the general welfare of society. (Lewis, 1987)

Ethics Education -- This is defined as social work ethics education that has been taught by integrating ethics into courses across the curriculum, by integration of ethics into the field work practicum, by teaching a discrete course (required or elective) in social work ethics, or by modeling ethics through ethical teaching. Ethics education is accessible to evaluation in terms of adequacy, preferences and familiarity with the Code.

Host/Non-Host Setting -- Host setting is defined as a social work job in a non-social work setting, such as a hospital or a prison. The non-social work setting is the "host" of the social worker. A non-host setting is defined as a social work job in a social work setting, such as a settlement house.

Perception of Enhancing Supervisory Feedback -- This is defined as the perception of the presence of supervisory evaluation that enhances the social-worker's self-evaluation.

Actual Supervision -- The amount of supervision reported by the social worker.

Concordance of Belief/Behavior/Disjuncture -- This is defined as the anomalous occurrence of high scores in beliefs, behavior and disjuncture.

Demographic Information -- This is defined as data regarding age, gender, number of years of practice, and location of practice.

#### **4) Operationalization of Concepts**

“Belief in the tenets of the Code” is operationalized by use of the short-form POS, Personal Opinions Scale, a validated values scale based upon NASW public policy statements. (Abbott, 1988; Abbott, 1999; Abbott, 2003) This is a values scale whose items were inferred from Public Social Policy Statements made in 1983 by NASW social workers. Factor analysis resulted in four value factors: 1) respect for basic rights; 2) sense of social responsibility; 3) commitment to individual freedom and 4) support of self-determination. (Abbott, 1999; Abbott, 2003.) The professional opinions are opinions (beliefs) about values.

Thus, there are a total of thirty-two belief statements regarding tenets of the Code. Of these thirty-two belief statements, nineteen indicate beliefs that are contrary to the values set forth in the NASW Code of Ethics. These may be referred to as non-belief statements. The remaining thirteen statements that positively reflect the values of the Code may be referred to as strong-belief statements. All strong-belief statements must be reversed in direction, since strong-belief scores are low rather than high (range from 1=high belief and 5=low belief) and non-belief scores do not need to be reversed in direction since non-belief statements are low (range from 1=high belief in a non-belief value and 5=low belief in a non-belief value).

The next section of the instrument has twelve Likert score behavior statements (“behavior congruent with the Code”), as well as twelve Likert score statements that reflect “experience of disjuncture.” An example of the behavior statements would be #9, which says, “I have had physical contact with clients when I could not be certain there would be no harm.” An example of the disjuncture statements would be #3 which says, “It would bother me if I accepted payment for a referral.” Four behavior scores must be reversed.

“Degree of belief/behavior discordance” is operationalized by measuring the discrepancies between short-form POS scores and Likert statement behavior scores. More specifically, “degree of belief/behavior discordance” is operationalized by degree of negative or positive relationship of scores received on belief items and scores received on behavior items. After item scores are reversed so that all are scored in the same direction, scores that are high in belief and low in behavior will be valued as highly discordant. Likewise scores that are high in behavior and low in belief will be valued as highly discordant. Scores high in behavior and high in belief, as well as scores low in behavior and belief, are valued as highly concordant. This low - high range of discordance values comprises the “degree of belief/behavior discordance.”

“Degree of belief/behavior discordance” should correlate with “experience of disjuncture.” It is expected that highly discrepant scores in belief/behavior items (high discordance) will correlate with high scores in “disjuncture.”

“Modeling ethical education” is operationalized by Section III, items #2 and #9e. Question #2 says, “My social work teachers modeled ethics by ethical teaching. They modeled social work ethics by having a primary responsibility to students, by respecting colleagues, and by keeping their commitments to their educational institution.” Question #2 is a Likert “strongly agree-strongly disagree” scale. Question #9e is a Yes/No item that asks, “Do you think you learned social work ethics from teachers who modeled ethical social work behavior?”

The “ethics education” variable is represented by Section III, item #1 and #3 – 9d. Questions #1 and 3 are Likert scales that ask about whether ethics education was integrated into each course (“strongly agree-strongly disagree”) and the frequency of discussion of ethical issues in the student’s field work supervisory practicum (“never-always”). Question #4 is a Likert “strongly agree-strongly disagree” scale that asks about perceived adequacy of education. Questions #5 – 9a-d are Yes/No variations that ask whether or not the respondent had a separate course in ethics, whether or not this was required, whether the Code was read during the MSW education, whether the Code has been read at all, and preferences for ethics education. There is also a question in Section IV, #14, ranging from “not familiar” to “very familiar,” where the respondent self-rates “familiarity with the code.”

“Host/non-host setting,” which is conceptually defined as either a non-social work setting (host) or a social work setting (non-host), is operationalized as independent variables in the study. “Host/non-host setting” is operationalized by

Section IV, questions #1-3, asking respondents to check off the categories that most appropriately describe their own **work setting, field of practice** and current job **function**. Ten work settings are named, including “other,” where respondents are asked to specify; sixteen practice settings are named, including “other,” where respondents are asked to specify; and ten job functions are named, including “other,” where respondents are once again asked to specify. Further categories could be inferred from “other” responses. Hypothesis #2 predicts that the independent variables of “host/non-host setting” will affect the dependent variable of “experience of disjuncture.” This is expected to occur in the presence of another independent variable, “degree of belief/behavior discordance,” in this case, high discordance.

The “perception of enhancing supervisory feedback” variable is operationalized by Likert scale question #25 in Section II of the questionnaire, with choices of “strongly disagree-strongly agree.” It asks whether or not the respondent agrees that supervisory feedback causes the respondent to value his or her work.

“Actual supervision” is operationalized by Questions #10 – 13 in Section IV of the questionnaire. These questions ask about the actual amount supervision and are not operationalizations of “perception of enhancing supervisory feedback.” Rather, they give contrast to the difference between actual supervisory feedback and perceptions of supervisory feedback.

Supervisory feedback, both perceived and actual, are hypothesized to be independent variables affecting “concordance of belief/behavior/disjuncture” (dependent variable.) Belief,behavior/disjuncture concordance is expected to occur

when low amounts of supervisory feedback are found in the presence of high belief scores, high behavior scores, and high disjuncture scores. “Concordance of belief/behavior/disjuncture” is operationalized by these high scores in beliefs, behavior and disjuncture.

Finally, questions #5 - 9, in Section IV, operationalize demographic data regarding age, gender, years of experience, and locale. Again, these questions operationalize defined concepts, not variables.

When results are obtained, the various settings may be grouped according to auspices: public, private not-for-profit, private for-profit, and independent private practice, but this buries the host versus non-host setting that the author would like to tease out, according to hypothesis #2.

The behavior and disjuncture items have been randomly ordered on the questionnaire. Most of the Likert behavior and disjuncture items are never/always frequency questions. All belief items are segregated from the behavior and disjuncture items because of the use of the Abbott POS Likert scale. This scale is comprised entirely of agree/disagree items. Yes/No questions and the demographic information are also separated from Likert items in Section III.

Chart #4 -- Conceptual Variables and Items that Measure Them on Instrument

<b>Belief in Tenets of the Code: Section I</b>	All thirty-two items of the validated Abbott Personal Opinions Scale – short-form. (See Attachment #1) Nineteen belief statements are non-congruent with values set forth in the Code & thirteen are congruent.
<b>Behavior Congruent with Code: Section II</b>	<p>2) My job lacks adequate social work supervision.</p> <p>5) As a social worker, I promote client self-determination in such areas as program admissions, service planning, or discharge planning.</p> <p>8) I am able to facilitate change in the lives of my clients.</p> <p>9) I have had physical contact with clients when I could not be certain there would be no harm.</p> <p>10) At work, I treat people with care and respect and I am mindful of differences and diversity.</p> <p>13) At my job, I protect my clients' rights to privacy and informed consent.</p> <p>16) In my job, I have accepted praise that belonged to someone else.</p> <p>17) I advocate for my clients in my job setting.</p> <p>18) I have accepted payment for referrals made to me.</p> <p>20) At your job, how often do you help people in need and address social problems?</p> <p>21) When I observe a conflict between my individual clients' interests and my agency's interests, I try to resolve this dilemma.</p> <p>23) Despite all intentions to do otherwise, there have been times when I have had to compromise my professional integrity in my job setting.</p>
<b>Degree of Belief/Behavior Discordance: Section I &amp; Behavior Items of Section II</b>	This is determined by scoring belief and behavior items: all of POS and behavior items of Section II. Degree of Discordance is represented by the degree of negative or positive relationship of scores received on belief items and scores received on behavior items. After item scores are reversed so that all are scored the same direction, scores that are high in belief and low in behavior will be valued as highly discordant. Likewise, scores that are high in behavior and low in belief will be valued as highly discordant. Scores high in behavior and high in belief, as well as scores low in behavior and belief, are valued as highly concordant.
<b>Experience of Disjuncture: Section II</b>	<p>1) I feel stress because, at my job, it is hard to treat people with care and respect, as well as be mindful of differences and diversity.</p> <p>3) It would bother me if I accepted payment for a referral.</p> <p>4) I feel stress when I am at work because I am not always able to help people in need with their personal problems <i>and</i> help them address larger social issues.</p> <p>6) I experience stress because I am not able to protect my clients' rights to privacy and informed consent.</p> <p>7) I feel increased stress because I realize that, at times, my professional integrity has been compromised by practice realities.</p> <p>11) I experience stress because of the conflict between my individual clients' interests and my agency's interests, such as the need to meet required number of service contacts per month.</p> <p>12) I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning or discharge planning.</p> <p>14) I would feel uncomfortable if I were credited for someone else's work.</p> <p>15) As a social worker, I experience frustration because managed care and bureaucratic constraints often require termination before the client has been able to change.</p> <p>19) I experience stress because I am unable to advocate for my clients in my job setting.</p> <p>22) I feel uncomfortable when I have had physical contact with clients.</p> <p>24) I am frustrated at work by the absence of supervision learning opportunities.</p>
<b>Ethics Education</b> How Ethics was Taught & Adequacy of Education: <b>Section III</b>  Familiarity w/Code: <b>Section III</b> <b>Section IV</b> Education Preferences: <b>Section III</b>  Modeling Ethics: <b>Section III</b>	<p>1) My ethics training at the MSW level was primarily accomplished by the integration of ethical issues into each course.</p> <p>3) In your MSW field work practicum and supervision, how often were ethical issues discussed?</p> <p>4) I feel that my MSW level education provided me with adequate ethical education.</p> <p>5) My ethics training at the MSW level included a separate course in ethics and social work.</p> <p>6) Was this separate course a required course?</p> <p>7) Did you read the NASW Code of Ethics during your MSW Education?</p> <p>8) Have you ever read the NASW Code of Ethics?</p> <p>14) How familiar are you with the Code of Ethics?</p> <p>9) Please answer the following questions about social work ethics in MSW programs.</p> <p>a) Should there be a required ethics course?</p> <p>b) Should there be an elective ethics course?</p> <p>c) Should ethics be integrated into all coursework?</p> <p>d) Should ethics be integrated into fieldwork and supervision?</p> <p>2) My social work teachers and field work supervisors modeled ethics by ethical teaching. They modeled social work ethics by having a primary responsibility to students, by respecting colleagues, and by keeping their commitments to their educational institution.</p> <p>9e) Do you think learned social work ethics from teachers who modeled ethical social work behavior?</p>
<b>Non-host/Host Setting: Section IV</b>	1 – 3) Describe current job. (“Non-host” is a social work setting. “Host” is a non-social work setting.)
<b>Supervisory Feedback: Section II</b> <b>Section IV</b>	25) When I receive supervisory feedback I value the quality of my work more. 10 - 13) Actual amount of supervision.
<b>Concordance of Belief/Behavior/Disjuncture</b>	This is determined by high scores in belief, behavior and disjuncture.

## **5) Methods of Data Analysis**

The methods of data analysis are quantitative. The individual social worker comprises the unit of analysis for the research. The quantitative analysis will utilize descriptive bivariate and univariate statistics, including ANOVAs, t-tests, correlations, frequency distributions and measures of central tendency.

In analyzing the data, items are changed in their direction of strength, where appropriate. Items that are opposite in their direction of strength (e.g. “highly anxious” represented by score of 7 and “highly relaxed” represented by a score of 7), require a change of direction so they are arithmetically equivalent. Thus, a score of 7 on “highly relaxed” becomes a score of 1 for scoring purposes. Such items correct for “response set” wherein subjects respond to questions as though each question followed a set pattern, without really paying attention to the question being asked.

## **6) Scoring**

The instrument, incorporating the short-form POS, is an Attachment to this proposal. Likert scales ranging from 1-5 and 1-7 are used to measure responses to items. Some statements are the ‘strongly disagree’ to ‘strongly agree’ type (1-5 range); others are the ‘never’ to ‘always’ type (1-7 range).

The low score for belief will be represented by the lowest possible score on the short form POS. There are a total of thirty-two belief statements regarding tenets of the Code. All of the belief items range from 1=strongly agree to 5=strongly disagree. Of these thirty-two belief statements, nineteen indicate beliefs

that are contrary to the values set forth in the NASW Code of Ethics. These may be referred to as non-belief statements. The remaining thirteen statements that positively reflect the values of the Code may be referred to as strong-belief statements. All strong-belief statements must be reversed in direction, since strong-belief scores are low rather than high (range from 1=high degree of belief in a strong-belief value and 5=low degree of belief in a strong-belief value). Non-belief scores do not need to be reversed in direction since non-belief statements are also low (range from 1=high degree of belief in a non-belief value and 5=low degree of belief in a non-belief value). The lowest possible belief score will be 32. After strong belief scores have been reversed in direction, the highest possible belief score will be 160. High belief score means high belief in tenets and values of the Code. Items #1, #4, #8, #13, #15, #16, #25, #27, #28, #29, #30, #31, and #32 must be reversed.

There will be possible low score item totals of 12 for each of the following conceptual variables: behaviors and disjuncture. For the behavior variable, the high score for items will be 82 and for the disjuncture variable, the high score will be 80. High behavior score means behavior that is congruent with the Code. High disjuncture means an experience of discomfort as a result of not behaving in consonance with the Code. As with the belief variable, certain items will need to be reversed in direction. The direction of five behavior items (Appendix A, Section II, Items #2, #9, #16, #18, and #23) must be reversed.

There are eight yes/no items which inquire about ethics education (Appendix A, Section III, Items #5 - 9a-e). These items are nominal data and, as such, can be assigned numbers. There is one item about the frequency of discussion of ethical issues during MSW training supervision (Appendix A, Section III, Question #3) and one item about teachers modeling social work ethics. (Appendix A, Section III, Question #2) These items are in Likert scale, ranging from 1-5 (Question #2) and 1-7 (Question #3).

There are additional items about the number of years experience as an MSW, amount of supervisory experience, and the year of graduation from the MSW program.

Belief/behavior discordance occurs when comparing the 32 belief items with the 12 behavior items. Belief/behavior discordance would occur if there are high belief scores with low behavior scores or high behavior scores with low belief scores. It is predicted that when such discordance occurs, there will be high experienced disjuncture or cognitive dissonance. A measure for discordant scores may be computed by finding the difference between belief scores and behavior scores.

Modeling ethical education scores range from a low of 2 to a high score of 8. (Appendix A, Section III, Items #2 and #9e) This will occur if item scores on the Yes/No question are reversed in direction and if the Yes/No scores are converted to ordinal data by assigning numbers. (Yes=1, Maybe=2, and No=3 must be reversed to Yes=3, Maybe=2, and No=1.)

Ethics education scores (Appendix A, Section III) range from 1 - 5 in terms of perceived adequacy of ethics education, with a score of 1 indicating low adequacy (Item #4); 1-7 in terms of frequency of ethical discussion in field work supervisory practicum (Item #3) with a score of 1 indicating a low amount of ethical discussion; 1-5 in terms of integration of ethics into coursework (Item #1) with a score of 5 indicating that ethics was highly integrated into coursework; and 1-2 in terms of whether, if a student had had a separate course in ethics (Item #5), that separate course had been required (Item #6). In this case the high score would indicate that the separate course was not required. (Yes=1, No=2) Question #7 asks whether the NASW Code of Ethics was read by the respondent during the MSW education (Yes=1, No=2), where the high score would indicate that the course was not required. Question #8 asks whether the Code of Ethics has ever been read. (Yes=1, No=2) Question #14, Section IV, asks the respondent to self-rate familiarity with the Code of Ethics, with a Likert scale, not familiar – very familiar, that ranges from 1-4.

Ethics education preferences (Appendix A, Section III, #9a-d) are scored in a range of 1-3 for each preference, with the low score indicating a high preference and the high score indicating low preference.

Perceptions of enhanced supervisory feedback scores range from a low score of 1 to a high score of 5. (Appendix A, Section II, #25). Actual supervisory feedback scores (Appendix A, Section IV, #10-13) range from 1-4 for each question, with a total score of 4 representing no supervision, and a total score of 16 representing extensive supervision.

## **7) Reliability**

For each scale, the author has run split-half tests with scales that have been operationalized with a number of items. Chronbach's alphas are also utilized to see if the scales are reliable with the current sample.

## **8) Validity**

The validity that is being spoken of in technical adequacy is the degree to which one's operationalization of variables fits one's concepts. "Validity refers to the extent to which a measure measures what it is supposed to be measuring." (Epstein & Tripodi, 1977, p.33) Overall, the conceptual variables have been operationalized in a manner that appears to fit the corresponding concepts, which gives the instrument face validity. This has been discussed more extensively in the operationalization of concepts of this chapter.

The POS scale, an integral section of the proposed instrument, has established validity. (Abbott, 1999) Abbott asserts that factor loadings in the 32-item POS scale address the issue of construct validity. There is a relationship between each item on the scale to one of the four factors or value dimensions: respect for basic rights; support of self-determination; sense of social responsibility; and commitment to individual freedom. (Abbott, 2003) Abbott says, "CFA [confirmatory factor analysis] in and of itself is a test of construct validity. . . . The findings of CFA offer additional confirmation of the initial POS factors." (Abbott, 2003, p.655) Construct validity is demonstrated when the measuring instrument measures the theoretical construct it purports to measure. In the case of the POS scale, the four factors, as

mentioned directly above, are constructs that are demonstrated, via CFA, to have a relationship with individual items on the POS scale. Finally, the degree to which these scales are correlated with, or predict, behavior or beliefs, will test empirical validity or the degree to which they predict some external criteria.

## **Chapter 6 -- Data Analysis**

### **1) Probability Sampling**

The study was conducted as a mailed survey to a probability sample of five hundred (500) social workers throughout the United States, who are members of NASW. The sample was purchased from NASW and randomly drawn by NASW from their mailing list of 153,000 members. The randomized list of 3,000 names was also stratified, or selected for MSW's. (NASW Rental Order Form, 2002) The sample was intended to be representative of the population of social workers in the United States (Smith, 1990), with the understanding that although not all social workers join NASW, many do. Barring issues of non-response, the random sample of 500 social workers, systematically selected from the NASW list of 3,000, represents the entire population of MSW social workers in the United States who are members of NASW. (AboutNASW, <http://www.socialworkers.org/nasw/org/nasw/default.asp>., 2004; Ain, 2001)

One characteristic of NASW mailings lists is that, albeit randomized and stratified upon request, the list is organized by state. That is, the list may begin with a number of random names from Alaska and end with a proportionate number of randomly selected names from Maine. This study requires probability sampling because, if one were simply to select the first 500 names on the list, the results would be confined to certain states or areas, unless one were to decide to mail to the entire list of 3,000 names.

The probability technique of systematic selection was used. (Smith, 1990) Every 6<sup>th</sup> name, out of the random sample of 3000, was used for the initial mailing to 500

potential subjects. Utilizing this method of selection, every state has a proportionate number of randomly selected potential subjects represented in the mailing.

NASW does not allow for the purchase of fewer than 3000 names, although it does allow for multiple mailings as long as no name is ever used more than once. NASW also requires that the researcher agree to do mailings on pre-arranged dates, so that the mailing will not conflict with any other mailing that might have been scheduled by NASW. Thus, as per agreement, the author mailed 500 questionnaires on the prearranged date of July 1, 2004.

Non-response to the mailed questionnaire would greatly affect the validity of the study, especially if the return rate were less than twenty percent. If the initial mailing to 500 potential subjects did not yield  $n=200$  responses, further sampling replacement mailings were to be initiated.

Two hundred and six (206) questionnaires were returned. This was a strong response rate of 41 percent. Therefore, a second or third mailing was not required. Such a response rate reduces sampling error. Sampling error is the degree to which the random sample might not reflect the population of NASW social workers. The sampling error for 200 responses from a total population of 153,000 members is + or - 7%. ([IntelliQuest.com](http://IntelliQuest.com)) Nevertheless, the error rate of + or - 7% may be affected by selective response if this group of 206 who returned questionnaires differed greatly from the 294 social workers who did not return the questionnaire.

## **2) Returns**

The meaning of this strong response rate is worthy of reflection. It may be interpreted as a strong response to a topic that greatly interests social workers. Recent

Code revisions (NASW Code of Ethics, 1999) and changes in licensing laws (Currents, 49(3)) may have contributed to this interest.

One trend of comments referred to lack of supervision and absence of emphasis upon ethical issues. A social worker in the prison system remarked on the difficulty of working in this system, particularly around issues of parole. This subject found the lack of supervision frustrating. Child welfare workers also commented on the margins about the lack of supervision. Another said that she had started a peer supervision group to address insufficient supervision and ethical dilemmas.

Some respondents wrote about the difficulty of serving the agency's needs and the needs of the individual client. A worker in private practice noted that agency work had created more ethical dilemmas for her than private practice. Another wrote the following comments on the body of the questionnaire: "Many of the questions I answered are based on my experiences working in an inpatient behavioral health unit of a community hospital and a public school setting. As a side note, the most difficult place to serve clients in an ethical way was (for me) in a public school. Schools seem to dictate what you can and cannot do – for example if you want to report abuse/neglect to DYFS, the principal must ok it. If not, I would have to call from home, anonymously."

Others wrote about the damage done, to themselves and to others, by indifference to the Code of Ethics and ethical issues. A woman from Kansas commented, "I've seen too much damage lately due to others not living by the Code of Ethics – it's not taken seriously enough in my opinion. It should be taught in school and modeled throughout school and agency practice. My agency requires a 3

hour ethics seminar each year for training requirements for all clinical workers. Good topic to do dissertation on – you’re a pioneer! Best wishes!”

As a poignant postscript, a woman from Texas, age 63, wrote that she had given up practice because of ethical dilemmas such as the difficulty of protecting patient privacy and the right to informed consent. She felt that her integrity had been compromised by practice realities. She added that, for years, she’d had “much valued supervision” in a psychiatric in-patient setting.

Respondents frequently made comments upon the instrument that were simply good wishes or exclamatory remarks. Among the several responses were written comments such as, “Good Luck;” “Good Luck, Nikki; “Are you crazy?!” (in response Section I, Question #3); “Please post the results;” “Thank you for including the information about the Code;” and “I hope you can use this data.” Mostly the respondents wrote on the body of the questionnaire itself. Some put their comments on post-its. One wrote “good luck” on the outside of the envelope.

A respondent volunteered, “I learned my ethics from my family [and] eight years of college plus work before I went to social work graduate school.” This remark was in the margin below the question, which asks about learning social work ethics from teachers who modeled social work ethics.

One respondent actually phoned and left a message inquiring whether it would be appropriate for an administrator to answer the questionnaire. (The consent form contains the phone numbers of the researcher and her advisor, in case of questions about the research.) This subject commented in her phone message, “I know this is important research so I want to respond if I can.” She was advised that it would be

appropriate to respond and was reminded to avoid putting any identifying information on the questionnaire and return envelope.

Sometimes respondents left questions blank; often they would provide an explanation as to why they were not answering, such as being uncertain about how to interpret the question. (An example of this is the first question on the instrument, which states that all benefits to welfare recipients should be in the form of cash. A few subjects were confused about whether ‘cash’ included checks or access to cash machines.)

Apart from the importance of the topic to social workers, it may be speculated that the timing of the questionnaire has been fortuitous. That is, the questionnaire was mailed on the eve of presidential conventions in an election that polarized the country. Sides were drawn with morality cited by each position. Poles indicated that ethical issues like “integrity” were considered paramount towards determining candidate credibility. (Caldwell, 2004) Thus, social worker interest in ethics may have reflected a national interest in ethics. Nevertheless, the presence or absence of good-timing cannot be measured in this study.

### **3) Demographics**

Questionnaires were returned from respondents in forty-one states and the District of Columbia. (Table 1) Alaska, Alabama, Arkansas, Montana, Nevada, North Dakota, Utah, West Virginia, and Wyoming are states from which there were no returns. New York, with thirty-four returns, had a frequency of seventeen percent.

Table 1— Returns by State

Valid	Frequency	Valid Percent
Blank	2	1.0
Arizona	2	1.0
California	20	9.7
Colorado	4	1.9
Connecticut	6	2.9
Delaware	1	.5
District of Columbia	3	1.5
Florida	5	2.4
Georgia	2	1.0
Hawaii	4	1.9
Idaho	2	1.0
Illinois	6	2.9
Indiana	8	3.9
Iowa	1	.5
Kansas	1	.5
Kentucky	2	1.0
Louisiana	3	1.5
Maine	2	1.0
Maryland	5	2.4
Massachusetts	2	1.0
Michigan	9	4.4
Minnesota	4	1.9
Mississippi	1	.5
Missouri	4	1.9
New Hampshire	2	1.0
New Jersey	12	5.8
New Mexico	3	1.5
New York	34	16.5
Nebraska	1	.5
North Carolina	6	2.9
Ohio	7	3.4
Oklahoma	1	.5
Oregon	3	1.5
Pennsylvania	7	3.4
Rhode Island	1	.5
South Carolina	2	1.0
South Dakota	2	1.0
Tennessee	4	1.9
Texas	8	3.9
Vermont	1	.5
Virginia	5	2.4
Washington	5	2.4
Wisconsin	3	1.5
Total	206	100.0%

Respondents were asked to characterize their work settings as rural, suburban or urban. Forty-eight percent of social workers came from urban settings; thirty-eight percent worked in suburban settings; and fourteen percent characterized their work settings as rural.

Table 2 – Rural, Suburban, Urban

		Frequency	Valid Percent
Valid	Rural	29	14.3
	Suburban	77	37.9
	Urban	97	47.8
	<b>Total</b>	<b>203</b>	<b>100.0</b>
Missing		3	
	<b>Total</b>	<b>206</b>	

Respondents had a wide range in ages, from twenty-eight years old to seventy-four years old. The mean age was 50.4 years and the median age was 52.0 years. Eighty-two percent of the responding sample was female and eighteen percent of the responding sample was male.

#### 4) Experience

Dates of graduation from the respondents' MSW programs ranged from 1965 to 2003. The mean date of graduation was 1986 and the median was 1987. The number of years of experience since graduation ranged from one year to thirty-eight years. Respondents had considerable experience in social work. The mean number of years of experience since graduation was 16.95 and the median number of years of experience since graduation was 16.0 years. The number of years experience was included, in addition to the graduation date, because some respondents might have spent time in other occupations. An example of this was the respondent who worked

for a few years and then took fifteen years off to raise a family, as she indicated in a note written on the margin of the questionnaire.

In order to understand such differences, a new variable needed to be computed that would yield the number of years since graduation. This variable was produced by taking the year of the study, 2004, and subtracting the date of graduation from the MSW program variable. Scores were generated for each respondent. In this manner, number of years since graduation could be compared with number of years of experience since graduation.

The mean for number of years since graduation was 17.63. The median was 17.0 and the range was 38 years. Since the number of years since graduation is similar to the overall number of years of experience (16.95 mean), it would indicate that social workers were continuing in their careers, since one would expect them to be congruent if that were the case.

### **5) Current Job**

Questions about the respondents' current jobs were included. Work setting, practice setting and job function comprise the current job variable.

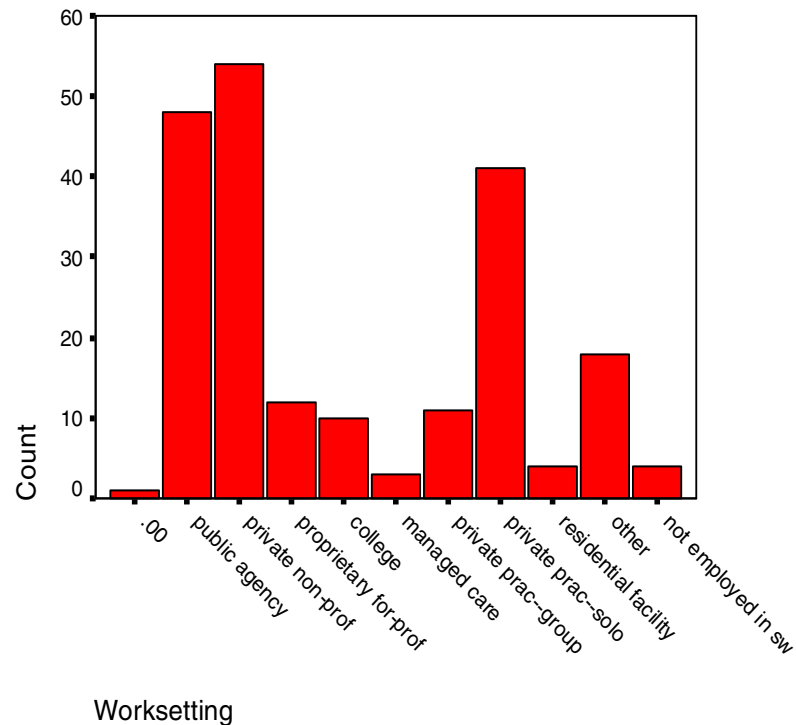
**Work Setting:** The work setting categories are shown in the bar graph below.

(Graph 1) The work setting categories that could be checked by respondents included:

1. Public Agency or Organization
2. Private Not-for-Profit Organization
3. Proprietary for-Profit Organization
4. College/University
5. Managed Care
6. Private Practice – Group
7. Private Practice – Solo
8. Residential Facility

## 9. Other

## 10. Not Employed in Social Work

**Graph 1**

The work settings ranged from 1.5% employed in managed care to 26% employed in private, not-for-profit agencies. (Table 3) Twenty-three percent (23.4%) stated they worked for public agencies. About twenty-five percent (25.4%) were in private practice, either group private practice or solo private practice. About nine percent (8.8%), checked the “other” category for work setting and described the setting by filling in the blank next to “other.” These settings are listed in Table 4.

Table 3 – Work Settings

		Frequency	Valid Percent
Valid	Public Agency	48	23.4
	Private-Not-for-Profit	54	26.3
	Proprietary for-Profit	12	5.9
	College	10	4.9
	Managed Care	3	1.5
	Private Practice -- Group	11	5.4
	Private Practice -- Solo	41	20.0
	Residential Facility	4	2.0
	Other	18	8.8
	Not Employed in Social Work	4	2.0
	<b>Total</b>	<b>205</b>	<b>100.0</b>
Missing		1	
	<b>Total</b>	<b>206</b>	

**Other Work Settings:** In the case of the “other” category of the work setting variable (Table 4), fifteen new categories were described by the respondents themselves when they filled in the blank space left for them to describe their “other.” The four respondents who said they were “not employed in social work” in the work setting variable also checked the “other” option and then described themselves as either “retired” (3 respondents) or “unemployed” (1 respondent).

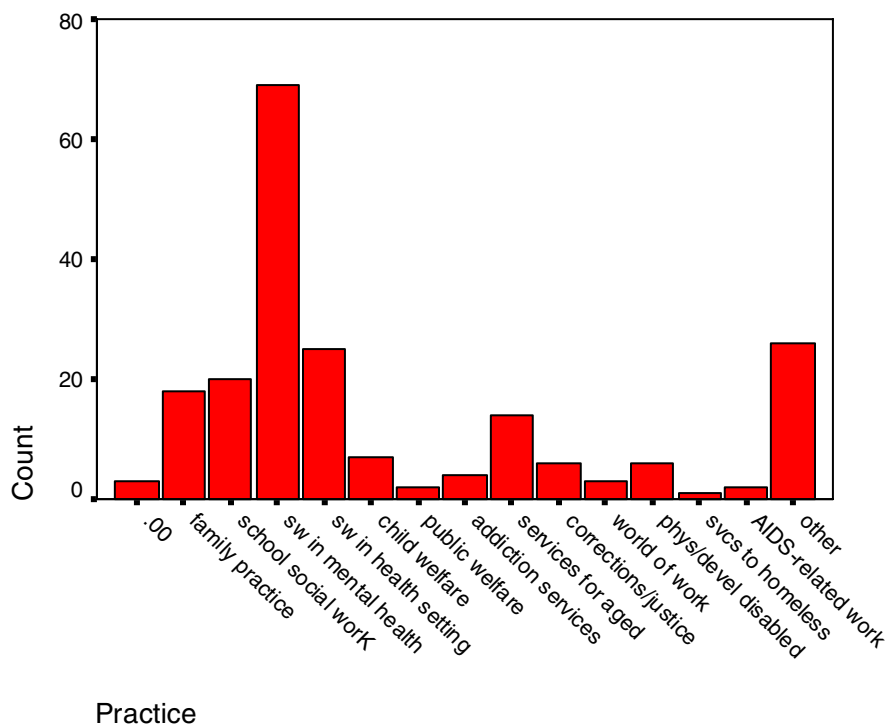
Table 4 – Other (new work setting categories, defined by respondents)

Military	1
Big Brothers	1
Civil Rights	1
Consulting	1
Private Contracts	1
Counseling	2
Crisis Intervention	1
Domestic Violence	1
Economic Development	1
Emergency Room	1
Federal Government	2
Human Services Database	1
Psychoanalysis	2
Retired	3
Unemployed	1
<b>Total</b>	<b>20</b>

**Practice Setting:** The two remaining variables that describe the respondents' current jobs are the practice variable and the function variable. The practice variable asks respondents to check one of the following:

1. Family Service
2. School Social Work – Preschool through 12<sup>th</sup> Grade
3. Social Work in Mental Health Setting
4. Social Work in Health Setting
5. Child Welfare
6. Public Welfare
7. Community Development
8. Addiction Services
9. Services for the Aged
10. Corrections/Justice
11. World of Work (Union, Employee Assistance Program)
12. Community Centers/Settlements
13. Physical or Developmental Disabilities
14. Services to the Homeless
15. AIDS-related work
16. Other

A wide variety of fields of practice were represented in the sample. The practice percentages ranged from .5% working in services to the homeless to 34% practicing in mental health settings. Twelve percent (12.3%) said they practiced social work in the health field and nine percent (8.9%) stated they were in family practice. Ten percent (9.9%) practiced in school settings, from preschool to twelfth grade. Seven percent (6.9%) practiced in settings that provided services to the aged. No respondents reported employment in community development or community centers/settlement houses. (Table 5)



**Graph 2**

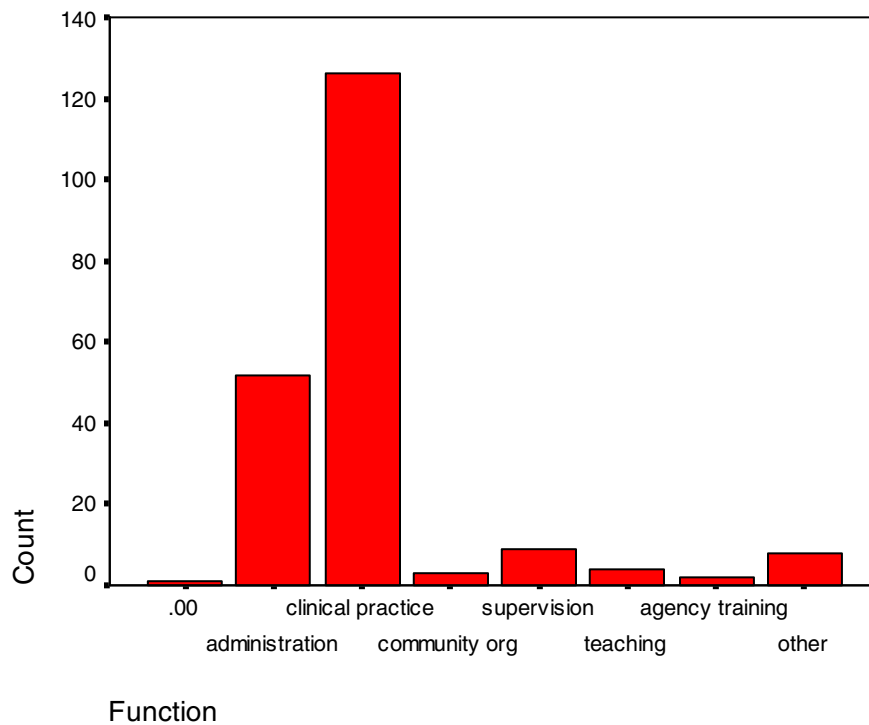
Table 5 – Field of Practice

		Frequency	Valid
Valid	Family Practice	18	8.9
	School Social Work – Preschool - 12	20	9.9
	Social Work in Mental Health Setting	69	34.0
	Social Work in Health Setting	25	12.3
	Child Welfare	7	3.4
	Public Welfare	2	1.0
	Addiction Services	4	2.0
	Services for the Aged	14	6.9
	Corrections/Justice	6	3.0
	World of Work (union, EAP, etc.)	3	1.5
	Physical or Developmental Disabilities	6	3.0
	Services to the Homeless	1	.5
	AIDS-related Work	2	1.0
	Other	26	12.8
	<b>Total</b>	<b>203</b>	<b>100.00</b>
Missing		3	
<b>Total</b>		<b>206</b>	

**Job Function:** The job function variable asks respondents to check one of the following:

1. Administration/Management
2. Clinical/Direct Practice
3. Community Organization
4. Group Work
5. Research
6. Policy Development
7. Supervision
8. Teaching
9. Agency-Based Training
10. Other

One hundred twenty-six individuals (61.8%) functioned as clinical/direct practitioners. Twenty-six percent (25.5%) were administrators. No respondents reported functioning as group workers, researchers, or policy developers. Other job functions that were reported at less than 5% included community organization, supervision, teaching and agency-based training. (Table 6)



**Graph 3**

Table 6 – Job Function

		Frequency	Valid Percent
Valid	Administration/Management	52	25.5
	Clinical/Direct Practice	126	61.8
	Community Organization	3	1.5
	Supervision	9	4.4
	Teaching	4	2.0
	Agency-based Training	2	1.0
	Other	8	3.9
	<b>Total</b>	<b>204</b>	<b>100.00</b>
Not Valid	Group Work	0	
	Research	0	
	Policy Development	0	
Missing		2	
<b>Total</b>		<b>206</b>	

### 6) Non-Host Settings versus Host Settings

Respondents were given numerous choices in terms of work setting, field of practice and job function. It was presumed that such an array of choices would allow the non-host setting respondents to be easily distinguished from the host-setting respondents.

Host setting refers to work settings where the social worker is functioning within a non-social work setting. Other workers function in a social work (non-host) setting. This data is important to hypothesis #2 which predicts that there will be a correlation between higher levels of experienced disjuncture and employment in host (non-social work) settings.

The following categories were concluded to be host or non-social work settings:

1. Managed Care
2. Military Social Work
3. Big Brothers Program
4. Economic Development
5. Federal Government
6. College/University
7. School Social Work – (Preschool through 12<sup>th</sup> Grade)
8. Social Work in Hospital Setting
9. Addiction Services
10. Corrections/Justice
11. Union/EAP
12. Developmental Disabilities
13. AIDS-related Services
14. Services to the Aged

The following categories were concluded to be non-host or social work settings:

1. Private Practice
2. Family Services
3. Group Work
4. Public Welfare
5. Community Development/Organization
6. Settlements
7. Services to the Homeless

Some of the categories in Section IV of the instrument are not clearly ‘host’ or ‘non-host.’ An example of this is the category in field of practice entitled “Social Work in Mental Health Setting.” This might be a social work agency or it might be an in-patient psychiatric unit. Therefore, this category could not be counted as either host or non-host. Categories such as teaching, research and agency-based training may be oriented towards social work, but they clearly can occur in host settings, as well as non-host settings. Likewise, residential services lacked clarity. For example, a corrections halfway-house

would be a host setting, but a community residence for the mentally ill might be a non-host setting. Unless a category was clearly host or non-host, it was tabulated as not valid in Table 7.

A further complication with categorizing as host/non-host was that social workers felt compelled to indicate all their responsibilities, rather than check off their major responsibility, as requested. This meant that there were sometimes competing host/non-host categories, such as employment in a hospital setting in addition to private practice.

Ninety-eight respondents, or forty-eight percent (47.6%) were employed in host settings. Sixty-nine respondents, or thirty-four percent (33.5 %) were employed in non-host settings. Thirty-nine respondents, or nineteen percent (18.9%) could not be categorized as either host or non-host. These thirty-nine respondents primarily indicated that they practiced in mental health settings, but gave no indication as to whether this was a hospital mental health setting (host) or a community mental health setting (non-host). Therefore a number of probable non-host respondents were excluded from the study, which weakens conclusions about host/non-host setting.

In retrospect, the instrument would have been improved by an additional question such as: “Do you practice social work in a social work setting or a non-social work setting?” The categories were defined by the NASW mailing list which categorizes by work setting, field of practice and job function. (NASW Rental Order Form, 2002)

Table 7 – Host and Non-Host Settings

		Frequency
<b>Host Setting</b>	Managed Care	3
	Military Social Work	1
	Big Brothers Program	1
	Economic Development	1
	Federal Government	2
	College/University	10
	School SW (Preschool -12 <sup>th</sup> )	20
	Social Work in Hospital Setting	25
	Addiction Services	4
	Corrections/Justice	6
	Union/EAP	3
	Developmental Disabilities	6
	AIDS-related Services	2
	Services for the Aged	14
	<b>Total (Host)</b>	<b>98</b>
<b>Non-Host Setting</b>		
	Private Practice	45
	Family Services	11
	Group Work	0
	Public Welfare	9
	Community	3
	Settlements	0
	Services to the Homeless	1
<b>Total (Non-Host)</b>		<b>69</b>
<b>Total</b>		<b>167</b>
Not Valid	Mental Health and Residential	39
<b>Total</b>		<b>206</b>

### 7) Supervisory Feedback

The amount of supervision experienced by respondents is represented by five questions on the instrument. Supervision is important because it relates to the hypothesis that respondents with high belief scores, high behavior scores, and high

disjuncture scores will have experienced lower amounts of supervisory feedback.

The following questions dealt with supervisory feedback:

- When I receive supervisory feedback, I value the quality of my work more.
- How often do you have supervisory feedback in your current job?
- How often do you have clinical supervision or feedback in your current job?
- How often, in the past, have you had supervisory feedback in your job?
- How often in the past, have you had clinical supervisory feedback in your job?

Table 8 – I Value My Work When I Get Feedback

		Frequency	Valid Percent
Valid	Strongly Disagree (1)	2	1.0
	Disagree (2)	12	6.0
	Neutral (3)	34	17.0
	Agree (4)	94	47.0
	Strongly Agree (5)	58	29.0
	<b>Total</b>	<b>200</b>	<b>100.0</b>
Missing		6	
<b>Total</b>		<b>206</b>	

The mean is 3.9 and the median is 4.0, indicating that most respondents agree that feedback helps them value their work. The modal category was 47% (94) who agreed that they valued work when they received feedback on a scale where 5 was “strongly agree” and 1 was “strongly disagree.” Twenty-nine percent (58) also “strongly agree” that feedback gives work value.

Having established how important supervisory feedback was to the value of their work, it was disheartening to learn that only fourteen percent (28) received supervisory feedback “very often” (once a week or more) and only twenty-two percent (45) had supervisory feedback “often.” Forty-nine percent (100) only received feedback “sometimes” and fifteen percent (30) never received it. (Table 9)

Table 9 – Frequency of Supervisory Feedback in Current Job

		Frequency	Valid Percent
Valid	Never (1)	30	14.8
	Sometimes (2)	100	49.3
	Often (3)	45	22.2
	Very Often (1x/wk or more)	28	13.8
<b>Total</b>		<b>203</b>	<b>100.0</b>
Missing		3	
<b>Total</b>		<b>206</b>	

Clinical feedback is given less frequently than current job feedback.

Table 10 – Frequency of Clinical Supervisory Feedback in Current Job

		Frequency	Valid Percent
Valid	Never (1)	38	20.6
	Sometimes (2)	92	50.0
	Often (3)	33	17.9
	Very Often (1x/wk or more)	21	11.4
<b>Total</b>		<b>184</b>	<b>100.0</b>
Missing		22	
<b>Total</b>		<b>206</b>	

Slightly more social workers were given supervision in their past jobs, indicating the possibility that supervision is provided less over time or that workers may have been promoted to positions where there was no supervision. Twenty-seven percent (54) received feedback “very often” (once a week or more) and twenty-six percent (53) received supervision “often” in their past jobs. Forty-two percent (86) received supervision “sometimes” and five percent (10) never received supervisory feedback in their past jobs. (Table 11)

Table 11 – Frequency of Supervisory Feedback in Past Job

	Frequency	Valid Percent
Valid		
Never (1)	10	4.9
Sometimes (2)	86	42.4
Often (3)	53	26.1
Very Often (>1x/wk) (4)	54	26.6
<b>Total</b>	<b>203</b>	<b>100.0</b>
Missing	6	
<b>Total</b>	<b>206</b>	

Table 12 – Frequency of Clinical Supervisory Feedback in Past Job

	Frequency	Valid Percent
Valid		
Never (1)	12	6.3
Sometimes (2)	80	42.1
Often (3)	43	22.6
Very Often (>1x/wk) (4)	55	28.9
<b>Total</b>	<b>190</b>	<b>100.0</b>
Missing	16	
<b>Total</b>	<b>206</b>	

“Sometimes” is the median and mode for the above question. The mean, at 2.57 is closer to “often” than “sometimes,” but the modal category best reflects the central tendency of this question, where 42% receive clinical supervision “sometimes.” Past jobs did give more clinical supervision “very often” (28.9%) than past jobs gave “very often” general supervision (26.6%) but the difference is incidental. Overall, as in their present jobs, social workers received less clinical supervision than general supervision in past jobs.

Whether looking at feedback from past versus current jobs, or looking at clinical feedback versus general supervisory feedback, “sometimes” is the central tendency response.

On a scale where 4=very often; 3=often; 2=sometimes; and 1=never, the means indicated that past general supervision occurred more frequently than current supervision.

Table 13 – Paired Samples t-test – Current vs. Past Supervision

	Mean Level of Supervision	Std. Dev.	t	p
Past Supervision	2.74	.90	6.05	.000
Current Supervision	2.35	.89		

Table 14 – Paired Samples t-test – Current vs. Past Clinical Supervision

	Mean Level of Supervision	Std. Dev.	t	p
Past Clinical Supervision	2.53	1.17	7.14	.000
Current Clinical Supervision	1.97	1.09		

On a scale where 4=very often; 3=often; 2=sometimes; and 1=never, or no supervision, the means indicated that past clinical supervision occurred more frequently than current clinical supervision. There is a significant reduction in supervision from past to present jobs, and the reduction is even greater in clinical supervision, where the mean level of supervision fell from “often” to below “sometimes.”

## 8) Ethics Education

Questions on ethics education were:

- My ethics training at the MSW level was primarily accomplished by the integration of ethical issues into each course.
- In your MSW field work practicum and supervision, how often were ethical issues discussed?
- I feel that my MSW level education provided me with adequate ethical education.
- My ethics training at the MSW level included a separate course in ethics and social work.
- Was this separate course a required course?

- Did you read the NASW Code of Ethics during your MSW education?
- Have you ever read the NASW Code of Ethics?
- How familiar are you with the NASW Code of Ethics?

In response to whether or not the subject's ethics education was accomplished by integration of ethical issues into each course, the mean was actually closer to the "neutral" response, at 3.39, than to the "agree" response at 4.0. Forty-eight percent (47.6%) "agreed" that ethics was integrated into each course; eleven percent (10.7%) "strongly agreed"; twenty percent (19.9%) "disagreed"; five percent (4.9%) "strongly disagreed"; and seventeen percent were "neutral." Overall, twenty-five percent (24.8%) disagreed, fifty-eight percent (58.3%) agreed and seventeen percent (17.0%) were neutral about whether ethics was integrated into each course.

Table 15 – Ethics Was Integrated into Each Course

		Frequency	Valid Percent
Valid	Strongly Disagree	10	4.9
	Disagree (2)	41	19.9
	Neutral (3)	35	17.0
	Agree (4)	98	47.6
	Strongly Agree (5)	22	10.7
	<b>Total</b>	<b>206</b>	<b>100.0</b>

Respondents were asked how often ethics was discussed during their MSW education and the mean of 4.3 is closer to "sometimes" than "frequently." Twenty-eight percent (28.3%) said "sometimes" and twenty-nine percent (28.8%) said "frequently." Overall, the central tendency in responses was towards "sometimes." (Table 16)

Table 16 – How Often Ethics Discussed in MSW Education

		Frequency	Valid Percent
Valid	Never(1)	5	2.4
	Very Infrequently(2)	14	6.8
	Infrequently(3)	34	16.6
	Sometimes(4)	58	28.3
	Frequently(5)	59	28.8
	Very Frequently(6)	24	11.7
	Always(7)	11	5.4
	<b>Total</b>	<b>205</b>	<b>100.0</b>
Missing		1	
<b>Total</b>		<b>206</b>	

The respondents were asked if their MSW ethics education was adequate. The modal response was “agree,” as 50.5% (104) “agreed” and 10.2% (21) “strongly agreed.” The median was also “agree,” and the mean was 3.45, which is closer to “neutral” than “agree.” However, twenty-two percent (22.3%) “disagreed” that their ethics education was adequate. Of these, only 2.9% “strongly disagreed.”

Table 17 – MSW Provided Adequate Ethics Education

		Frequency	Valid Percent
Valid	Strongly	6	2.9
	Disagree (2)	40	19.4
	Neutral (3)	35	17.0
	Agree (4)	104	50.5
	Strongly Agree	21	10.2
	<b>Total</b>	<b>206</b>	<b>100.0</b>

Nearly sixty-four percent of respondents did not have a separate course in ethics during their MSW training and only 36.5% had a separate ethics course.

Table 18 – MSW Had Separate Course in Ethics

		Frequency	Valid Percent
Valid	Yes	73	36.5
	No	127	63.5
	<b>Total</b>	<b>200</b>	<b>100.0</b>
Missing		6	
<b>Total</b>		<b>206</b>	

Of those who had a separate course in ethics, when asked if the separate course had been a required course, eighty-four percent indicated their separate course was required.

Table 19 – Was Separate Course Required

		Frequency	Valid Percent
Yes		58	84.0
No		11	15.9
<b>Total</b>		<b>69</b>	<b>100.0</b>
Missing		8	
Not Applicable		129	
<b>Total</b>		<b>206</b>	

Respondents were asked if they read the Code of Ethics during their MSW education. Nearly ninety percent of respondents had read the Code during their MSW education. Reading the Code seems to be a pervasive trend in social work education. (Table 20)

Table 20 – Did You Read Code During MSW Education

		Frequency	Valid Percent
Valid	Yes	182	89.7
	No	21	10.3
<b>Total</b>		<b>203</b>	<b>100.0</b>
Missing		3	1.5
<b>Total</b>		<b>206</b>	

When asked if they had ever read the Code of Ethics, only 3% (6) of the respondents answered that they had never read the Code.

Table 21 – Have You Ever Read Code

		Frequency	Valid Percent
Valid	Yes	200	97.1
	No	6	2.9
<b>Total</b>		<b>206</b>	<b>100.0</b>

Respondents were asked to rate their familiarity with the Code of Ethics. Nearly half the respondents agreed that they were “familiar” with the Code of Ethics. Over twenty-five percent answered that they are “very familiar” with the Code. Only twenty-one percent said they were “somewhat familiar” and only two percent (4) were “not familiar” with the Code.

Table 22 – Familiarity with Code

		Frequency	Valid Percent
Valid	Not Familiar	4	2.0
	Somewhat	43	21.0
	Familiar	101	49.3
	Very Familiar	57	27.8
<b>Total</b>		<b>205</b>	<b>100.0</b>
Missing		1	
<b>Total</b>		<b>206</b>	

### 9) Modeling Ethics

Two questions on the instrument operationalize modeling ethics. This relates to hypothesis #4, which states, “Social workers will perceive that they have learned social work ethics by having experienced ethical teaching.” One question asks respondents their degree of agreement with the following statements: “My social work teachers and field work supervisors modeled ethics by ethical teaching. They modeled social work ethics by having a primary responsibility to their students, by respecting colleagues, and by keeping their commitments to their educational institution.” This question specifies what Lewis meant by “ethical teaching.” (Lewis, 1987) It also specifies that field work supervisors and instructors are included as “teachers.” Altogether, over eighty percent of social workers either “agree” or “strongly agree” that their teachers and supervisors modeled ethical teaching. Only eleven percent of the social worker “disagree” (including “strongly disagree”) that their teachers modeled ethics by ethical teaching. Another eight per percent neither agree nor disagree on the matter. The mean, at 3.86, is the central tendency score closer to “agree” than to “neutral.”

Table 23 – My Teachers Modeled Ethics by Ethical Teaching

		Frequency	Valid Percent
Valid	Strongly Disagree (1)	4	2.0
	Disagree (2)	18	8.9
	Neutral (3)	17	8.4
	Agree (4)	128	63.1
	Strongly Agree (5)	36	17.7
	<b>Total</b>	<b>203</b>	<b>100.0</b>
Missing		3	
	<b>Total</b>	<b>206</b>	

Table 24 – Learned Social Work Ethics from Teachers Who Modeled Ethics

		Frequency	Valid Percent
Valid	Yes	132	64.1
	Maybe	44	21.4
	No	30	14.6
<b>Total</b>		<b>206</b>	<b>100.0</b>

Another question asks, “Do you think you learned social work ethics from teachers who modeled ethical social work behavior?” It is a shifted lens for the previous question. This question does not expand upon the Lewis interpretation of “ethical teaching,” as does the previous question. Also, unlike the former question, the latter does not merely ask if teachers modeled ethics by ethical teaching. Instead, respondents are asked if they **learned** through the modeling behavior of the teachers. One presumes that learning takes place in first question, but the second question specifically asks if the learning occurred.

The responses for the second question are somewhat different than the responses for the first. Thus, the questions were analyzed separately, rather than aggregately, as originally planned. Fifteen percent of the social workers say they did not learn social work ethics by teachers who modeled ethics. This is similar to the eleven percent who said they did not agree with the statement that their teachers modeled ethics by ethical teaching. However, only sixty-four percent said they learned from teachers who modeled ethics, whereas eighty-one percent of social workers agreed and strongly agreed that their teachers modeled ethics by their ethical behavior. This response may indicate that there is a difference between what students observe their teachers modeling and what they actually believe they learn from this modeling behavior. Also, only eight percent of respondents are neutral about whether

their teachers modeled ethical behavior, whereas twenty-one percent were neutral about whether they had learned ethics from the modeling behaviors of teachers, again indicating there is a difference between what is observed in teacher behavior and what is perceived to have been learned by students. More students are neutral about what they learned from the modeled behavior than are neutral about having observed the teachers modeling ethical behavior.

The correlation between the two questions, experiencing modeled ethics and learning ethics from teachers who modeled ethics, is .44, significant at the .01 level. Overall, it may be said that the hypothesis that social workers perceive that they have learned social work ethics by having experienced ethical teaching has been borne out by the data, although learning ethics by modeling occurred less than the observation of modeled ethics.

### **10) Preferences for Ethics Curriculum**

Four questions pertained to respondent preferences for ethics curriculum.<sup>20</sup> Respondents were asked to indicate preferences for the design of future curricula, based upon several choices. One question asks whether there should be a required ethics course.

Respondents feel that there should be a required ethics course. Seventy-nine percent of respondents believe there should be a required course. Only eighteen

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<sup>20</sup> CSWE indicates that ethics must be fully integrated into the curriculum. It does not specify a preference for infusion into each course, including fieldwork and supervision, or separate mandatory or elective courses. (Council on Social Work Education, 1992)

percent are neutral on the issue and only about three percent do not think there should be a required course.

Table 25 – Should There Be a Required Ethics Course

		Frequency	Valid Percent
Valid	Yes	163	79.1
	Maybe	37	18.0
	No	6	2.9
<b>Total</b>		<b>206</b>	<b>100.0</b>

Another question asks whether there should be an elective course. Ninety-six respondents, almost half or forty-nine percent, answered in favor of having an elective course. The neutral response had the lowest frequency at forty-two respondents (21.5%) favoring the neutral position. The lower percentage in favor of the elective course, as opposed to the required course, may be because respondents felt that a required course obviates the need for an elective course. This may also explain the unusual amount of missing responses: people who were in favor of the required course assumed there was no need for an elective ethics course and left the answer blank.

Table 26 – Should There Be an Elective Ethics Course

		Frequency	Valid Percent
Valid	Yes	96	49.2
	Maybe	42	21.5
	No	57	29.2
<b>Total</b>		<b>195</b>	<b>100.0</b>
Missing		11	
<b>Total</b>		<b>206</b>	

Respondents were also asked whether ethics should be integrated into all coursework. In fact, ninety-five percent (94.7%) were in favor of ethics being integrated into coursework. One hundred and ninety-five respondents answered that they favored the integration of ethics into all their courses.

Table 27 – Should Ethics Be Integrated into all Coursework

		Frequency	Valid Percent
Valid	Yes	195	94.7
	Maybe	8	3.9
	No	3	1.5
<b>Total</b>		<b>206</b>	<b>100.0</b>

Finally, respondents were asked whether ethics should be integrated into fieldwork and supervision. Ninety-nine percent, all but two of the 206 respondents, thought that ethics should be integrated into fieldwork and supervision. No one thought that ethics should not be integrated into fieldwork and supervision.

Table 28 –Should Ethics Be Integrated into Fieldwork and Supervision

		Frequency	Valid Percent
Valid	Yes	204	99.0
	Maybe	2	1.0
	<b>Total</b>	<b>206</b>	<b>100.0</b>

## 11) Scores

The scales of the instrument include the belief scale (POS), which measures beliefs that are congruent with the Code; the behavior scale, which measures behaviors that are congruent with the Code; and the disjuncture scale, which measures disjunctive distress.

In computing the above three scales, subjects who did not respond to one or more of the items of any scale, were assigned the mean response of the scores that were computed.

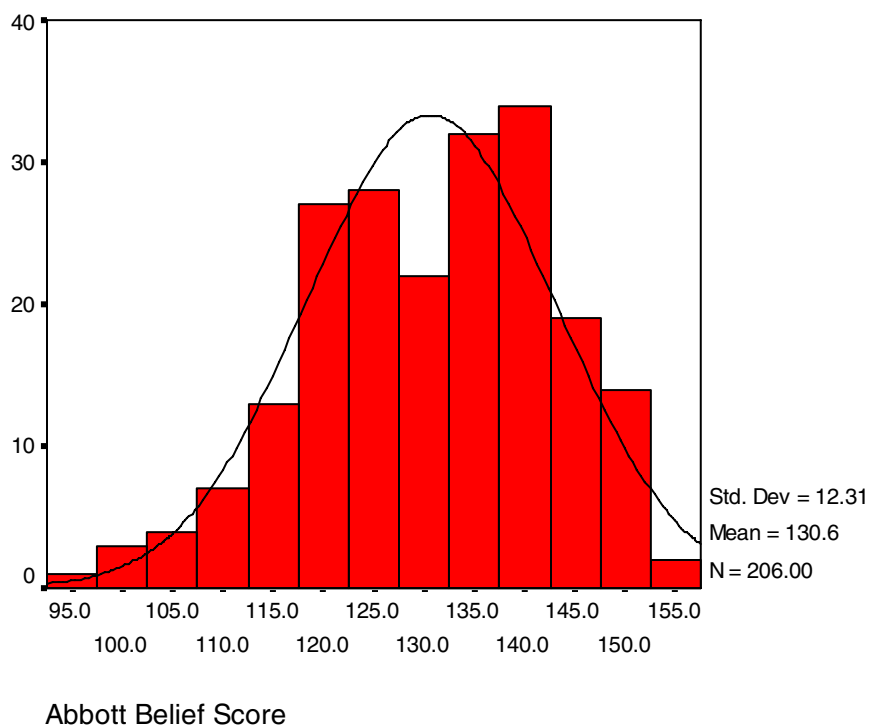
### **Belief Scores (POS)**

Belief scores are the individual scores on the Ann Abbott Personal Opinion Scale. (Abbott, 1988, 1999 & 2003) Belief in the tenets of the Code is defined as self-reported belief or agreement with the standards, principles and stated values set forth in the NASW Code of Ethics. In this study professional opinions are viewed as being synonymous with beliefs.

Examples of items include the Likert scale item “All direct-income benefits to welfare recipients should be in the form of cash” and “The federal government has invested too much money on the poor.”

There are 32 items on the belief scale, where scores may range from a low score of 32 to the highest possible score of 160. The lowest actual score for the belief variable was 93 and the highest actual belief score was 153. Dividing the possible range into thirds, scores between 32 and 74 indicate low belief. Scores between 75 and 117 indicate moderate belief and scores between 118 and 160 indicate high belief in the tenets of the Code.

Graph 4 – Belief Score Histogram



The mean for the belief scores was 131 and the median was 132, indicating high belief in the basic tenets of the Code. The standard deviation was 12.31. In terms of reliability, the Chronbach Alpha for the POS was .85 and the split-half reliability coefficient was .88.

### **Behavior Scores**

Behavior scores are the individual scores on the scale that measures the self-reported behaviors consistent with principles set forth in the NASW Code of Ethics. Items on the behavior scale include Likert scale questions such as “I am able to

facilitate change in the lives of my clients” and “At work, I treat people with care and respect and I am mindful of differences and diversity.”

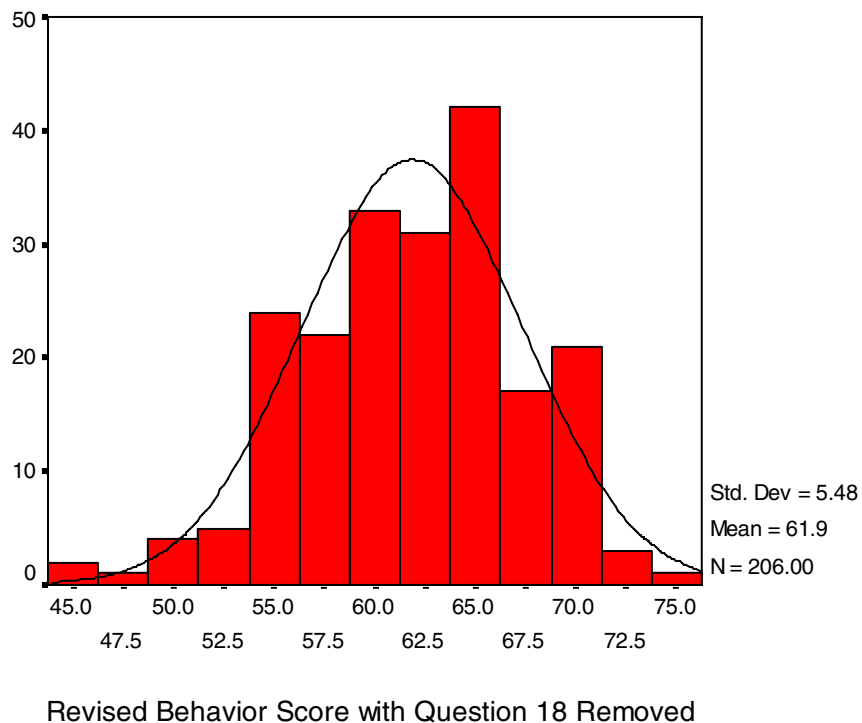
As results were entered into the SPSS data analysis program, it became evident that there was a problem with Question #18, Section II of the questionnaire. People seemed to be interpreting the question in entirely different ways. They would make comments in the margins, such as, “I am paid for all my services,” or “I would never accept payment of any kind for a referral.”

Question # 18, Section II reads: “I have accepted payment for referrals made to me.” The question should have been worded, “I have accepted payment for referrals I have made to others.” This question was therefore eliminated from the scoring of data. It was also eliminated in analyzing the reliability of the behavior scale.

With the removal of Question # 18, there are 11 items on the behavior scale, where scores may range from a low score of 11 to the highest possible score of 75. The lowest actual score for the behavior variable was 45 and the highest actual behavior score was 75. (Graph 5) Dividing the possible range of scores into thirds, scores between 11 and 32 indicate a low amount of behavior that is congruent with the Code. Scores between 33 and 53 indicate moderately congruent behavior with the Code and scores between 54 and 75 indicate behavior that is highly congruent with the Code.

The mean and median for behavior scores was 62. These scores indicate a central tendency that falls within the range of scores that indicate behavior that is highly congruent with the Code. The standard deviation was 5.48. In terms of the behavior scale reliability, the Chronbach Alpha is .75 and the split-half reliability coefficient is .75.

Graph 5 – Behavior Score Histogram



### Disjuncture Scores

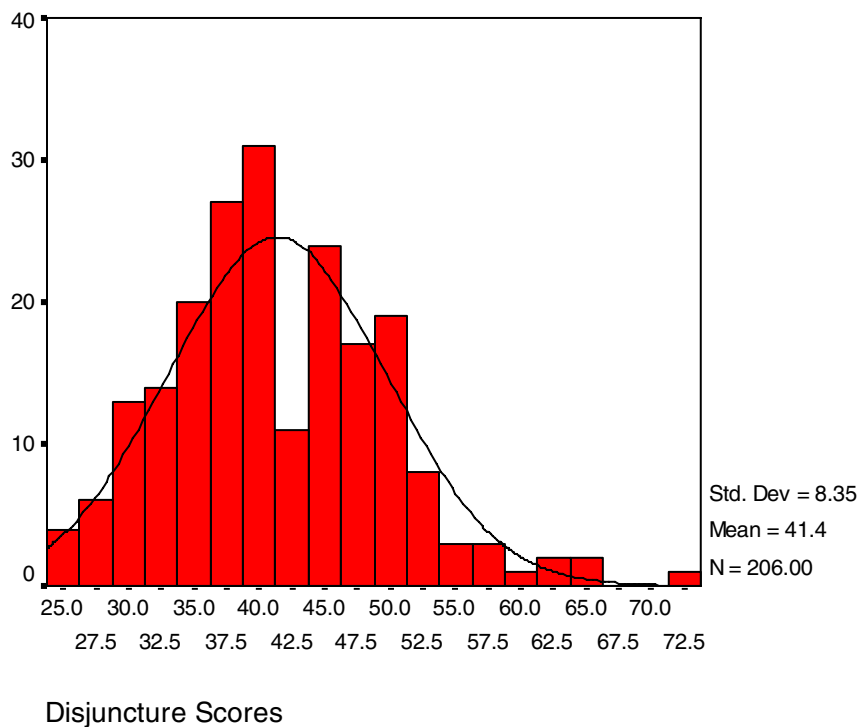
Disjuncture scores are the individual scores on the disjuncture scale. This

Likert scale measures self-reported distress that is dilemma-induced. It includes items such as “I experience stress because of the conflict between my individual clients’ interests and my agency’s interests, such as the need to meet the required number of service contacts per month” and “I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning or discharge planning.”

There are 12 items on the disjuncture scale, where scores may range from a low score of 12 to the highest possible score of 80. The lowest actual score for disjuncture was 25. The highest actual disjuncture score was 72. Dividing the possible range into thirds, scores between 12 and 34 indicate that disjuncture is low. Scores between 35 and 57 indicate that disjuncture is moderate and scores between 58 and 80 indicate disjuncture is high.

The mean for disjuncture scores is 41 and the median is 40, indicating that disjuncture scores reflect moderate disjuncture. The standard deviation is 8.35. In terms of disjuncture scale reliability, the Chronbach Alpha was .76 and the split-half reliability coefficient was .82. Reliability analysis indicated that removal of any one item would not have increased the Alpha beyond .80.

Graph 6 – Disjuncture Score Histogram



### **Discordant Belief/Behavior Scores**

In terms of discordant scores, it was predicted that discordant scores would be accompanied by high disjuncture scores. Discordant scores would be subjects who had high belief scores and low behavior scores or low belief scores and high behavior scores.

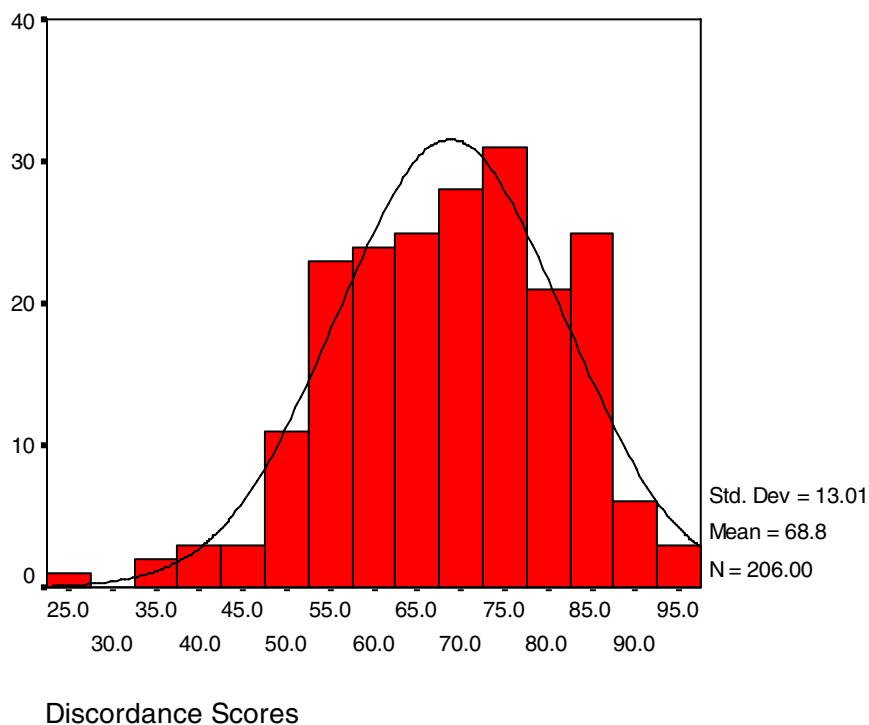
A measure for discordant scores was computed by finding the difference between belief scores and behavior scores. Since the lowest belief score was 93 and the highest behavior score was 75, behavior scores were subtracted from belief scores. Otherwise, the differences would all have been negative numbers.

The discordance score results ranged from 23 to 97. Potentially, the discordance might have ranged from 21-149. This range is from the lowest possible discordant score to the highest possible discordant score. It is the difference between the lowest possible belief score minus the lowest possible behavior score, ranging to the difference between the highest possible belief score minus the lowest possible behavior score. Possible behavior scores ranged from 11 to 75. Possible belief scores ranged from 32 to 160. Subtracting the lowest possible behavior score (11) from the lowest possible belief score (32), the difference is the lowest possible discordance score of 21. Subtracting the lowest possible behavior score (11) from the highest possible belief score (160), the difference is the highest possible discordance score of 149.

Dividing the possible range into thirds, the low possible discordance scores would range from 21 to 63, moderate possible discordance scores would range from 64 to 106, and the high possible discordance scores would range from 107 to 149. Since the actual discordance scores ranged from 23 to 97, social worker experienced low to moderate discordance. The average social worker experienced moderate discordance at a score of 69.

The mean discordance score was 68.8, the mode was 75, and the median was 70.3, indicating moderate discordance. The standard deviation was 13. (Graph 7)

Graph 7 – Discordance Score Histogram



### **Discordant Belief/Behavior Scores and Disjuncture**

The correlation between discordance and disjuncture was .17, suggesting that discordant scores correlated with disjuncture scores. This correlation was significant at the .05 level. Therefore, there was a moderate relationship between discordance and disjuncture, which bears out the hypothesis that higher disjuncture is accompanied higher discordance of belief and behavior.

### **Correlations: Belief, Behavior and Disjuncture**

There was a negative correlation between behavior congruent with the Code and disjuncture, indicating that high behavior and low disjuncture (or low behavior

and high disjuncture) are related to one another. Although this is not a stated hypothesis, one might expect behavior that is congruent with the Code to be accompanied by fewer feelings of disjuncture and vice versa. Behavior and disjuncture have a negative correlation of  $-.45$ , significant at the  $.01$  level.

Belief and behavior had a weak positive correlation of  $.09$ , which was not significant. The ideal outcome for social work would be a significant positive correlation between belief and behavior, for that would indicate that high belief scores are accompanied by high behavior scores, or a strong congruence between belief and behavior. This finding challenges the Abbott assumption that values determine behavior (Abbott, 1988), since a value is a kind of belief, and since the relationship between belief and behavior was non-significant. There was no correlation between belief and disjuncture, which is in contrast to the finding that there was a positive correlation between discordance and disjuncture.

### **High Belief/Behavior/Disjuncture Scores and Supervisory Feedback**

The pilot had indicated that high belief and high behavior scores were accompanied by high disjuncture scores. It had been expected, in the pilot, that high belief scores and high behavior scores would **not** be accompanied by high disjuncture scores. Social workers who believed in the Code and behaved according to the tenets of the Code had been expected to experience lower amounts of stress because they were not experiencing cognitive dissonance that resulted from discordant beliefs and behaviors. Therefore, this anomalous pilot finding had generated the hypothesis that high behavior, high belief and high disjuncture may be related to a lack of perceived adequate supervisory feedback.

The findings did not demonstrate that disjuncture positively correlated with belief or behavior. The relationships between disjuncture/belief and disjuncture/behavior were both negative. The disjuncture/behavior relationship was significant (-.45 at the .01 level) but the disjuncture/belief relationship was not significant (-.02 at the .81 level). The absence of significance indicates that there might be some subjects whose high beliefs were, nevertheless, accompanied by disjuncture. Conversely, there might be subjects whose lower beliefs were not accompanied by disjuncture. This left room for the hypothesis that disjuncture might yet have a relationship to lack of supervisory feedback.

Supervisory feedback scores were computed by creating a new variable that added the total scores of the five items which asked about respondents' supervision. There was a negative correlation of -.27 between supervisory feedback scores and disjuncture scores. This is a moderate, but statistically significant correlation at the .01 level, meaning that lower feedback is related to higher disjuncture.

The conditions of high belief and high behavior, which were found in the pilot, indicate lower discordance, or fewer discrepancies between belief and behavior. It was therefore decided to analyze the relationship between feedback and discordance scores. There was a non-significant negative relationship ( $r = -.12$ ,  $p = .08$ ) between feedback and discordance. This indicates that higher feedback was related to lower discordance of scores, as one would expect, but that the relationship was not statistically significant.

In summary, there was not a positive correlation between disjuncture and belief or behavior; there is a significant negative correlation between supervisory

feedback and disjuncture; and there is not a significant relationship between discordance scores and feedback. One can conclude that higher disjuncture scores do not relate higher belief or behavior scores; lower amounts of supervisory feedback relate to higher disjuncture; and higher amounts of supervisory feedback do not relate to lower discordance scores.

### **Host/Non-Host Settings**

#### **Host/Non-Host Settings and Disjuncture Scores**

One of the study's hypotheses states that there will be a significant correlation between higher levels of experienced disjuncture and host (non-social work) settings. Host setting/non-host setting scores were computed by assigning a 1 to host-settings and a 2 to non-host settings. There was no correlation between disjuncture and setting scores.

In an independent samples t-test, the mean scores did not differ significantly, showing there was no difference in disjuncture in a host versus a non-host setting ( $t=.66$ ,  $p=.51$ ).

Table 29 – Disjuncture by Host/Non-Host Setting

	Mean Disjuncture Score	Std. Dev.	t	p level
Host Setting(n=98)	41.46	7.83	.66	.51
Non-Host Setting (n=69)	40.61	8.11		

#### **Host/Non-Host Settings and Belief/Behavior/Discordance Scales**

The relationship between host/non-host setting and the belief, behavior, and discordance scales was also explored.

An independent samples t-test of the belief scale means and setting ( $t=1.58$  and the  $p$  level=.11), indicated that there is no significant difference in belief scores in a host setting and belief scores in a non-host setting.

Table 30 – Belief Scale and Host/Non-Host Setting

	Mean Belief Scores	Std. Dev.	t	p level
Host Setting(n=98)	128.99	12.86	1.58	.11
Non-Host Setting (n=69)	132.10	11.81		

In an independent samples t-test of the behavior scale means and setting, the mean scores were almost identical, indicating there is no difference between behavior scores in a host setting or non-host setting.

Table 31 – Behavior and Host/Non-Host Setting

	Mean Behavior Scores	Std. Dev.	t	p level
Host Setting(n=98)	61.84	4.90	.394	.69
Non-Host Setting (n=69)	62.17	5.90		

Finally, in an independent samples t-test of the discordance scale means and setting,  $t=-1.34$  and the  $p$  level=.180, indicating that there is no significant difference in behavior scores in a host setting and behavior scores in a non-host setting.

Table 32 – Discordance and Host/Non-Host Setting

	Mean Discordance Scores	Std. Dev.	t	p level
Host Setting(n=98)	67.15	13.32	1.34	.180
Non-Host Setting (n=69)	69.92	12.82		

In conclusion, host setting and non-host setting do not appear to relate to the belief, behavior, disjuncture and discordance scales. Social workers scores are not

affected by being in social work or non-social work settings on any of these dimensions.

### **Disjuncture and Work Setting**

Although host setting and non-host setting did not relate to disjuncture, it was decided to examine disjuncture and work setting. A one-way ANOVA was utilized to analyze this relationship. The F value was 2.06 and the p level was .03, indicating a significant difference in disjuncture scores among the respondents in different work settings. Managed care workers experience the highest disjuncture, with mean disjuncture scores of 47.49. Social workers with the lowest disjuncture scores were those in group private practices, where the mean disjuncture score was 38.62.

Table 33 – Disjuncture by Work Setting

Work Setting	Mean Disjuncture Score	Std. Dev.	F value	p level
Managed Care (n=3)	47.49	2.17	2.06	.03
Not Employed in SW(n=4)	46.58	8.74		
Public Agency (n=48)	44.78	7.81		
College (n=10)	41.98	6.61		
Other (n=18)	41.63	7.36		
Private Practice--Solo (n=41)	40.59	10.36		
Proprietary for-Profit (n=12)	40.37	8.14		
Residential Facility (n=4)	39.73	8.29		
Private Non-Profit (n=54)	38.70	7.32		
Private Practice--Group (n=11)	38.62	6.63		

Because several work settings had too small numbers in their categories, a second ANOVA was done which analyzed the disjuncture of work settings that had

larger numbers of respondents in their categories. These included social workers employed in public agencies, social workers in solo private practice, and social workers employed in private not-for-profit organizations. The F value was 6.78 and the p level was .002, indicating a significant difference in disjuncture scores among social workers in public agencies, solo private practice, and non-profit organizations. Social workers in private non-profit agencies had the lowest disjuncture scores, with a mean score of 38.70, while those employed in public agencies had the highest disjuncture scores, with a mean score of 44.78. Social workers in solo private practice had a mean score of 40.59.

Table 34 – Disjuncture by Public Agency, Private Practice Solo & Private Non-Profit

Work Setting	Mean Disjuncture	Std. Dev.	F value	p level
Public Agency (n=48)	44.78	7.81	6.78	.002
Private Practice Solo (n=41)	40.59	10.36		
Private Non-Profit (n=54)	38.70	7.32		

### **Disjuncture by Job Function, Field of Practice and Locale of Practice**

One-way ANOVAs were also utilized to analyze the relationship between disjuncture and job function, field of practice and location of practice. Job function was represented by categories such as administration, direct practice, research, supervision, policy development, and teaching. (Table 6) Practice setting was represented by categories such as school social work, social work in health setting, child welfare, corrections, settlements, union and employee assistance programs, and AIDS-related work. (Table 5) Location of practice referred to settings that

respondents characterized as rural, suburban, or urban. There was no significant difference in the mean scores for disjuncture in job function, practice setting or location of practice.

In the ANOVA for job function, it was clear that most of the respondents were either administrators or clinicians. All the other categories had too few numbers, such as community organization, which had three respondents and agency-based training, which had two respondents. The difference between the mean disjuncture scores of administrators and clinicians was insignificant. The F value for the job function ANOVA was 1.03 and the p level was .41.

Since the numbers in most categories of job function were too few, an independent samples t-test was run with the categories of clinical practice and administration. There is no significant difference in means for disjuncture between clinical or administrative job functions, although clinical practitioners do have more disjunctive distress than administrators. The clinical practice mean was 41.89 and the administrative mean for disjuncture was 40.26. The p level was .26.

Table 35 – Independent Samples t-test for Disjuncture by Job Function

Job Function	Mean Disjuncture	Std. Dev.	t	p level
Administration (n=52)	40.26	7.85	1.1	.26
Clinical Practice (n=126)	41.89	8.95		

In the ANOVA for Field of Practice (Table 36), the F value was .42 and the p level was .97, indicating no significant difference among disjuncture scores. There were sixty-nine respondents in mental health and twenty-five respondents working in

the health area. There were twenty school social workers and twenty-six workers who placed themselves in “other” areas of practice. Services to the homeless (n=1) and public welfare (n=2) had the highest means at 46.00. Social workers practicing in the areas of physical and developmental disabilities (n=6) had the next highest disjuncture means at 43.65. The lowest mean disjuncture score, at 36.50, was for respondents employed in addiction services (n=4). Mental health and health services’ disjuncture scores were almost the same, with mental health workers at a mean score of 41.98 and health care workers at a mean score of 41.77. School and family practice workers were a bit lower, with school social workers at a mean score of 40.68 and family practice workers at a mean score of 40.44.

Table 36 – Disjuncture by Field of Practice ANOVA

Field of Practice	Mean Disjuncture	Std. Dev.	F value	p level
Services to the Homeless (n=1)	46.00	0.00	.42	.97
Public Welfare (n=2)	45.50	2.12		
Phys./Devel. Disabilities (n=6)	43.65	7.27		
Services for the Aged (n=14)	42.73	9.73		
Mental Health Services (n=69)	41.98	9.18		
SW in Health Services (n=25)	41.77	7.99		
Child Welfare (n=7)	41.71	6.46		
School SW – K-12 (n=20)	40.68	7.38		
Family Practice (n=18)	40.44	7.37		
Other (n=26)	40.40	9.08		
Corrections/Justice (n=6)	38.33	4.13		
Union/EAP (n=3)	38.33	13.05		
AIDS-Related Work (n=2)	37.02	2.85		
Addiction Services (n=4)	36.50	8.81		

In the ANOVA for Locale of Practice (urban, suburban, rural), the F value was .70 and the p level was .56. Urban areas had the greatest number of respondents, ninety-seven, followed by seventy-seven in urban areas, and twenty-nine social workers practicing in rural areas. There was no significant difference in mean scores for disjuncture in any location of practice..

Table 37 – Disjuncture by Locale of Practice: Urban, Suburban, Rural ANOVA

Locale	Mean Disjuncture	Std. Dev.	F value	p level
Suburban (n=77)	41.88	8.17	.70	.56
Urban (n=97)	41.30	8.95		
Rural (n=29)	39.92	6.79		

## **Ethics Education**

### **Disjuncture Scores and Ethics Education**

Another hypothesis regards the relationship between ethics education and disjuncture. The hypothesis stated that there would be a positive correlation between higher levels of experienced disjuncture and social work education that did not require a course in social work ethics.

The correlation of .09 between all disjuncture scores and a separate course in ethics is not significant. It was expected that having no separate course in ethics would relate to higher disjuncture. This would have meant a negative correlation between having a separate course in ethics (where the lower score indicated the separate course) and higher disjuncture scores. Instead, there was a weak positive relationship between higher disjuncture and the absence of the course. This lack of

correlation can be explained by the fact that many people who did **not** have higher disjuncture scores **also** had no separate course in ethics. Lacking a separate course in ethics is not a rare social work education event, so whether disjuncture scores are high or low, the subject has a sixty-four percent chance of not having had a separate course. (Table 18 & Table 19)

In an independent samples t-test, the mean disjuncture scores were almost identical, showing there was no difference in disjuncture where there has been a separate ethics course and where there has not been a separate course ( $t=.70$ ,  $p=.48$ )

Table 38 – Independent Samples t-test for Disjuncture by Separate Ethics Course

	Mean Disjuncture Score	Std. Dev.	t-test	p level
Separate Ethics Course (n=73)	40.90	8.43	.70	.48
No Separate Course (n=127)	41.80	8.41		

There appears to be no relationship between higher disjuncture and the absence of a separate course in ethics.

### **Belief/Behavior/Discordance Scores and Ethics Education**

The relationship between the belief, behavior, and discordance scales was also explored in relation to whether or not subjects had taken a separate ethics course.

In an independent samples t-test, the mean belief scores differed in significant and unexpected ways. (Table 39) The mean of respondents who had taken the separate ethics course was lower than the mean of those who had not taken a separate ethics course. Moreover, the difference was significant at the .007 level. This indicates that the separate ethics courses did not increase belief in the tenets of the Code for those who had a separate ethics course. The mean belief scale score was

127.65 for those who had taken a separate ethics course. The mean belief scale score was 132.47 for those who had not taken a separate course. A separate ethics course appears to be associated with reduced beliefs, perhaps by raising many questions.

Table 39 – Independent Samples t-test for Belief and Separate Ethics Course

	Belief Scale Score	Std. Dev.	t-test	p level
Separate Ethics Course (n=73)	127.65	12.61	2.72	.007
No Separate Course (n=127)	132.47	11.72		

In an independent samples t-test, mean behavior scores of those who had taken a separate ethics course were almost identical to those who had not taken a separate ethics course, indicating that there is no relationship between behavior and whether one has had a separate ethics course.

Table 40 – Independent Samples t-test for Behavior and Separate Ethics Course

	Mean Behavior Score	Std. Dev.	t-test	p level
Separate Ethics Course	61.91	5.32	.124	.90
No Separate Course (n=127)	61.81	5.68		

However, an independent samples t-test also demonstrated that the absence of a separate ethics course related to discordance scores. (Table 41) Higher discordance scores were found among those who had not taken a separate ethics course. The difference was significant at the .009 level. The mean discordance score for those who had a separate ethics course was 65.74. The mean discordance score for those who had not taken a separate ethics course was 70.66. The presence of a separate ethics course reduces belief and the absence of that course increases discordance.

Table 41 – Independent Sample t-test for Discordance and Separate Ethics Course

	Mean Discordance Score	Std. Dev.	t-test	p level
Separate Ethics Course	65.74	13.73	2.63	.009
No Separate Course (n=127)	70.66	12.15		

In summary, the separate ethics course appears with reduced beliefs, does not significantly relate to behavior or disjuncture, and is found in association with reduced discordance.

This array of findings may be Leon Festinger's first pattern of behavior in the cognitive dissonance theory: the presence of inconsistency that is psychologically uncomfortable motivates a change in belief, attitude or behavior to accommodate the inconsistency. (Garfield & Bergin, 1979; March, 1997; Crabtree, 2001) Perhaps the separate course leads to the questioning of beliefs and a heightened awareness of discrepant beliefs and behaviors. In fact, there is higher discordance in subjects who have not taken a separate ethics course. Thus, if this is the Festinger pattern, the social worker, uncomfortable about the inconsistency (discordance), is motivated to change (lessen) belief in the Code, which then accommodates the inconsistency.

### **Modeled Ethics and Disjuncture Scores**

The hypothesis that social workers perceive that they have learned social work ethics by having experienced ethical teaching was borne out by the data. (Tables 23 & 24) Although it was not one of the study's stated hypotheses, it seemed worthwhile to look at the relationship between disjuncture and subjects who did not experience ethics modeled by professors during their education. In addition, the relationship

between high disjuncture and an absence of ethics learned by ethical teaching could also be examined.

### **Experience of Modeled Ethics**

A negative correlation between disjuncture and the degree to which subjects experienced modeled ethics was expected. This was expected because the experience of modeling should be accompanied by lower disjuncture scores. The relationship of  $-.11$  was a negative correlation, but it was not significant.

In a one-way ANOVA, the F value was 1.68 and the p level was .140, indicating that the means of those who agreed they had experienced the modeling of ethics did not differ significantly from the means of those who had not.

Table 42 – Disjuncture by Experience of Modeled Ethics ANOVA

Teachers Modeled Ethics	Mean Disjuncture Score	Std. Dev.	F value	p level
Strongly Disagree(1) (n=4)	41.50	8.54	1.68	.14
Disagree(2) (n=18)	45.19	11.59		
Neutral(3) (n=17)	42.32	8.30		
Agree(4) (n=128)	41.49	7.74		
Strongly Agree(5) (n=36)	38.84	8.42		

### **Learning from Teachers Who Modeled Ethics**

A one-way ANOVA was done in order to analyze the relationship between disjuncture and the learning of ethics from teachers who modeled ethics. (Table 43) The differences among the means was significant, with an F value of 3.19 at the .04 level, indicating that respondents who did not learn from teachers who modeled ethics experienced higher disjuncture. The mean disjuncture score for those who did not

learn from modeling 44.75, while for those who said they learned from modeling, the mean disjuncture score was only 40.54.

Table 43 – Disjuncture by Learning from Teachers Who Modeled ANOVA

Learned from Modeling	Mean Disjuncture Score	Std. Dev.	F value	p level
Yes(1) (n=132)	40.54	7.88	3.19	.04
Maybe(2) (n=44)	41.48	8.21		
No(3) (n=30)	44.75	9.86		

### Individual Behavior and Disjuncture Items

Examining individual items of this national survey allows us to observe discrete behaviors of social workers and the stress that accompanies these behaviors. Individual items on the behavior scale reflect behaviors that either implement the Code or do not promote Code values. Individual items on the disjuncture scale reflect stress that accompanies these behaviors. The salience of particular items for respondents can be observed in the order of mean scores. We can make note of what behaviors are being implemented vis-à-vis the Code and we can note which behaviors cause greater distress.<sup>21</sup>

### Individual Behavior Items

Among positively worded behavior items, the means ranged from the highest mean of 6.49 (very frequently) for treating people with care and awareness of difference and diversity to the lowest mean of 4.69 (frequently) for helping people in need and addressing social problems. (Table 44) All the positively worded behavior

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<sup>21</sup> Strongly agree – strongly disagree items were excluded because they were 1 – 5 Likert scales instead of 1 – 7 scales.

means were in the frequent or very frequent categories. The items at the highest mean levels ranged from 6.49 to 5.60 and included the following items:

- “At work, I treat people with care and respect and am mindful of differences and diversity.” (Mean Score of 6.49 = Very Frequently)
- “I advocate for my clients in my job setting.” (Mean Score of 5.99 = Very Frequently)
- “At my job, I am able to protect my clients’ rights to privacy and informed consent.” (Mean Score of 5.94 = Very Frequently)
- “When I observe conflict between my clients’ interests and my agency’s interests, I try to resolve this dilemma.” (Mean Score of 5.60 = Very Frequently)

The items at the middle level of mean score ranged from 5.36 to 4.69 and included the following items:

- “As a social worker, I promote client self-determination in such areas as program admissions, service planning, or discharge planning” (Mean Score of 5.36 = Frequently)
- “I am able to facilitate change in the lives of my clients.” (Mean Score of 5.15 = Frequently)
- “At your job, how often do you help people in need *and* address social problems?” (Mean Score of 4.69 = Frequently)

The negatively worded items were at the lowest mean score levels, ranging from 2.12 to 1.31 and included the following items:

- “Despite all intentions to do otherwise, there have been times when I have had to compromise my professional integrity in my job setting.” (Mean Score of 2.12 = Very Infrequently) (equivalent of a 5.9)
- “I have had physical contact with clients when I could not be certain there would be no harm done.” (Mean Score of 1.56 = Very Infrequently) (equivalent of a 6.5)
- “In my job I have accepted praise that belonged to someone else.” (Mean Score of 1.31 = Never) (equivalent of a 6.7)

However, when looked at as positive statements, the equivalent scores put the above items in the highest group, ranging from 6.7 to 5.9. In reality, social workers feel very confident about these behaviors vis-à-vis the Code. Social workers rarely compromise their integrity, do not have potentially harmful contact with clients, and never accept praise that belongs to another.<sup>22</sup>

The item with the virtual lowest mean, “At your job, how often do you help people in need *and* address social problems?” may reflect that social workers worry about whether or not they are doing enough to address social problems, or that they have difficulty integrating “helping people in need” and “addressing social problems.” The items about promoting client self-determination and facilitating change in the lives of clients also reflect that social workers are less confident about their behaviors in regard to these issues.

Nevertheless, in terms of treating people with care and respect, advocating for clients, protecting confidentiality, and resolving conflict between the agency’s interests and clients’ interests, social workers are confident that they are able to implement these behaviors.

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<sup>22</sup>In the actual total scoring of the behavior items, the negatively worded items were reversed, since, in those items, a higher score indicates a negative behavior in terms of social work values, whereas, in the positively worded items, the higher score reflects a positive behavior in terms of principles of the Code.

Table 44 – Individual Behavior Items and Means

<b>Behavior Items – Positively Worded</b>	<b>Mean</b>	<b>Std. Dev.</b>
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (Never=0%, Very Infrequently=0%, Infrequently=0%, Sometimes=0%, Frequently=6.3%, Very Frequently=38.4%, Always=55.3%) <b>“At work, I treat people with care and respect and am mindful of differences and diversity.”</b>	6.49	.61
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (1.5%=Never, .5%=Very Infrequently, 1%=Infrequently, 4.9%=Sometimes, 16.5%=Frequently, 38.3%=Very Frequently, 37.4%=Always) <b>“I advocate for my clients in my job setting.”</b>	5.99	1.13
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (0%=Never, .5%=Very Infrequently, 1%=Infrequently, 8.3%=Sometimes, 13.6%=Frequently, 47.5%=Very Frequently, 29.1%=Always) <b>“At my job, I am able to protect my clients’ rights to privacy and informed consent.”</b>	5.94	.96
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (1%=Never, .5%=Very Infrequently, 2.9%=Infrequently, 10.7%=Sometimes, 24.3%=Frequently, 36.4%=Very Frequently, 24.3%=Always) <b>“When I observe a conflict between my individual clients’ interests and my agency’s interests, I try to resolve this dilemma.”</b>	5.60	1.16
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (4.4%=Never, 1.9%=Very Infrequently, 4.4%=Infrequently, 6.8%=Sometimes, 31.5%=Frequently, 28.2%=Very Frequently, 22.8%=Always) <b>“As a social worker, I promote client self-determination in such areas as program admissions, service planning, or discharge planning.”</b>	5.36	1.48
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (0%=Never, .5%=Very Infrequently, 2.4%=Infrequently, 18.4%=Sometimes, 40.3%=Frequently, 37.4%=Very Frequently, 1%=Always) <b>“I am able to facilitate change in the lives of my clients.”</b>	5.15	.85
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (.5%=Never, 5.3%=Very Infrequently, 7.3%=Infrequently 30.1%=Sometimes, 30.1%=Frequently, 20.9%=Very Frequently, 5.8%=Always) <b>“At your job, how often do you help people in need and address social problems?”</b>	4.69	1.23
<b>Behavior Items – Negatively Worded</b>	<b>Mean</b>	<b>Std. Dev.</b>
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (32.8%=Never, 40.8%=Very Infrequently, 12.9%=Infrequently, 10%=Sometimes, 2%=Frequently, 1.5%=Very Frequently, 0%=Always) <b>“Despite all intentions to do otherwise, there have been times when I have had to compromise my professional integrity in my job setting.”</b>	2.12	1.13
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (70.9%=Never, 14.3%=Very Infrequently, 4.9%=Infrequently, 8.4%=Sometimes, .5%=Frequently, .5%=Very Frequently, .5%=Always) <b>“I have had physical contact with clients when I could not be certain there would be no harm.”</b>	1.56	1.07
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (74%=Never, 22.5%=Very Infrequently, 1.5%=Infrequently, 2%=Sometimes, 0%=Frequently, 0%=Very Infrequently, 0%=Always) <b>“In my job I have accepted praise that belonged to someone else.”</b>	1.31	.60

### Individual Disjuncture Items

The disjuncture scores have the same direction, wherein a low score on the item indicates little disjunctive distress and a high score indicates greater stress.

(Table 45) The means ranged from the highest mean of 6.67 (very frequently/always) for feeling discomfort at being credited for someone else’s work

to the lowest mean of 2.19 (very infrequently) for stress at being unable to advocate for clients. Thus, social workers feel the greatest disjuncture over taking credit for someone else's work and the least disjuncture being unable to advocate for clients. The items at the highest mean levels of disjuncture ranged from 6.67 to 4.45 and included the following items:

- “I would feel uncomfortable if I were credited for someone else's work.” (Mean Score of 6.67 = Always)
- “As a social worker, I have experienced frustration because managed care and bureaucratic constraints often require termination before the client has been able to change.” (Mean Score of 4.45 = Frequently)

The items at the middle level of mean score ranged from 3.79 to 2.71 and included the following items:

- “I feel stress at work because I am not always able to help people in need with their personal problems *and* help them improve larger social issues.” (Mean Score of 3.79 = Sometimes)
- “I feel uncomfortable when I have had physical contact with clients.” (Mean Score of 3.46 = Sometimes)
- “I experience stress because of the conflict between my individual clients' interests and my agency's interests, such as the need to meet the required number of service contracts per month.” (Mean Score of 3.14 = Infrequently)
- “I feel increased stress because, at times, my professional integrity has been compromised by practice realities.” (Mean Score of 3.03 = Infrequently)
- “I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning, or discharge planning.” (Mean Score of 2.93 = Infrequently)
- “I am frustrated at work by the absence of supervision and learning opportunities.” (Mean Score of 2.88 = Infrequently)

- “I experience stress because I am not always able to protect my clients’ rights to privacy and informed consent.” (Mean Score of 2.71 = Infrequently)

The lowest level of mean disjuncture, with a score of 2.19, was the following item:

- “I experience stress because I am unable to advocate for my clients in my job setting.” (Mean Score of 2.19 = Very Infrequently)

Table 45 – Individual Disjuncture Items and Means

Disjuncture Items	Mean	Std. Dev.
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (.5%=Never, 1.5%=Very Infrequently, .5%=Infrequently, 0%=Sometimes, 2.9%=Frequently, 14.6%=Very Frequently, 80.1%=Always) <b>“I would feel uncomfortable if I were credited for someone else’s work.”</b>	6.67	.88
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (3.9%=Never, 10.2%=Very Infrequently, 7.8%=Infrequently, 29.6%=Sometimes, 18.9%=Frequently, 24.3%=Very Frequently, 5.3%=Always ) <b>“As a social worker, I have experienced frustration because managed care and bureaucratic constraints often require termination before the client has been able to change.”</b>	4.45	1.51
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (3.9%=Never, 13.6%=Very Infrequently, 14.1%=Infrequently, 45.6%=Sometimes, 15.5%=Frequently, 5.3%=Very Frequently, 1.9%=Always) <b>“I feel stress at work because I am not always able to help people in need with their personal problems and help them improve larger social issues.”</b>	3.79	1.24
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (18.9%=Never, 21.8%=Very Infrequently, 6.8%=Infrequently, 28.1%=Sometimes, 2.9%=Frequently, 4.9%=Very Frequently, 16.5%=Always) <b>“I feel uncomfortable when I have had physical contact with clients.”</b>	3.46	2.03
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (22.8%=Never, 18.9%=Very Infrequently, 15.5%=Infrequently, 20.4%=Sometimes, 11.7%=Frequently, 8.3%=Very Frequently, 2.4%=Always) <b>“I experience stress because of the conflict between my individual clients’ interests and my agency’s interests, such as the need to meet the required number of service contacts per month.”</b>	3.14	1.70
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (11.2%=Never, 27.7%=Very Infrequently, 22.8%=Infrequently, 28.2%=Sometimes, 5.8%=Frequently, 3.9%=Very Frequently, .5%=Always) <b>“I feel increased stress because, at times, my professional integrity has been compromised by practice realities.”</b>	3.03	1.29
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (16.5%=Never, 28.6%=Very Infrequently, 20.4%=Infrequently, 19.9%=Sometimes, 10.2%=Frequently, 2.4%=Very Frequently, 1.9%=Always) <b>“I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning or discharge planning.”</b>	2.93	1.45
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (26.2%=Never, 23.3%=Very Infrequently, 15.5%=Infrequently, 18%=Sometimes, 7.8%=Frequently, 6.3%=Very Frequently, 2.9%=Always) <b>“I am frustrated at work by the absence of supervision and learning opportunities.”</b>	2.88	1.67
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (22.3%=Never, 25.2%=Very Infrequently, 24.8%=Infrequently, 17.5%=Sometimes, 6.8%=Frequently, 2.4%=Very Frequently, 1%=Always) <b>“I experience stress because I am not always able to protect my clients’ rights to privacy and informed consent.”</b>	2.71	1.37
1=Never 2=Very infrequently 3=Infrequently 4=Sometimes 5=Frequently 6=Very Frequently 7=Always (30.1%=Never, 41.7%=Very Infrequently, 12.1%=Infrequently, 12.1%=Sometimes, 2.9%=Frequently, 1%=Very Frequently, 0%=Always) <b>“I experience stress because I am unable to advocate for my clients in my job setting.”</b>	2.19	1.13

Higher disjuncture is associated with being credited with someone else's work and frustration over managed care and bureaucratic constraints. Moderate disjuncture is associated with the stress over the conflict regarding helping individuals and helping to improve social issues. Moderate disjuncture is also associated with physical contact with clients.

The items associated with overall lower disjuncture, with mean scores ranging from 3.14 to 2.19 are:

- "I experience stress because of the conflict between my individual clients' interests and my agency's interests, such as the need to meet the required number of service contracts per month."
- "I feel increased stress because, at times, my professional integrity has been compromised by practice realities."
- "I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning, or discharge planning."
- "I am frustrated at work by the absence of supervision and learning opportunities."
- "I experience stress because I am not always able to protect my clients' rights to privacy and informed consent."
- "I experience stress because I am unable to advocate for my clients in my job setting."

Some of the behavior scores synchronize with disjuncture scores. In Table 44, social workers almost never accept praise that belongs to someone else. In Table 45, they indicate that accepting praise belonging to someone else would be a strong stressor for them. In Table 44, advocating for clients is a strong behavior and in Table 45 stress about advocating for clients is very infrequent, presumably because they are able to advocate. In addition, frequent behavior that promotes self-determination may be contrasted with infrequent stress about not being able to promote behavior that promotes self-determination. Social workers also report that

they have the most difficulty helping people in need *and* addressing social problems. This is also the third highest stressor for social workers. On the face of it, there is an apparent relationship between disjuncture and behavior. This was confirmed by the negative correlation of  $-.45$  at the  $.01$  level between behavior and disjuncture, indicating that lower disjuncture scores may be found in the presence of behavior that is congruent with the Code.

## **Chapter 7 – Summary and Discussion of Findings**

### **Discussion of Hypotheses**

Two of the study's five hypotheses were borne out by the data. These were the first hypothesis and the fourth hypothesis. The first hypothesis predicted that social workers experience disjuncture when belief and behavior are discordant. The fourth hypothesis predicted that social workers will perceive that they have learned social work ethics by ethical teaching.

The first hypothesis stated that social workers experience disjuncture when belief and behavior scores are discordant. Although there was a moderate correlation of .17 between disjuncture and discordant belief/behavior scores, the result was significant at the .05 level, where disjuncture scores were positively associated with discordance of belief/behavior scores.

The highest correlation was a negative correlation between behavior scores and disjuncture scores, indicating that behavior that is highly congruent with the Code results in low disjuncture. Likewise, behavior that is outside the Code of Ethics results in high disjuncture. Behavior and disjuncture had a negative correlation of -.45, significant at the .01 level.

Although there was a positive relationship between belief and behavior, it was not significant. Ann Abbot's work is based on the assumption that values determine/influence behavior. (Abbott, 1988) Since a value may be construed as a kind of belief (a valued belief), and since the relationship between belief and behavior was non-significant, one may question the strength of Abbot's assumption that values determine behavior, based on the current data. If values determine/influence

behavior, one would expect a significant positive relationship between belief and behavior. The ideal outcome for social work would be a significant positive correlation between belief and behavior, for that would indicate that high belief scores are accompanied by high behavior scores, or a strong congruence between belief and behavior.

Finally, there is no correlation between belief and disjuncture. Strength of belief in the values of the Code does not relate to higher or lower disjunctive distress. Disjuncture is associated with discordant behavior/ belief scores and behavior that is not congruent with the Code. Thus behavior more than belief seems to indicate distress and disjuncture. The distress relates more to what social workers have to do on the job than to their essential values and beliefs.

The second hypothesis states that there is a positive correlation between higher levels of experienced disjuncture and employment in host (non-social work) settings. Social workers are more often employed in host settings than non-host settings. Higher disjuncture was found in host settings, but the correlation was not significant. In an independent sample t-test, the mean scores did not differ significantly, showing there is no more disjuncture in a host setting than in a non-host setting. In addition, there is no significant difference between belief scores, behavior scores or discordance scores in host or non-host settings.

Kurzman has suggested that there might be differences in constraints and supports in different settings. (Kurzman, 1984) These findings do not rule out this possibility. Constraints and supports can be idiosyncratic to the particular

organization, in which case the broadly defined categories of “host” versus “non-host” would not be appropriate classifications.

However, in terms of work setting, which included categories such as public agency, residential facility, private practice (solo or group), college, managed care, and private non-profit, there was a significant difference in mean disjuncture scores among the different categories. Social workers in managed care experienced the greatest disjuncture and social workers in group private practice experienced the least disjuncture. This is congruent with the analysis of individual items, wherein respondents said they frequently experienced disjuncture because of managed care.

Eliminating the categories where the numbers of respondents were too few, an ANOVA demonstrated significant differences in mean disjuncture scores among social workers in public agencies, solo private practice, and non-profit organizations, where social workers employed in public agencies had the highest disjuncture and those employed in private non-profit agencies had the lowest disjuncture scores.

The third hypothesis states that there is a correlation between levels of experienced disjuncture and social work education that does not require a separate course in social work. There was no significant relationship between disjuncture scores and the absence of a separate ethics course.

There was a significant relationship between belief and separate ethics courses, where, in an independent samples t-test, people who had taken separate ethics courses had significantly lower belief scores. The difference was significant at the .007 level. ( $t=2.72$ ) This indicates that separate ethics courses did not increase

belief in tenets of the Code for those who had a separate course. The separate ethics course may lead to the questioning of one's beliefs.

There is no relationship between mean behavior scores of those who had taken a separate ethics course and those who had not. However, separate ethics courses are significantly related to discordance scores. The mean discordance scores were higher for those who had not taken a separate ethics course. In this independent samples t-test,  $t=2.63$ ,  $p=.009$ . The separate ethics course may lead to a heightened awareness of discrepancies between belief and behavior.

In regard to the presence or absence of the separate ethics course, the critical point is that the presence of the separate ethics course reduces belief scores and the absence of that course increases the discordance between belief and behavior.

The fourth hypothesis states that social workers will perceive that they have learned social work ethics by having experienced ethical teaching. Social workers perceive that they have experienced the modeling of ethical teaching and that they have also learned ethics from this experience.

One question asks respondents their degree of agreement with the following statements: "My social work teachers and field work supervisors modeled ethics by ethical teaching. They modeled social work ethics by having a primary responsibility to their students, by respecting colleagues, and by keeping their commitments to their educational institution." Altogether, over eighty percent of social workers either "agree" or "strongly agree" that their teachers and supervisors modeled ethical teaching.

Another question asks, “Do you think you learned social work ethics from teachers who modeled ethical social work behavior?” It is a shifted lens for the previous question. Respondents are asked if they **learned** through the modeling behavior of the teachers. One presumes that learning takes place in first question, but the second question specifically asks if the learning occurred.

The responses for the second question are somewhat different than the responses for the first. Only sixty-four percent said they learned from teachers who modeled ethics, whereas over eighty percent of social workers agreed and strongly agreed that their teachers modeled ethics by their ethical behavior. This response may indicate that there is a difference between what students observe their teachers modeling and what they actually learn from this modeling behavior. Also, more students are neutral about what they learned from the modeled behavior than are neutral about having observed the teachers modeling ethical behavior.

In addition, although not stated as a hypothesis, there is a relationship between the experience of ethical teaching and disjuncture. There was not a significant difference between modeling of ethics and disjuncture. However, there was a significant relationship between **learning** from teachers who modeled ethics and low disjuncture. The correlation .17 which was significant at the .01 level, indicating that higher disjuncture scores were found where there was an absence of learning ethics from modeling.<sup>23</sup>

One-way ANOVAs yielded similar results: there was no significant difference in mean disjuncture scores of those who agreed or disagreed that they had

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<sup>23</sup> Learning ethics scores were expressed as 1=yes, 2-maybe, and 3=no.

experienced the modeling of ethical teaching; and there was significant difference in mean disjuncture scores of those who had learned from modeling and those who had not. ( $F=3.19$ ,  $p=.04$ ) It is interesting to note that, although a separate ethics course did not relate to disjuncture, absence of learning from modeling is significantly related to disjuncture.

The fifth hypothesis states that where social workers report concordant high behaviors and belief, but also report high experienced disjuncture, they will additionally report an absence of supervisory feedback.

The pilot had indicated that high belief and high behavior scores were, nevertheless, accompanied by high disjuncture scores. It had been expected, in the pilot, that high belief scores and high behavior scores would **not** be accompanied by high disjuncture scores. Social workers who believed in the Code and behaved according to the tenets of the Code had been expected to experience lower amounts of stress because they were not experiencing cognitive dissonance that resulted from discordant beliefs and behaviors. Therefore, this anomalous pilot finding had generated the hypothesis that when there is high behavior, high belief and high disjuncture, there is also a lack of perceived adequate supervisory feedback.

Correlations did not indicate that disjuncture was positively correlated to belief or behavior. The relationships between disjuncture/belief and disjuncture/behavior were both negative, although the belief/disjuncture negative relationship was not significant. The behavior/disjuncture relationship  $-.45$  was significant at the  $.01$  level.

The correlation between supervisory feedback scores and disjuncture scores was  $-.27$ . This is a moderate, but statistically significant negative correlation at the  $.01$  level, meaning that less feedback is related to higher disjuncture.

Finally, in an analysis of discordance scores and feedback scores, there was a non-significant negative relationship between feedback and discordance. This means that greater feedback was related to lower discordance of scores, although not significantly related. ( $r = -.12$  at the  $.08$  level)

In summary, there is a significant negative correlation between disjuncture and behavior; there is a significant negative correlation between supervisory feedback and disjuncture; there is a significant relationship between discordance and disjuncture; there is no significant relationship between discordance scores and feedback; and there is not any correlation between disjuncture and belief. One can conclude that higher disjuncture scores do not relate higher belief or behavior scores; lower amounts of supervisory feedback relate to higher disjuncture; and higher amounts of supervisory feedback do not relate to lower discordance scores.

### **Other Findings**

Social workers report that they only sometimes have supervision. They have clinical supervision slightly less than they receive general supervision. There is also less supervision in current jobs than in past jobs, indicating that supervision tapers off over time. Some social workers may be promoted to positions that provide less or no supervision. In addition, nearly eighty percent of social workers believe they value their work more when they have supervisory feedback.

Nearly sixty percent of subjects feel that ethics was integrated into each course and approximately forty-one percent feel that ethics was frequently or very frequently discussed. However, fifty-four percent said ethics was only sometimes to not frequently, or even never, discussed. Sixty-one percent of respondents believe their MSW ethics education was adequate. About twenty-two percent disagree. Thirty-seven percent of respondents had a separate course in ethics and for eighty-four percent of those who had separate courses, the course was required.

Ninety percent of respondents read the Code during their MSW education and only three percent of respondents have never read the Code. Reading the Code has become the trend in social work ethics education. About seventy-seven percent of respondents feel that they are familiar or very familiar with the Code.

### **Summary of Individual Behavior and Disjuncture Items**

Regarding the analysis of individual behavior items, the means range from the highest mean of 6.49 (very frequently) for treating people with care and concern and awareness of difference and diversity to the lowest mean of 4.69 (frequently) for helping people in need and addressing social problems. The lower score for this item indicates that social workers may be concerned about not doing enough to address social problems, or that they may have difficulty integrating “helping people in need” with “addressing social problems.” All the positively worded behavior means were in the frequent or very frequent categories. Among negatively worded behavior items, the means ranged from the highest mean of 2.12 (very infrequently) for

compromising professional integrity to the lowest mean of 1.31 (never) for accepting praise that belonged to someone else.

Regarding the analysis of individual disjuncture items, the disjuncture scores have the same direction, wherein a low score on the item indicates little disjunctive distress and a high score indicates greater stress. The means ranged from the highest mean of 6.67 (very frequently/always) for feeling discomfort at being credited for someone else's work to the lowest mean of 2.19 (very infrequently) for the difficulty advocating for clients. Social workers feel the greatest disjuncture over taking credit for someone else's work, the second highest disjuncture because of the constraints of managed care, and the least disjuncture carrying out their mandate to advocate for clients.

### **Limitations of the Study**

Limitations of the study include the possibility that the sample of respondents who did not respond (294) to the survey differs from the sample that did respond (206). In this case, the sample would differ from the universe, thereby reducing the validity of the study, despite evidence that reliability of the instrument has been established. It is possible that only social workers who have a higher investment in ethical practice responded to the questionnaire. The two hundred and ninety-four social workers who did not respond may be less ethical in practice, thereby yielding very different results. An example of sample differing from universe is the considerable experience (17 years mean) of social workers who responded. Social workers newer to the field are less represented in the sample.

The issue of what is known as the “social desirability bias” is also a possible limitation. When we know that other people are “watching” us, we will tend to behave in a way that we believe is socially acceptable and desirable. (Bandura, 1977) The social desirability bias is somewhat mitigated by the fact that the questionnaire was anonymous and no one was directly observing the respondents complete the questionnaire. However, there may have been some social workers who grasped the implications of having discrepant belief and behavior responses and therefore responded in the way that they thought would be more socially acceptable to the researcher.

In regard to social work ethics education, one must ask whether the social workers really learned from the modeling of ethical behavior when they responded that they had learned by this method of teaching. This was their perception, but the question does not really measure their learning from this modality.

In addition, the host setting versus non-host setting data was compromised by the fact that social workers did not indicate whether their “mental health” settings were host or non-host. That is, was the mental health setting embedded in a psychiatric hospital (host setting) or was it within a community social services center (non-host setting)? Thus, the number of host versus non-host settings was reduced by the exclusion of the mental health setting data. This problem would have been eliminated by a separate question that directly asked whether the social worker was employed in a social work or non-social work setting.

## **Chapter 8 – Implications for Social Work**

### **Importance of Supervision**

These findings have a number of implications. Social workers do experience disjuncture when belief and behavior are discordant. Therefore, awareness of discordance through supervision could potentially address this distress.

There is also a negative correlation between behavior and disjuncture, indicating that less stress is found in the presence of behavior that is congruent with the Code. Awareness of one's behavior in congruence with the Code, via supervisory feedback, can potentially ameliorate this distress, as well.

Also, beliefs are important, but they do not always determine behavior. Again, awareness of discordance through supervision could identify the disconnection between belief and behavior. More research should be done in this area as this was an unexpected outcome.

Finally, there is a significant relationship between lower supervisory feedback and higher disjunctive distress, once more indicating the probable value of supervision in decreasing distress. However, on the single item that asks about disjunctive distress and lack of supervision, social workers report that they do not experience disjuncture. This might indicate that they are not aware of the connection between stress and supervisory feedback, which, once again, points to the importance of such feedback.

Further complicating the issue of supervision, social workers say that they

value their work more when they receive supervision. However, supervision declines as experience increases. Therefore, the tendency towards decreased supervision should be reversed.

### **Implications of Setting Findings**

Social workers can be reassured that working in a social work setting or a non-social work setting (host versus non-host) is not going to make a significant difference in terms of disjunctive distress, beliefs congruent with the Code, behavior that is congruent with the Code, or discordance of belief and behavior.

Yet, despite the non-significance of social work setting versus non-social work setting in terms of disjuncture, social workers do experience differing levels of stress in the general categories of work setting. Workers in public agencies appear to experience significantly greater amounts of stress than workers in private non-profit organizations. This would imply that when making job choices, social workers might want to consider the work setting in terms of its potential stress.

Nevertheless, choosing the private sector over the public sector, based solely upon the potential for stress, actually creates another dilemma for the social worker who has an obligation to all of society. Public agencies may want to engage in serious program evaluation in order to determine the individual factors that are contributing to the increased stress in these work settings. A very few of these factors can be pointed out by the analysis of individual disjuncture items, such as frustration over managed care and bureaucratic constraints, as well as difficulty with the delicate balance between helping people in need and addressing larger social issues.

Social workers in solo private practices experience more disjuncture than social workers in private agencies and less disjuncture than social workers in public agencies. This may relate to the fact that many private practitioners have no supervision at all, whereas workers in private agencies have colleagues with whom they can informally discuss ethical issues that might arise. In fact, private practitioners who are in group practices have the least disjuncture of all.

### **Implications for Social Work Education**

Ethics education is important, but not having had a separate course in ethics does not increase disjunctive distress. Belief in the Code appears weaker in those who have taken separate ethics courses. Discordance is also lower in those who have taken a separate ethics course. This could be Festinger's first pattern of behavior in his cognitive dissonance theory: the presence of inconsistency that is psychologically uncomfortable motivates a change in belief, attitude, or behavior to accommodate the inconsistency. (Garfield & Bergin, 1979; March, 1997; Crabtree, 2001) In this case, the social worker who has taken the separate ethics course may be uncomfortable about the inconsistency (awareness of any discordance between belief and behavior), might be motivated to change belief (reduce belief) in the Code, which then accommodates the inconsistency by reducing the overall discordance.

Additionally, there is no relationship between ethical behavior and having taken a separate ethics course. Therefore, separate ethics courses have advantages and disadvantages. A disadvantage, not addressed by this study, is the difficulty of fitting so many courses into a two year curriculum. The accommodation of the vast

array of material that needs to be included in the social work curriculum is an unresolved dilemma for social work curriculum planners.

Since separate ethics education decreased belief, increased discordance, but did not increase disjuncture or increase ethical behavior, more research in this area is recommended. Overall, the modeling of ethics appears to be a viable means of ethics education which does not presume a separate ethics course or an elective course. However, ethics should be integrated into the curriculum at every level, as all respondents indicate, in addition to being integrated into field work and supervision.

Regarding the overall modeling of ethics, social workers perceive that they have experienced the modeling of ethical teaching and that they have also learned ethics from this experience. More students report the experience of having had ethical teachers than report learning from ethical teachers. However, there is less disjunctive distress when students report that they have actually learned from the modeling experience, rather than having merely observed the modeling. Therefore, although modeling ethics is an effective educational tool, it is more effective when the student learns from this too, rather than merely observing the ethical modeling. It is recommended that more research be done in this area, as well.

### **Summary of Recommendations for Future Research**

As noted, more research needs to be done in the area of beliefs and behavior, since beliefs did not determine behavior and this was an unexpected finding. As also mentioned above, public agencies may want to do program evaluation to identify individual factors that are contributing to increased stress in public agencies.

Additionally, since this was a national sample survey, it would be interesting to see some research on the struggles that individual social workers experience in relation to ethical dilemmas and the Code of Ethics. Since there are few instruments available, researchers should feel encouraged to develop and validate new instruments that measure social workers' ethical beliefs, values, behavior and disjuncture.

Further research could also include exploring whether the number of years of experience in the field relates to belief, behavior, discordance and disjuncture. Additionally, further research could be done on individual behaviors or situations that increase tension or disjunctive distress. Specifically, more research should be done in the distress caused by systemic pressures, such as managed care. And, although other studies have asked social workers about the Code, whether they use it, and whether it is unrealistic, these subjects are always worthy of revisit.

Further research should be done regarding the teaching of social work ethics and whether the infusion of ethics into the entire curriculum is sufficient. All respondents indicated that this was important, but the question of whether a separate required course or a separate elective course enhances this ethics education remains unresolved. Also, how the infusion occurs is salient. That is, does the educational institution tack an ethics discussion to the end of each course, or is it integrated throughout each course offering? Moreover, is it fully integrated into fieldwork?

In addition, studying students while they are actually in their MSW programs, as opposed to after they are finished, might be fruitful, as well. Also mentioned above, research should be done on the efficacy of teaching ethics by the modeling of

ethical teaching. Finally, we should look at whether we are creating more or less disjuncture and discordance when we use the different modalities for teaching social work ethics.

### **Other Recommendations**

It is recommended that all public agencies and private agencies -- whether they be host or non-host settings -- as well as private practitioners, seek to increase opportunities for social work supervision. Policy statements to this effect, made by NASW and CWSE, could greatly facilitate this outcome.

It is recommended that MSW education include the modeling of ethics by ethical teaching. Perhaps students could be given copies of the Lewis model and asked to apply it during course evaluations. In this case, instructors would need to be familiar with the model and would be aware that they are to be evaluated by this measure at the end of the semester.

A separate course in ethics, having both advantages and disadvantages, may well be left to the discretion of individual social work education programs until the aforementioned research can shed more light on the implications of different teaching modalities.

It is recommended that individual practitioners utilize the Reamer audit tool to evaluate their own practices. This will tell them if they are risk for lawsuit or complaint. It will help them manage risk by identifying ethical issues in the practice setting; assess the ethical adequacy of current practices; create strategies to modify current practices when necessary; and monitor the ongoing implementation of ethical

practices. (Reamer, 2001b) This tool can also be adapted for program evaluation research purposes.

### **Implications for Ethical Theory**

When we look at the rules, or the Code of Ethics, there is evidence that social workers recognize the obligations and prohibitions (theory of duty) in terms of belief and behavior. This recognition of the profession's duties is reflected by the social workers' high belief and behavior scores.

The NASW Code of Ethics is the deontological aspect of this study. The study has not focused on the anticipation of the consequences of our actions (what happens when we do or do not follow the mandates of the Code), and in this regard it is not teleologically oriented. However the disjuncture that is associated with discordance is certainly a teleological consequence that is noteworthy for the profession.

None of this resolves the question of whether social work values are inherently deontological or teleological. Moreover, that was not the purpose of the study. Regarding this issue of the nature of social work values, Reamer succinctly summarizes this issue. (Reamer, 2005, Appendix E(F)) To reiterate his words:

I argue that in a profession that is as applied as social work, one must think in terms of potential/actual consequences (teleology); however, our focus on the ends must be tempered by our obligation to respect and promote certain fundamental rights and duties (the deontological component).

A related ethical theory implication is in regard to the mission abandonment debate, or the cause versus function dialogue. The lowest mean score on the individual behavior items was for helping people in need and addressing social

problems. This indicates that social workers may be concerned about not doing enough to address social problems, or that they might be having trouble integrating “helping people in need” with “addressing social problems.” This could be interpreted to mean that social workers continue to struggle with the “function” of helping people in need and the “cause” of addressing social problems, or promoting social justice. It is suggested that, again, supervisory feedback and discussion could ameliorate this difficulty.

## **Appendix A                      Questionnaire**

### **Section I. Abbott Professional Opinion Scale – 32-item short-form\*\***

**For each question, circle one response that comes closest to your own opinion or belief.**

**1) All direct-income benefits to welfare recipients should be in the form of cash.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**2) The employed should have more government assistance than the unemployed.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**3) Sterilization is an acceptable method of reducing the welfare load.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**4) There should be a guaranteed minimum income for everyone.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

\*\*Copyright Ann Abbott, 1988.

Abbott, (2003). A Confirmatory Factor Analysis of the Professional Opinion Scale: A Values Assessment Instrument. Research on Social Work Practice 13(5), pp. 641-666.

Abbott, Anne A. (1999). Measuring Social Work Values: A Cross-Cultural Challenge for Global Practice. International Social Work 42(4), pp. 455-470.

Abbott, Anne A. (1988). Professional Choices: Values at Work. Silver Spring, MD.: NASW Press.

5) **The federal government has invested too much money in the poor.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

6) **The government should not redistribute wealth.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

7) **Retirement at age 65 should be mandatory.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

8) **Women should have the right to use abortion services.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

9) **The FBI (government) should keep files on individuals with minority political affiliation.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

10) **The government should not subsidize family planning programs.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

11) **The mandatory retirement protects society from the incompetence of the elderly.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

12) **Welfare mothers should be discouraged from having more children.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**13) Family planning should be available to all adolescents.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**14) Capital punishment should not be abolished.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**15) The government should provide a comprehensive system of insurance protection against the loss of income because of disability.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**16) Mandatory retirement based on age should be eliminated.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**17) The death penalty is an important means for discouraging criminal activity.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**18) The aged require only minimal mental health services.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**19) Welfare workers should keep files on those clients suspected of fraud.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**20) Only medical personnel should be involved in life and death treatment decisions.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**21) Pregnant adolescents should be excluded from school.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**22) Students should be denied government funds if they participate in protest demonstrations.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**23) Juveniles do not need to be provided with legal counsel in juvenile courts.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**24) Corporal punishment is an important means of discipline for aggressive, acting-out adolescents.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**25) Unemployment benefits should be extended, especially in areas hit by economic disaster.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**26) It would be better to give welfare recipients vouchers or goods rather than cash.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
1	2	3	4	5

**27) The gap between poverty and affluence should be reduced through measures directed at redistribution of income.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**28) Efforts should be made to increase voting among minorities.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**29) Family planning services should be available to individuals regardless of income.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**30) Older persons should be sustained to the extent possible in their own environments.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**31) The child in adoption proceedings should be the primary client.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**32) A family should be defined as two or more individuals who consider themselves a family and who assume protective, caring obligations to one another.**

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**Turn to next section.**

## Section II

For each question, circle one response that comes closest to your own experience.

1) I feel stress because, at my job, it is hard to treat people with care and respect, as well as be mindful of differences and diversity.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

2) My job lacks adequate social work and clinical supervision.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

3) It would bother me if I accepted payment for a referral.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

4) I feel stress when I am at work because I am not always able to help people in need with their personal problems *and* help them improve larger social issues.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

5) As a social worker, I promote client self-determination in such areas as program admissions, service planning, or discharge planning.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

6) I experience stress because I am not always able to protect my clients' rights to privacy and informed consent.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

7) I feel increased stress because, at times, my professional integrity has been compromised by practice realities.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

8) I am able to facilitate change in the lives of my clients.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

9) I have had physical contact with clients when I could not be certain there would be no harm.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

10) At work, I treat people with care and respect and I am mindful of differences and diversity.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

11) I experience stress because of the conflict between my individual clients' interests and my agency's interests, such as the need to meet the required number of service contacts per month.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

12) I feel stress because I am not always able to promote client self-determination in such areas as program admissions, service planning or discharge planning.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

13) At my job, I am able to protect my clients' rights to privacy and informed consent.

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**14) I would feel uncomfortable if I were credited for someone else's work.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**15) As a social worker, I have experienced frustration because managed care and bureaucratic constraints often require termination before the client has been able to change.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**16) In my job, I have accepted praise that belonged to someone else.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**17) I advocate for my clients in my job setting.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**18) I have accepted payment for referrals made to me.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**19) I experience stress because I am unable to advocate for my clients in my job setting.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**20) At your job, how often do you help people in need *and* address social problems?**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

**21) When I observe a conflict between my individual clients' interests and my agency's interests, I try to resolve this dilemma.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>

**22) I feel uncomfortable when I have had physical contact with clients.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>

**23) Despite all intentions to do otherwise, there have been times when I have had to compromise my professional integrity in my job setting.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>

**24) I am frustrated at work by the absence of supervision learning opportunities.**

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>

**25) When I receive supervisory feedback, I value the quality of my work more.**

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**Turn to next section.**

### Section III

For each question, circle one response that comes closest to your own experience.

1) My ethics training at the MSW level was primarily accomplished by the integration of ethical issues into each course.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

2) My social work teachers and field work supervisors modeled ethics by ethical teaching. They modeled social work ethics by having a primary responsibility to students, by respecting colleagues, and by keeping their commitments to their educational institution.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

3) In your MSW field work practicum and supervision, how often were ethical issues discussed?

Never	Very infrequently	Infrequently	Sometimes	Frequently	Very frequently	Always
1	2	3	4	5	6	7

4) I feel that my MSW level education provided me with adequate ethical education.

Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1	2	3	4	5

5) My ethics training at the MSW level included a separate course in ethics and social work.

Yes No

6) Was this separate course a required course?

Yes No

7) Did you read the NASW Code of Ethics during your MSW education?

Yes No

8) **Have you ever read the NASW Code of Ethics?**

**Yes**

**No**

9) **Please answer the following questions about social work ethics in MSW programs.**

a) **Should there be a required ethics course?** **Yes** **Maybe** **No**

b) **Should there be an elective ethics course?** **Yes** **Maybe** **No**

c) **Should ethics be integrated into all coursework?** **Yes** **Maybe** **No**

d) **Should ethics be integrated into fieldwork and supervision?** **Yes** **Maybe** **No**

e) **Do you think you learned social work ethics from teachers who modeled ethical social work behavior?** **Yes** **Maybe** **No**

**Turn to next section.**

## Section IV

Please check all appropriate setting, practice, and work function information as it applies to you. Check the ones that come closest to what you do in the major portion of your job.

1) **CURRENT JOB** (Check one)

**Work Setting**

Public Agency or Organization \_\_\_\_\_

Private Not-for-Profit Agency or Organization \_\_\_\_\_

Proprietary for-Profit Agency or Organization \_\_\_\_\_

College/University \_\_\_\_\_

Managed Care \_\_\_\_\_

Private Practice -- Group \_\_\_\_\_

Private Practice -- Solo \_\_\_\_\_

Residential Facility \_\_\_\_\_

Other \_\_\_\_\_ (Please identify)

Not employed in social work \_\_\_\_\_

2) **Practice** (Check one)

Family Service \_\_\_\_\_

School Social Work – Preschool through 12<sup>th</sup> Grade \_\_\_\_\_

Social Work in Mental Health Setting \_\_\_\_\_

Social Work in Health Setting \_\_\_\_\_

Child Welfare \_\_\_\_\_

Public Welfare \_\_\_\_\_

Community Development \_\_\_\_\_

Addiction Services \_\_\_\_\_

Services for the Aged \_\_\_\_\_

Corrections/Justice \_\_\_\_\_

World of Work (Union, Employee Assistance Program) \_\_\_\_\_

Community Centers/ Settlements \_\_\_\_\_

Physical or Developmental Disabilities \_\_\_\_\_

Services to the Homeless \_\_\_\_\_

AIDS-related work \_\_\_\_\_

Other \_\_\_\_\_ (Please identify)

3) **Function** (Check one)

Administration/Management \_\_\_\_\_

Clinical/Direct Practice \_\_\_\_\_

Community Organization \_\_\_\_\_

Group Work \_\_\_\_\_

Research \_\_\_\_\_

Policy Development \_\_\_\_\_

Supervision \_\_\_\_\_

Teaching \_\_\_\_\_

Agency-Based Training \_\_\_\_\_

Other \_\_\_\_\_ (Please identify)

- 4) In what state do you practice? \_\_\_\_\_
- 5) I'd characterize my work setting as Rural\_\_\_ Suburban\_\_\_ Urban\_\_\_  
(Check one)
- 6) Age\_\_\_\_\_
- 7) Gender: male\_\_\_ female \_\_\_ (Check one)
- 8) Number of years of experience as an MSW \_\_\_\_\_
- 9) Date of graduation from MSW program \_\_\_\_\_
- 10) How often do you have supervision or supervisory feedback in your current job?  
Never\_\_\_ Sometimes\_\_\_ Often\_\_\_ Very Often (1x/wk or more)\_\_\_
- 11) How often do you have clinical supervision or feedback in your current job?  
Never\_\_\_ Sometimes\_\_\_ Often\_\_\_ Very Often (1x/wk or more)\_\_\_
- 12) How often, in the past have you had supervisory feedback in your job?  
Never\_\_\_ Sometimes\_\_\_ Often\_\_\_ Very Often (1x/wk or more)\_\_\_
- 13) How often, in the past have you had clinical supervisory feedback in your job?  
Never\_\_\_ Sometimes\_\_\_ Often\_\_\_ Very Often (1x/wk or more)\_\_\_
- 14) How familiar are you with the NASW Code of Ethics?  
Not Familiar\_\_\_ Somewhat Familiar\_\_\_ Familiar\_\_\_ Very Familiar\_\_\_

**Appendix B****Cover Letter**

385 South End Avenue  
Apartment 7B  
New York, NY 10280  
July 1, 2004

Dear NASW Member:

I am a doctoral student in the Social Welfare Program of the City University of New York at Hunter College. I am conducting research for my dissertation on social workers and the NASW Code of Ethics. NASW provided me with a random sample of MSW members across the United States, which is how you have come to receive this letter.

Those of you who respond to this questionnaire are assured anonymity. Therefore, it is important to avoid placing your name or address anywhere on the questionnaire or on the stamped return envelope.

I hope you will take the time to answer these questions. They should take only fifteen minutes to complete. I have also included a page which reviews basic tenets of the NASW Social Work Code of Ethics. Please read this basic tenets page before beginning the questionnaire. In addition, if you are retired or unemployed, please answer the questions from your prior work experience.

Your response is greatly appreciated and valued. The aggregate results of this research will be posted on a website by September, 2006. The address of this website is <http://nelsonworks.hispeed.com>.

I thank you for your time and assistance.

Sincerely yours,

Nikki Nelson DiFranks, CSW

**Appendix C** (mailed with the questionnaire)

**Basic Tenets of the NASW Code of Ethics**

The NASW Code of Ethics is composed of six ethical principles that reflect the values of service, social justice, dignity and worth of the individual, importance of human relationships, integrity, and competence. These principles are:

- 1) Social workers' primary goal is to help people in need and to address social problems.
- 2) Social workers challenge social injustice.
- 3) Social workers respect the inherent worth and dignity of the person.
- 4) Social workers recognize the central importance of human relationships.
- 5) Social workers behave in a trustworthy manner.
- 6) Social workers practice within their areas of competence and develop and enhance their professional expertise.

The NASW Code of Ethics is also composed of ethical standards that are relevant to the professional activities of social workers. These standards concern the following:

- 1) Social workers' ethical responsibilities to clients.
- 2) Social workers' ethical responsibilities to colleagues.
- 3) Social workers' ethical responsibilities in practice settings.
- 4) Social workers' ethical responsibilities as professionals.
- 5) Social workers' responsibilities to the social work profession.
- 6) Social workers' ethical responsibilities to the broader society.

Examples of ethical standards include the following:

**1.10) Physical Contact** – Social workers should not engage in physical contact with clients when there is a possibility of psychological harm to the client as a result of the contact (such as cradling or caressing clients).

**2.06c) Referral for Services** – Social workers are prohibited from giving or receiving payment for a referral when no professional service is provided by the referring social worker.

**4.08b) Acknowledging Credit** – Social workers should honestly acknowledge the work of and the contributions made by others.

Appendix D**IRB Approved Consent Form**

PROTOCOL #:  
 HC- 060411200



Of The City University of New York

Informed Consent Form

The researcher, Nikki DiFranks, is a doctoral student at the City University of New York Social Welfare Program at Hunter College School of Social Work. She is conducting a study about the NASW Code of Ethics among social work members of NASW. Her dissertation will be based on the findings of this study which will help inform social workers about their ethical beliefs and behaviors.

You have been randomly selected for this survey as an MSW member of NASW. The initial survey will be mailed to 500 MSW members, with an anticipated return of 200 questionnaires.

If you choose to participate in the study, you will be asked to complete the enclosed self-administered questionnaire consisting of seventy-six questions. The survey should take approximately 15 minutes to complete. The survey can be completed in a place of your own choosing and at your own leisure.

Your participation is entirely voluntary and declining to participate will not affect you in any way. In addition, you may change your mind about completing the survey at any time.

Answering the survey should involve minimal risk to you. As a participant you might feel anxious if you think your beliefs and behaviors in regard to the NASW Code of Ethics are not congruent. However, the study might make participants more aware of discrepancies between what they believe and how they behave. There are no direct benefits to you from your participation in this research.

The information you provide for this study is anonymous and thereby confidential. No one will know how you responded to these questions. Please do not put your name or identifying information on this questionnaire in order to maintain anonymity.

Returned surveys will be kept in a locked file cabinet to which only Nikki DiFranks has access. The information will be used only for the researcher's dissertation project and for possible publication in a professional journal. When the study is completed, materials will be stored for three years and then destroyed. Findings will be available at the following website address: <http://nelsonworks.hispeed.com> before September 2006.

By completing and returning this questionnaire, you are affirming that you have read this informed assent and agree to participate. Please return the completed questionnaire in the stamped return envelope.

If you have any questions about the research, you can contact the researcher, Nikki DiFranks at (917) 860-9057, or her faculty advisor, Michael J. Smith at (212) 452-7029. You should contact the Office of Research Administration at (212) 772-4020, if you have questions regarding your rights as a subject or if you feel you have experienced a research-related injury.

Nikki DiFranks, CSW Nikki DiFranks, CSW Date May 7, 2004

HUNTER COLLEGE OF C.U.N.Y.  
 COMMITTEE FOR THE PROTECTION  
 OF HUMAN SUBJECTS  
 APPROVED:  
 FROM 4/22/04 TO 4/22/05

**Appendix E****Correspondence with Dr. Ann Abbott and Dr. Frederic Reamer**

- A. Email to Ann Abbott, dated 09-15-03.**
- B. Email from Ann Abbott, dated 09-18-03.**
- C. Letter from Ann Abbott, dated 09-29-03**
- D. Email to Ann Abbott, dated 10-06-03**
- E. Email to Frederic Reamer, dated 03-20-05**
- F. Email from Frederic Reamer, dated 03-21-05**

**A. Email to Dr. Ann Abbott, dated 09-15-03**

Dear Dr. Abbott--

I am a social work doctoral candidate at City University of New York (CUNY) at Hunter. My dissertation is developing in the direction of a comparison of beliefs regarding the NASW Code of Ethics, behaviors regarding the Code, and predicted disjuncture when these are discrepant.

I am hoping to utilize the POS -- short form -- as one section of my instrument. I am hoping you can please let me know what to do, legally and ethically, in order to make use of this scale.

Thank you for your assistance.

Sincerely yours,

Nikki DiFranks, CSW (PH) 1-917-860-9057  
[neysa@nyc.rr.com](mailto:neysa@nyc.rr.com)

**B. Email from Dr. Ann Abbott, dated 09-18-03**

Dear Nikki,

This e-mail is in response to your request to use the 40-item version of the Professional Opinion Scale (POS) in your doctoral dissertation research. I would request that you reference the scale as the 40-item version of the Professional Opinion Scale (Abbott, 1988). I also would ask that you share a description of how you will be using the POS, followed by your findings, and a summary of your experiences using the scale. If you have not already seen it, you should read Abbott, A.A. (2003) Confirmatory factor analysis of the Professional Research Scale: A values assessment instrument. *Research on Social Work Practice*, 13(5), 641-666. The initial development of the POS (Abbott, 1988) was based on exploratory factor analysis. The article mentioned about employs confirmatory factor analysis to confirm the scale's strength as a values assessment instrument.

I would be pleased to send you a copy of the 40-item POS for your review and use. I also presume that you will need instructions for scoring the 40-item version. Depending on the size of your sample, you may choose to use an answer sheet such as the NCS General Purpose Scan sheet which can be scored electronically. This method is easier for data entry and also reduces the possibility of entry errors. If you choose this option, I would suggest that you meet with someone from your computer center to identify an appropriate form that can be scored using their equipment.

Please send your mailing address so that I can forward a copy of the scale and scoring information.

I wish you well with this project and look forward to learning of your experiences. As suggested above, I would greatly appreciate a copy of your dissertation with commentary about your experiences using the POS.

Please get back to me if you have specific questions.

Sincerely,

Ann Abbott

Ann A. Abbott, Ph.D., ACSW, LCSW  
Professor and MSW Program Director  
West Chester University  
Graduate Social Work Department  
Reynolds Hall  
West Chester, PA 19383  
(610)738-0351  
(610)738-0375 (fax)

### C. Letter from Dr. Ann Abbott, dated 09-29-03



Graduate Department of Social Work  
West Chester University  
West Chester, Pennsylvania 19383-2250

610-436-2664  
fax: 610-738-0375  
www.wcupa.edu



September 29, 2003

Nikki DiFranks  
385 South End Avenue  
Apt. 7B  
New York, New York 10280

Dear Nikki:

This letter is in response to your request to use the 40-item version of the Professional Opinion Scale (POS) in your dissertation research. Based on our previous correspondence regarding your project, I do believe that the 40-item version of the POS would be a suitable instrument. I would request that you reference the scale as the 40-item version of the Professional Opinion Scale (Abbott, 1988). If you imbed the items in a larger scale, the use of asterisks for the 40-items incorporated into your larger instrument is sufficient. Please note: NASW Press made a mistake; my degree is the Ph.D., not the DSW as indicated.

I am enclosing a copy of the 40-item POS for your review and use. As you know, I recently used confirmatory factor analyses (N=1005) to reaffirm the suitability of the 40-item version of the POS as a data collection/assessment instrument. You may decide to use the complete 40-item version or condense it to the 32-item version supported by the confirmatory factor analysis (Abbott, 2003).

I am sending you instructions about the scoring of the 40-item version. Depending on the size of your sample, you may choose to use an answer sheet such as the NCS General Purpose Scan sheet, which can be scored electronically. This method is easier for data entry and also reduces the possibility of entry errors. If you choose this scoring option, I would suggest that you meet with someone in your computer center to identify an appropriate form that can be scored using their equipment.

Abbott, September 29, 2003  
 Re: POS, 40-item version

Please note: You probably can tell, by reading the items in the POS, which ones should be scored positively and which ones negatively. For your convenience, I offer the following:

For the following items:      Strongly Agree = 5  
    Agree = 4  
    Neutral = 3  
    Disagree = 2  
    Strongly Disagree = 1

Items 1, (2), (5), 6, (7), 11, (12), 18, 20, 21, (23), 31, 33, (34), (35), (36), 37, 38, 39, 40.

For the remaining items:      Strongly Agree = 1  
    Agree = 2  
    Neutral = 3  
    Disagree = 4  
    Strongly Disagree = 5

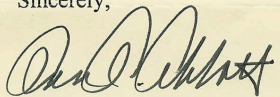
*circled #'s  
 are omitted  
 in 32-item.  
 N.D.C. notation*

The information given above is for the 40-item version of the POS. If you decide on the 32-item version, delete items 2, 5, 7, 12, (14), 23, 34, 36 from the 40-item version.

*↳ not a reversed item. N.D.C. notation*

I wish you well with this project and look forward to learning of your experiences. I would greatly appreciate receiving a copy of your dissertation together with commentary about your experiences using the POS. Please do not hesitate to contact me if you have any additional questions. My office number is 610-738-0351 and my e-mail address is: [aabbott@wcupa.edu](mailto:aabbott@wcupa.edu)

Sincerely,



Ann A. Abbott, Ph.D., ACSW  
 Professor and MSW Program Director

Enc: 40-item POS

**D. Email to Dr. Ann Abbott, dated 10-06-03**

Dear Dr. Abbott,

Today I received in the mail your directions for scoring the 40-item POS, as well as the 32-item version. Thank you so much!

I will certainly send you a copy of my dissertation and my comments on the process of having used the POS. I will also be certain to properly cite your work.

At this point I have not decided whether to use the 32-item or the 40-item version. The 32-item version is very tempting because of the CFA which you have completed and published. I will have a discussion about this with my committee and will probably go with whatever they advise. It is comforting to know, however, that either version will suit my purposes, as you mentioned in your correspondence to me dated 9/29/3.

In the meantime, I am very grateful for your swift response to my questions and needs. I will stay in touch with you. You may be interested in my instrument as it develops. I am intending that your POS be the first section.

Sincerely yours,

Nikki DiFranks

**E. Email to Dr. Frederic Reamer, dated 03-20-05.**

Dear Dr. Reamer,

I am finishing up my dissertation in social work ethics at CUNY. I have studied social workers and the NASW Code of Ethics in terms of beliefs, behaviors, and disjuncture (disjunctive distress). Among other questions, I also looked at the relationship between discordant belief/behavior scores and disjuncture. On July 1, 2004, I mailed a questionnaire to a random sample of 500 social workers across the United States and received 206 returns. Since that time, I have been analyzing the results and hope to be finished in time for a May graduation.

Your work has been a great help to me in my research. I cite you often, especially in my literature review.

I am curious about whether you consider yourself to be a deontologist or a teleologist. My guess is that you would say, "Neither," or "both." After all, in your ethical decision-making protocol you use both processes.

As someone who is self-taught in ethics, I find I am frequently asking myself: is this a teleological argument or is it a deontological argument? If I were more schooled in the subtleties of the two frameworks, I might not need to dichotomize them in such a rigid manner. (I recall one study that examined the decision-making processes of social workers. Social workers new to the field used deontological arguments and more experienced social workers used arguments that combined teleological and deontological approaches.)

Alas, in my stage of development as an ethicist, I am a bit like the new social workers: I want a neat "box" for everything. Do you fit into either of those boxes, or is this just an irrelevant question?

Thanking you for your time, I am

Sincerely yours,

Nikki Nelson DiFranks

**F. Email from Dr. Frederic Reamer, dated 03-21-05**

Thank you for your message. Your project sounds quite interesting.

My short answer to your complex question is that, no, I don't think of myself as a neat-and-tidy teleologist or deontologist. In a number of my publications I try to argue that each of these perspectives, in their purest forms, has strengths and limitations. The framework that I developed in the early 1980s, and which I continue to endorse, draws on the best elements of these views and tries to avoid their pitfalls. I argue that in a profession that is as applied as social work, one must think in terms of potential/actual consequences (teleology); however, our focus on the ends must be tempered by our obligation to respect and promote certain fundamental rights and duties (the deontological component). I have found John Rawls's and Alan Gewirth's essays very helpful in this regard. So, I think it's a fair to say that I try to blend the two views in a way that's consistent with social work values and standards.

More recently I've also incorporated elements of the "virtue ethics" perspective (see, for example, Alasdair MacIntyre's *After Virtue* and Beauchamp and Childress' *Principles of Biomedical Ethics*, which includes a practical application of virtue theory). I think there's a great deal of valuable material in this literature; also, the virtue ethics approach is quite compatible with much of what one finds in social work ethics. When I chaired the committee that wrote the NASW Code of Ethics (1994-96), I found myself actively incorporating and applying concepts from all three approaches: teleology, deontology, and virtue ethics (you'll see evidence of this in the code's preamble, summary of core values, ethical principles and ethical standards). At this point in my career I tend to argue that the teleology/deontology split is too limiting; I think we need to add in the virtue ethics component.

Best wishes.

Frederic G. Reamer, Ph.D.  
Professor  
School of Social Work  
Rhode Island College  
Providence, RI 02908  
voice: 401-456-8248  
fax: 401-456-8620

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